TRAUMA-INFORMED APPROACHES IN GLOBAL MENTAL HEALTH

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Key Takeaways

✔ Being trauma-informed is a survivor-centered approach based on six core principles: safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment voice and choice, and cultural, historical, and gender issues.

✔ When implementing a trauma-informed approach, the delivery context, the intersectionality between trauma and social or environmental factors, and the power dynamics between providers and those receiving care should all be considered.

✔ Trauma-informed principles were developed in Western settings and may need to be contextualized for application in Global South contexts. Careful consideration of how principles should be applied and/or modified to fit local contexts may ensure that care is delivered in a way that is beneficial and not harmful to target populations.

✔ Organizational trauma-informed approaches may include:

　o Leadership that champions and implements trauma-informed principles such as safety, respect, empowerment, and collaboration.

　o Staff training to increase understanding and recognition of the impact of trauma, and skills-building workshops to increase the ability of staff to appropriately respond to individuals who have experienced trauma.

　o Incorporation of trauma-informed principles into organizational policies.

　o Fostering a culture of staff well-being that includes access to supervision and support, encourages self-care practices, and assesses and addresses secondary trauma and burnout.

Why are Trauma-Informed Approaches in Global Mental Health Important?

- **Reduce** the chance of harm by increasing understanding of trauma and improving support for those who have experienced trauma.

- **Focus** on population and systems-level approaches to address trauma and its impact.

- **Promote** awareness building which can, in turn, reduce stigma and discrimination.

- **Encourage** partnerships and collaborations to empower local communities, governments, and policymakers.

Promising Approaches

Modify trauma-informed approaches to fit the contexts where they are being delivered.

　o Identify and address local ethical and contextual considerations to ensure a safe physical and emotional environment for those receiving and delivering care.

　o Invest in research to understand the effectiveness and implementation of contextualized trauma-informed protocols and practices.

Ensure the voices of local stakeholders guide trauma-informed approaches throughout implementation, using a reflexive and iterative process to modify interventions as needed.

A stakeholder committee, including individuals with lived experience, should direct the process. This committee should also advise on continued changes necessary to meet their needs and uphold trauma-informed principles. They should be consulted for evaluation after changes are made or new services are delivered to confirm that the needs of staff and service users are still being met.

Prioritize training of primary care providers and community health workers in locally contextualized trauma-informed practices to prevent re-traumatization of service users and secondary traumatic stress in service providers.

Establish organizational policies and practices that incorporate trauma education, encourage staff mental healthcare, and support peer and professional support structures.

Trauma-informed humanitarian approaches

- Invest in training programs to educate humanitarian workers on the impact of trauma and how it intersects with gender, culture, and other factors.

- Prioritize physical safety and staff support for humanitarian workers who have been or are deployed to challenging and complex settings.

- Support programs and practices that empower survivors and promote active participation in the recovery process and implementation of support services.

Trauma-informed development approaches

- Collaborate with local and national governments to integrate trauma-informed principles into policies, priorities, and funding mechanisms.

- Incorporate mental health considerations across development programs and services. This may include integrating mental health promotion, prevention, and treatment into primary care, and mental health awareness campaigns.

- Invest in training programs to increase development workers understanding of the historical, systemic, and institutionalized trauma that individuals and communities may have experienced.

Introduction

Background

People who have been impacted by development challenges or humanitarian crises are often exposed to a host of distressing experiences such as the loss of loved ones, injury, and displacement from their homes and communities. Taken together, these experiences may result in harmful mental and psychosocial outcomes. This evidence brief will provide an overview of trauma-informed approaches and how they address the possible impacts of trauma on individuals and communities. A review of trauma-informed approaches in global mental health and promising approaches will be provided.

Search Strategy

A review of the literature was conducted across several databases, including PsycINFO, EBSCO, and PubMed. Search terms included "trauma-informed care," "trauma-informed interventions," "TIA low-and middle-income countries (LMICs)," "TIA evidence-based treatment," and "TIA in (region)." Grey literature from the Substance Abuse and Mental Health Services Administration (SAMHSA) and other sources were also reviewed and included. The search yielded 20 resources whose primary authors represented countries including India, Kenya, Nigeria, Pakistan, and Zimbabwe. Articles published in Spanish, Mandarin, and English were included in this brief.

