



Improving Outcomes for Violence Survivors: Essential Measures for Trauma-Informed Care

Violence against women survivors endure severe trauma before, during and after the violence. Global data shows that women survivors of violence face increased risks of depression^{3,2,4,5} anxiety^{2,5} post-traumatic stress disorder (PTSD)^{1,5,6,7} and suicidal ideation^{4,8}. This trauma is compounded by difficulties in accessing essential resources like police, legal aid, safe spaces, and mental health support. Legal proceedings and interactions with law enforcement, though necessary for justice, often re-traumatize survivors. These barriers are heightened when the survivor lacks agency and coping mechanisms, making her vulnerable to further distress and violence. This policy brief underscores the need for a comprehensive trauma-informed response with government and non-government service providers (Sakhi One Stop Centres, Family Counseling Centres, Police Station-based support centres, Women's Courts and Women's Counseling Centres) to ensure their long-term safety and well-being.

SNEHA's Program on Prevention of Violence against Women and Children aims to develop high-impact strategies for primary prevention, ensure survivors' access to protection and justice, empower women to claim their rights, mobilise communities around 'zero tolerance for violence,' and respond to the mental health needs and rights of excluded and neglected groups.

Monitoring data from SNEHA's community-based violence prevention program between 2022-24 provides insights into the key components that are needed to improve the mental health of women survivors of violence. A comprehensive mental health assessment of 3675 survivors, out of 8307, included information on improvement in mental health, counselling visits, follow-ups, crisis intervention, clinical psychologist involvement, legal intervention, legal outcomes, and reduction in violence. The average age of these women was 35 years, 46% were Hindu, 47% were muslim and 7% were others. 80% had some schooling and 30% had some form of occupation.

KEY FINDINGS

Multiple regression analysis of 3675 showed three responsible factors for improvement in survivor's mental health

Crisis intervention

Women Survivors with access to crisis intervention were more likely to show an improvement in mental health (AOR = 1.55, 95% CI 0.36-0.57). Of the women survivors who showed an improvement in mental health, 25% had received some form of crisis intervention.

Intervention by Clinical psychologist:

Women Survivors who received clinical psychologist intervention were more likely to show improved mental health (AOR = 1.57, 95% CI 1.18-2.09). Of the women survivors who showed an improvement in mental health, 14% had received support from a clinical psychologist.

Access to Smartphones:

Women Survivors with access to smartphones were more likely to show improved mental health (AOR = 1.33, 95% CI 1.05-1.68). Of the women survivors who showed an improvement in mental health, 63% had access to a mobile phone four or more.

IMPLEMENTING PARTNERS



CRISIS PROFILE OF SURVIVORS OF VIOLENCE

45% had experienced Domestic Violence

45% had experienced Intimate Partner Violence

10% had experienced other forms of violence
(sexual violence, violence in public spaces and neighbourhood)

35% were in crisis

54% showed moderate to severe anxiety at first assessment

62% showed moderate to severe depression at first assessment

I now feel (confident) that I can move forward after talking to the (counsellor) madam at the organisation. I can put into effect the rights of my children and myself. Now, I am not alone; I have the support of you people.

Woman survivor at the SNEHA Counseling Centre

I was alone; I didn't even know where the police station was, where I needed to go and what I needed to do and what I needed to avoid doing. Now that my mother and the (counsellor) madams over here have encouraged me, I have found strength to take action. Otherwise, I have never filed a case or taken any action before.

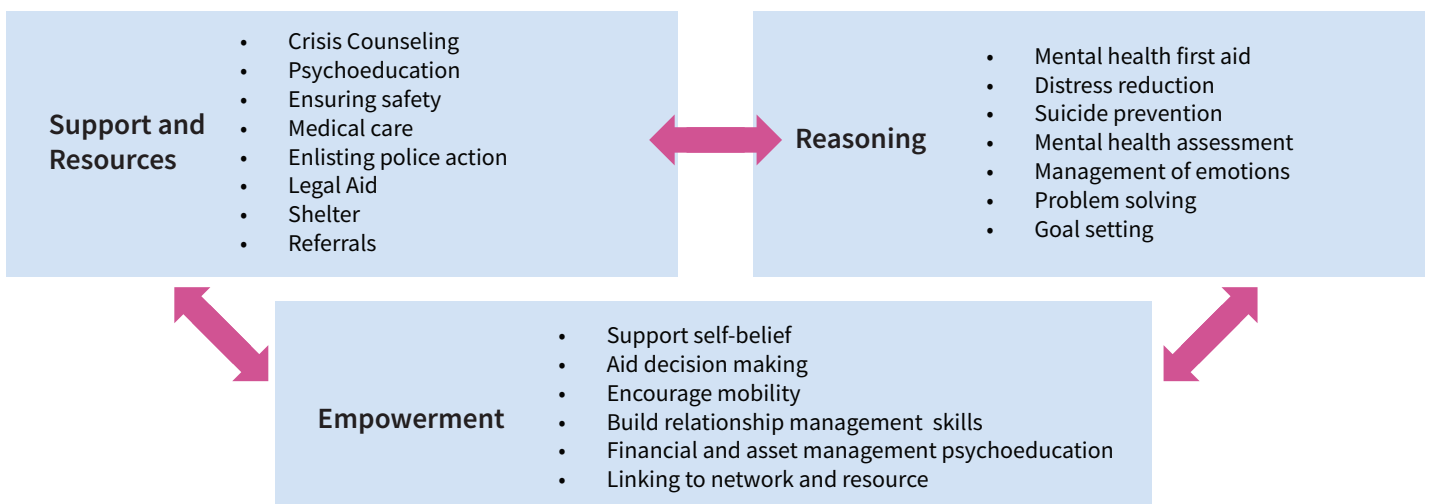
Woman survivor at the SNEHA Counseling Centre

