TRAUMA POLICY RESEARCH: CHARTING A COURSE

Jonathan Purtle, DrPH, MSc
Drexel University School of Public Health

Trend in number of articles in PubMed with “trauma-informed” or “trauma informed” in the title or abstract

0 5 10 15 20 25 30 35 40 45 50

Gap in the Field

- It is widely acknowledged that research about traumatic stress needs to translate into policy. But...
  - There is very little guidance about how to do it
  - There has been very little trauma policy research

- Foundational questions:
  1. What is ‘trauma policy?’
  2. What is the trauma policy research agenda?

Typology of Trauma Policies

- Trauma-Related Policies:
  - Policies that are not designed with the explicit intent of addressing traumatic stress, but have great potential to do so by reducing exposure to trauma and promoting resilience.
    - ≈ primary prevention
  - Examples: policies that...
    - Prevent gun violence
    - Prevent motor vehicle accidents
    - Prevent child abuse
    - Promote social support
    - Promote income security
Typology of Trauma Policies

- **Trauma-Informed Policies:**
  - Policies that are designed on the basis of knowledge about the prevalence of trauma exposure in the policy’s target populations and how the effects of trauma could impact policy effectiveness.
  - ≈ secondary prevention
  - Examples: policies that…
    - Require an organization’s staff to participate in trauma-informed training as a condition for the receipt of funds
    - Regulate the conduct of attorneys in sexual assault and torture cases
    - Human-centered public assistance policies

- **Trauma-Specific Policies:**
  - Policies that promote access to interventions that mitigate the effects of trauma exposure and promote healing.
  - ≈ tertiary prevention
  - Examples: policies that…
    - Provide reimbursement for trauma-focused treatments
    - Incentivize mental health providers with training in trauma-focused treatments (e.g., trauma-focused CBT) to practice in underserved areas
    - Mandate screening for trauma symptoms and referral to treatment (e.g., trauma center accreditation policy)
Agenda for Trauma Policy Research

Domains of Trauma Policy Research

- **Policy Content:**
  - What trauma policies are on the books?
  - To what do these policies reflect current knowledge about the prevalence of trauma and its impacts?
  - How can these policies be improved?
  - What are the policy gaps?

- **Methods:**
  - Analysis of statutes, regulations, administrative memorandums, recommendations of professional societies
  - Legal mapping
Domains of Trauma Policy Research

- **Policy Process:**
  - How is trauma policy made?
    - Who are the political stakeholders and what their interests?
    - How knowledgeable are policymakers about trauma and its effects?
    - What is public opinion about trauma?
    - How is trauma portrayed in the media?
    - What are the most effective ways to communicate research about trauma to policy makers?
  - **Methods:**
    - Case studies
    - Interviews
    - Surveys
    - Media analysis
    - Analysis of hearings/testimonies about trauma policies
    - Vignette studies

- **Policy Impact:**
  - How effective are trauma policies?
    - Does a policy prevent trauma exposure?
    - Does a policy prevent the development of trauma-related disorders or reduce symptom severity?
    - Does a policy promote protective factors and/or reduce risk factors for trauma-related disorders?
  - **Methods:**
    - Natural experiments
    - Interrupted time series designs
    - Randomized controlled trials
The Legislative Response to PTSD in the United States (1989-2009): A Content Analysis

*Journal of Traumatic Stress*

How has federal legislation been used to address PTSD?

**Bill Sections by Target Population**

<table>
<thead>
<tr>
<th>Population</th>
<th>PTSD Explicit</th>
<th>Trauma, Non-PTSD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Military Exclusive</td>
<td>92%</td>
<td>24%***</td>
</tr>
<tr>
<td>Civilian Exclusive</td>
<td>5%</td>
<td>74%***</td>
</tr>
<tr>
<td>Both</td>
<td>3%</td>
<td>2%</td>
</tr>
</tbody>
</table>

*PTSD Explicit N=382, Trauma, Non-PTSD N=55.
***p < .001
Weaving “Psychological Kevlar” for “Heroes’ Invisible Wounds of War”: Constructions of Post-Traumatic Stress Disorder in the Text of Federal Legislation

Society & Mental Health

What does PTSD mean in the text of federal legislation?
Key Domains of findings

- Reality of PTSD constructed through war-related language and imagery
  - PTSD as a “wound of war”
    - “Dignified Treatment of Wounded Warriors Act,” “Healing the Invisible Wounds Act,” “Mental Health Care for our Wounded Warriors Act”
  - Military technology
    - “Psychological Kevlar Act[s]” of 2006 and 2007

- PTSD constructed as a hero’s problem

- “National PTSD Awareness Day” legislation
  - No acknowledgement of PTSD existing among civilians
“Reason and objectivity are not the primary determinants of society’s reactions to traumatized people. Rather... society’s reactions seem to be primarily conservative impulses in the service of maintaining the beliefs that the world is fundamentally just, that people are in charge of their lives, and that bad things only happen to people who deserve them.”

- McFarlane & van der Kolk. 
  Traumatic Stress. 1996 (p. 35)