Trauma-Informed Principles

Trauma-informed constructs emerged from the recognition of the profound impact that potentially traumatizing events can have on people's lives and well-being. Trauma-informed approaches represent a significant shift in how individuals and organizations respond to trauma, from a problem-focused model that identifies deficiencies in an individual's thoughts, emotions, or behaviors, to a strengths-based approach that seeks to understand a person's experience with potentially traumatizing events and how it has impacted them.[1] Trauma-informed approaches focus on recognizing that individuals respond to such events in a variety of ways, and acknowledging that potentially traumatic events can have a long-lasting impact on a person's behavior, well-being, and relationships. This survivor-centered approach seeks to provide safe environments that are sensitive to survivors needs[2] and are often implemented in healthcare, social service, education, and criminal justice systems. Trauma-informed approaches involve recognizing and understanding the signs and symptoms of trauma and providing compassionate care to trauma-exposed individuals.[3] Trauma-informed approaches are not the same as treatment; rather, they aim to increase trust, empowerment, and a sense of safety.[4] Core trauma-informed principles, described in Table 1, include Safety; Trustworthiness and Transparency; Peer Support; Collaboration and Mutuality; Empowerment, Voice, and Choice; and Cultural, Historical, and Gender Issues.

Table 1. Trauma-Informed Principles[5]

PRINCIPLE	DESCRIPTION
Safety	Ensuring physical and emotional safety for individuals such as creating a safe physical environment and providing emotional safety through clear communication, boundaries, and trust-building.
Trustworthiness and Transparency	Being reliable and consistent in interactions, being transparent about processes and procedures, and fostering a sense of respect and empowerment.
Peer Support	Connecting people with shared experiences to build relationships and support each other's healing and growth.
Collaboration and Mutuality	Engaging people in the planning and delivery of services and fostering a sense of shared power and decision-making.
Empowerment, Voice, and Choice	Focusing on strengths and resources, rather than deficits or problems. This includes empowering individuals to identify and utilize their strengths in their recovery and healing.
Cultural, Historical, and Gender Issues	Recognizing the impact of culture, history, and gender on individuals' experiences of trauma, and seeking to provide services that are sensitive to these factors.

Trauma-Informed Approaches in Global Mental Health

Trauma-informed approaches have been increasingly embraced in global mental health due to the disproportionate impact of potentially traumatizing events and their aftermath on individuals residing in low-income countries and regions. These areas often encounter higher occurrences of various forms of potentially traumatizing events, including environmental disasters, conflict, and poverty. The implementation of trauma-informed policies, programs, and practices in global mental health, however, is still in its infancy. Few global mental health initiatives have integrated robust implementation of trauma-informed principles and stakeholders rarely implement all the steps to becoming trauma-informed; they typically only implement discrete trauma-informed steps (e.g., building awareness or supporting a culture of wellness). Implementation of trauma-informed approaches requires comprehensive systems and organizational-level responses to address trauma and its impact. Systems and organizational-level approaches are critical to trauma-informed work because they can address systemic and structural factors that contribute to trauma, providing a foundation for consistent and sustainable care.

The following are some examples of how trauma-informed approaches have been implemented in global mental health:

Training and capacity-building initiatives have been developed to educate providers and service users on trauma-informed principles and the impact of trauma on individuals and communities. These initiatives have been implemented in various countries and settings, including primary care clinics and community-based organizations.[6,7] For example, a trauma-informed program to support survivors of child labor in India included caregivers' training on the neurobiology of trauma, on creating safety with children affected by trauma, understanding their fear responses, and self-care strategies.[7]

Trauma-informed approaches in primary care have included initiatives such as staff training on trauma and its impact and trauma-informed psychosocial support services for patients. In Iraqi Kurdistan, a two-week trauma-informed program provided training for healthcare staff on basic psychosocial support skills such as active listening and providing psychoeducation about mental health within the community.[8] In Pakistan, a trauma-informed curriculum provided training on the prevalence and impact of trauma to healthcare professionals, psychologists, and medical students. This training also covered referral pathways and relaxation techniques for individuals experiencing distress.[9]