The National Institute of Health Research (NIHR) Global Health Research Group project, "A Package of Care for the Mental Health of Survivors of Violence in South Asia," led by University College London between 2018-2022, examined the impact of different forms of violence on mental health in Afghanistan, India, and Sri Lanka. The study identified candidate interventions through systematic review, mapped support services and concluded that the approach to survivors of violence interventions should be intentional and

trauma-informed to contribute to mental health. Qualitative data from 146 interviews of domestic violence survivors confirmed the importance of including mental health interventions within violence redressal.

SNEHA's intervention with survivors of violence include measures for trauma informed care. Researchers, advocates and providers developing interventions for women and adolescents affected by violence have emphasized these measures mentioned below:

Measures for Trauma Informed Care



Comprehensive Trauma Informed Care is crucial for ensuring safety and well-being of survivors of violence

Evidence suggests that providing a range of resources to reduce distress and trauma from environmental factors improves mental health. Ensuring that women have access to the resources and services that can benefit them also means that they can focus on healing from their experiences rather than having to navigate complex situations and systems that may detract from their recovery⁹.

Providing access to counselling and mental health services to support reasoning by holistic, trauma-informed, and individualised interventions improves mental health of survivors. Disclosure of trauma and development of a therapeutic alliance can itself play a therapeutic role, allowing survivors to feel

listened to and reducing feelings of isolation⁹. The therapeutic alliance – and women’s empowerment – can be strengthened by enabling survivors to exercise their own agency in the recovery process by encouraging them to talk through solutions, discover their own goals, and make their own choices⁹. Building skills and capacities to empower the survivor to lead a violence-free life. Increased agency and control for survivors, such as through increased capacity to make choices throughout the intervention and recovery process, can contribute to improvements in safety and self-efficacy, leading to improvements in mental health⁹.

RECOMMENDATIONS

Provision of Timely Crisis Intervention

Providing immediate crisis intervention – including safety assessments, access to police and legal aid, medical support, suicide prevention, safe shelter, access to financial resources, custody of children and family level intervention and negotiation – can significantly improve the mental health of survivors. There is a need to equip community and frontline workers with comprehensive training in mental health and trauma-informed approaches to strengthen their capacity for providing effective psychosocial support as the first line of response. Additionally, it is crucial to recognize and address the mental health needs of service providers themselves, ensuring they receive the necessary support and resources to deliver effective care.

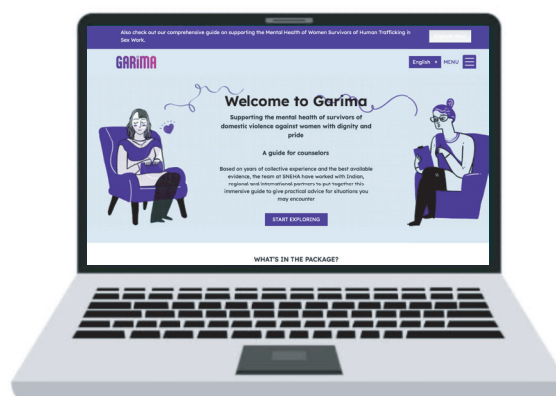
Integrating Mental Health Intervention

Ensuring that survivors have access to mental health support and effective, trauma informed services will help survivors build the skills they need to cope better, find solutions, build emotional resilience and empower them to prevent further violence. It is also critical in rebuilding their agency and self confidence as they navigate various violence prevention services including the police and legal systems. Assessing the effectiveness of trauma informed care is crucial to providing contextual and useful support to women survivors of violence. Specific indicators can be tracked to improve the quality and usefulness of these services.

Leveraging Technology for Enhanced Mental Health

The availability of smartphones has been linked to improved mental health outcomes for survivors. This correlation warrants further research but possible

explanations include the opportunities for enhanced communication with support networks or access to educational or motivational resources online. This can be further supported by the dissemination of educational materials through social media that can support women in crisis situations. Additionally, technology can be leveraged to enhance skills of service providers. Considering this, SNEHA has developed a web-based package of care on mental health for survivors of domestic violence and modern slavery. The package is an immersive guide to give practical advice for counsellors, mental health professionals and social workers working with survivors of domestic violence. This package has been put out in the public domain in the form of an easy-to-access and use micro-site.



<https://garima.snehamumbai.org/>

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SNEHA is a secular Mumbai-based Non-profit. Over the last 25 years, it has partnered with urban informal communities and the public health, nutrition and legal systems to build evidence-based models on health equity. SNEHA works across three large public health areas:

- Maternal and Child Health & Nutrition
- Health, Agency and Well-being of Adolescents
- Prevention of Violence against Women and Children

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