Community-based approaches have included utilizing community health workers and lay counselors to provide care and support for individuals and families who have experienced potentially traumatizing events. In the Nairobi region of Kenya, a local organization provided trauma-informed mindfulness yoga classes in community centers.[10] Complementary, trauma-informed yoga and mindfulness approaches have demonstrated promise in reducing stress and trauma-related mental health conditions such as post-traumatic stress.[11] In Zimbabwe, a task-shifting approach was used to train lay healthcare providers in the "Friendship Bench" a trauma-informed psychosocial intervention.[12]

Considerations for Trauma-informed Approaches Across Countries and Contexts

The application of trauma-informed approaches involves careful consideration and application in low- and middle-income countries and humanitarian and development contexts where trauma and mental health are conceptualized differently than in Western contexts.[13] The context in which services are delivered, the intersectionality of trauma, and power dynamics are all considerations for the delivery of trauma-informed approaches.

1. *Context:* Implementation of trauma-informed approaches should be contextualized to fit the norms, values, and experiences of the people being served. For example, collaboration and mutuality can be increased by working with the local community to identify cultural-specific ceremonies, rituals, and healing traditions. Culturally appropriate communication should also be considered when implementing trauma-informed practices to facilitate a safe environment. For example, in some cultures, non-verbal cues may be an important way to convey a person's comfort level or signs of distress. It is also important to recognize that how a person responds to trauma may differ based on social and environmental factors and that individuals who experience the same potentially traumatizing event may manifest different symptoms based on what is socially acceptable. Therefore, it is critical to have knowledge of and understand culturally and/or contextually specific language, cues, and manifestations of trauma to build trust, rapport, and a sense of safety.

2. *Intersectionality of trauma:* Characteristics such as race, gender, sexuality, and class all play important roles in shaping a person's experiences with trauma. Poverty, social inequality, colonization, and political instability are additional factors that can contribute to trauma. For example, a person who belongs to a marginalized racial or ethnic group may face multiple forms of trauma due to systemic discrimination and oppression. Trauma-informed approaches, therefore, should consider the intersectionality of trauma on individuals, families, and communities.[6,14]

3. *Power dynamics:* Power dynamics between providers and clients and/or supervisors and staff need to be recognized and addressed, to ensure that interactions are respectful and equitable. In mental health service delivery, relationships where a mental health provider holds authority over the individual utilizing the service can create a sense of powerlessness and fear among service users. This dynamic can have detrimental effects on individuals, dissuading them from seeking assistance.

These types of relationships may manifest in treatment choices such as physical restraint, forced isolation, and interpersonal interactions that dismiss and undermine service users' autonomy and sense of humanity. Trauma-informed approaches, however, discourage power-over relationships and encourage relationships based on listening to, believing, and respectfully advocating for, individuals which can help facilitate recovery.

Misconceptions about Trauma-Informed Approaches

Myth 1: *Trauma-informed approaches are exclusively designed for people who have experienced trauma.*

Being trauma-informed is not specifically for individuals who have experienced trauma, rather it involves a systems-wide approach to ensure safety, train staff on recognizing trauma and its impacts, and promote a culture of wellness that ultimately benefits all.

Myth 2: *Trauma-informed care is only about an individual's healing.*

Being trauma-informed is about establishing systems and environments that are sensitive to the needs of any individual who has experienced trauma.

Myth 3: *Trauma-informed approaches only focus on negative experiences and are pathology focused.*

Trauma-informed principles focus on building resilience and creating environments where individuals feel safe, empowered, and supported.

Steps to Becoming Trauma-Informed

Becoming a trauma-informed organization involves a comprehensive and systematic approach to prioritizing service users,' providers' and staffs' well-being. While this approach can be time- and resource-intensive for an organization to be fully trauma-informed, several foundational measures can be taken to begin adopting trauma-informed approaches. These include building awareness, supporting staff wellness, hiring a workforce that is trauma-informed, and creating a safe physical, social, and emotional environment.

Figure 1. Steps to Becoming Trauma-Informed

1. Building awareness of trauma-informed approaches → 2. Supporting a culture of wellness → 3. Hiring a workforce that embodies trauma-informed approaches → 4. Creating a safe environment

1. **Building awareness of and buy-in for trauma-informed approaches** can include training for staff and leadership on the potential impacts of trauma on health and behavior and education on how trauma-informed approaches have the potential to improve organizational culture and outcomes. Awareness can also be increased by engaging the community and individuals with lived experience to share feedback through advisory boards or the use of peer networks to build relationships with staff.

2. **Supporting a culture of staff wellness** is critical to becoming trauma informed. When working in high-intensity environments and with individuals, families, and communities who have experienced trauma, it is critical for leadership to promote staff care, which can reduce the risk of secondary traumatic stress or burnout. Wellness initiatives can include a) educating staff on signs and symptoms of secondary traumatic stress, vicarious trauma, or burnout; b) providing time and space for workers to de-stress; and c) designating, and checking-in with, a "listening partner."[15] Additional ways leadership can foster a culture of wellness are by ensuring that staff have adequate time off to address their mental health needs, increasing access to high-quality therapeutic services, and increasing access to workplace wellness activities such as mindfulness, meditation, or yoga.

3. **Hiring a workforce that represents trauma-informed values**, such as staff who have similar experiences as the service users, represent a variety of racial and ethnic backgrounds, and can express empathy and non-judgement.

4. **Creating a safe physical, social, and emotional environment** is particularly important for people with trauma histories who may be triggered by environments that are perceived as unsafe.[1,15] Organizations can encourage organization and government-level policy initiatives to promote safe physical environments. This may include making sure common areas, entrances, and exits are well-lit, the noise levels are low, or fostering a calming environment with soft lighting, stress-reducing activities, and comfortable seating. Ensuring a safe social-emotional environment can include training for staff on how to greet service users in a culturally sensitive welcoming and warm manner, de-escalation techniques, and asking service users if they feel comfortable in the meeting location.

Challenges and Limitations of Trauma-Informed Care

Implementing trauma-informed care in global mental health can be challenging due to various factors including:

- **Lack of awareness and understanding** of trauma and its potential impacts on mental health can lead to a failure to recognize and respond to trauma and even may lead to further harm, regardless of intent. The provision of basic trauma psychoeducation can help improve responses to those who have experienced trauma and prevent traumatization by organizations, funders, providers, and other actors.[16]

- **Focusing on individual level** efforts. Most trauma-informed work focuses on the individual, failing to account for community trauma and recovery. In many contexts, crises often affect entire communities. Trauma-informed work may need to focus on rebuilding social structures and fostering social cohesion, rather than, or in addition to, individual healing. Thus, trauma-informed work should move beyond the individual and be expanded to community-level responses.[14]

- **Lack of research** and empirical support limits the understanding of the implementation and contextualization of trauma-informed approaches within and across. Most research on the creation or use of trauma-informed approaches does not describe how trauma-informed principles are integrated into systems or organizational settings.[17,18] Therefore, more research is needed to expand empirical support, contextualization, and implementation of trauma-informed approaches in global mental health.

- **Stigma and discrimination** around mental health and trauma can impact the delivery of trauma-informed approaches within and across countries and contexts. For example, trauma experiences such as human trafficking can result in stigmatization and discrimination from families and communities.[19] Increasing awareness of the impact of trauma on mental health may reduce stigma and be done through public education campaigns or mental health awareness training for providers and community members.

- **Economic and political factors** can impact the implementation of trauma-informed approaches. Political will towards or against mental health and social services can affect government-level funding for resources and interventions. In some countries, economic and political conflicts and war may uproot existing healthcare and social service infrastructure, making the establishment of trauma-informed approaches substantially more difficult. Building partnerships and collaborations with local governments and providing education on the impact of trauma to policymakers may help leverage resources and funding for initiatives to foster trauma-informed approaches.

- **Resources and infrastructure** have limited the application of trauma-informed approaches in regions where international development organizations work due to limited funding for training, a shortage of trained personnel, and a lack of standardized protocol for implementing trauma-informed principles. Increased training programs for local health workers and community stakeholders and developing standardized context-appropriate protocols are ways to mitigate resource limitations.

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