

Trauma-Informed Nursing for Violence Survivors

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Received: 03-Jun-2025, Manuscript No. gnfs-25-173311; **Editor assigned:** 05-Jun-2025, PreQC No. gnfs-25-173311 (PQ); **Reviewed:** 19-Jun-2025, QC No. gnfs-25-173311; **Revised:** 24-Jun-2025, Manuscript No. gnfs-25-173311 (R); **Published:** 01-Jul-2025, DOI: 10.4172/2572-0899.1000340

Citation: Okoye DNR (2025) Trauma-Informed Nursing for Violence Survivors. Glob J Nurs Forensic Stud 09: 340.

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Abstract

This collection of research explores critical nursing interventions for violence, specifically *Intimate Partner Violence* (IPV) and child abuse. Key themes include the development of trauma-informed screening tools and comprehensive care strategies to support survivors and reduce revictimization. Studies emphasize the necessity for enhanced training for healthcare providers, particularly nurses, to improve their ability to identify, intervene, and offer culturally sensitive support. The effectiveness of nurse-led interventions, promotion of resilience, and addressing unique victim experiences, such as those of male IPV survivors, are highlighted. The literature consistently advocates for a multifaceted, trauma-informed approach in nursing to ensure victim safety and improve health outcomes.

Keywords

Intimate Partner Violence (IPV); Trauma-Informed Care (TIC); Nursing Interventions; Healthcare Providers; Screening Tools; Victim Support; Resilience; Child Abuse; Emergency Departments; Mental Health Nursing

Introduction

Addressing violence within healthcare settings demands a comprehensive and empathetic approach, particularly in the context of Intimate Partner Violence (IPV) and other forms of abuse. Recent advancements in clinical practice and research underscore the necessity for specialized tools and interventions. For example, a trauma-informed screening and intervention tool has been developed and piloted specifically for healthcare settings to better identify and support survivors of IPV. This tool moves beyond basic screening, incorporating essential elements like safety planning, resource navigation,

and patient-centered, culturally sensitive care, all designed to reduce revictimization and enhance health outcomes [1].

The implementation of trauma-informed care (TIC) is emerging as a cornerstone of effective nursing practice. A scoping review highlights the critical role of TIC in emergency departments for individuals who have experienced violence. Key components include universal screening, comprehensive staff training, establishing a safe environment, and employing patient-centered approaches. These components are vital for nurses to address both immediate and long-term needs of victims without inadvertently causing further trauma [2]. Similarly, the application of TIC within mental health nursing is emphasized, particularly for individuals with histories of violence and trauma. Integrating principles such as safety, trustworthiness, peer support, collaboration, empowerment, and cultural sensitivity is crucial for interventions that prevent re-traumatization, foster healing, and improve overall mental health outcomes for victims [10]. This demonstrates a consistent theme across different healthcare contexts regarding the profound bene-

fits of a trauma-informed approach.

Understanding the perceptions and experiences of both healthcare providers and victims is crucial for developing effective interventions. For instance, a systematic review examining healthcare providers' perceptions of IPV against women reveals significant gaps in their knowledge, attitudes, and practices. This highlights a pressing need for enhanced training and support for nurses and other providers, enabling them to effectively identify, intervene, and provide sensitive care. A deeper understanding ultimately translates into more comprehensive and empathetic nursing interventions [3]. Moreover, the experiences of male victims of IPV seeking help, often overlooked, shed light on societal barriers, stigma, and a scarcity of gender-specific support systems that prevent disclosure. This necessitates the development of more inclusive screening tools, non-judgmental care, and tailored resources that acknowledge male victimhood to ensure comprehensive support from a nursing perspective [4].

The effectiveness of nurse-led interventions has been rigorously evaluated, affirming their vital role. A systematic review and meta-analysis specifically on nurse-led interventions for IPV demonstrates their significant positive impact on victim safety, well-being, and reducing revictimization. Tailored nursing interventions, encompassing screening, counseling, safety planning, and referral to support services, are identified as critical components of a comprehensive response to IPV within healthcare settings [5]. Beyond immediate crisis, promoting resilience among survivors of IPV is also a key area for nursing practice. Interventions aimed at empowering survivors, fostering coping strategies, and building social support networks are crucial. Nurses can integrate these findings by developing person-centered care plans that extend beyond initial management to focus on long-term recovery and resilience building [6].

To bolster the capacity of healthcare professionals, education and training programs are paramount. A systematic review on education and training programs for health professionals, including nurses, on IPV, confirms that effective training improves providers' knowledge, attitudes, and confidence in identifying and responding to IPV. This is indispensable for developing competent nursing interventions that can appropriately support victims and engage with the complex dynamics of violence [7]. Further reinforcing this, another systematic review and meta-analysis evaluating interventions for healthcare providers to identify and respond to IPV concludes that targeted training and educational programs significantly improve providers' skills, confidence, and rates of screening and referral. These findings are foundational for developing robust nursing interventions that prioritize victim safety and support within clinical

settings [9].

While much focus is on adult IPV, the broader scope of violence also includes child abuse and neglect. A systematic review exploring the experiences and perceptions of nurses regarding child abuse and neglect highlights challenges in identification, reporting, and providing support. It emphasizes the need for specialized training, clear protocols, and emotional support for nurses, who often act as frontline responders. Effective nursing interventions in this domain demand a deep understanding of victim vulnerability and the perpetrator's role, alongside multi-agency collaboration [8]. This collective body of literature consistently points to the crucial and expanding role of nurses in addressing violence through informed, sensitive, and comprehensive care strategies.

Description

Current research extensively covers the critical role of nursing interventions in addressing various forms of violence within healthcare settings. A primary focus involves Intimate Partner Violence (IPV), with studies detailing the development and piloting of trauma-informed screening and intervention tools specifically designed for healthcare environments [1]. These tools are crafted to improve the identification and support offered to survivors, moving beyond basic screening to encompass comprehensive safety planning, robust resource navigation, and patient-centered, culturally sensitive care. The ultimate goal is to significantly reduce revictimization and enhance overall health outcomes for those affected by IPV [1].

Implementing Trauma-Informed Care (TIC) principles is a recurring theme across multiple contexts. A scoping review emphasizes the vital role of TIC in emergency departments, particularly for individuals who have endured violence. This approach integrates universal screening, extensive staff training, creation of a safe and supportive environment, and the application of patient-centered methods. Nurses, in particular, find these strategies invaluable for addressing both immediate and long-term needs of victims, ensuring that interventions do not inadvertently cause further trauma [2]. This emphasis on TIC extends to mental health nursing, where its application is explored for individuals with histories of trauma and violence. Integrating core TIC principles—such as safety, trustworthiness, peer support, collaboration, empowerment, and cultural sensitivity—is deemed essential for effective nursing interventions that prevent retraumatization, facilitate healing, and improve mental health outcomes [10].

Significant attention is also given to the knowledge, attitudes, and practices of healthcare providers regarding IPV. A system-

atic review highlights crucial gaps in these areas among healthcare providers concerning IPV against women, underscoring the urgent need for enhanced training and support for nurses and other professionals [3]. Such training empowers providers to effectively identify, intervene, and deliver sensitive care, leading to more comprehensive and empathetic nursing interventions [3]. Furthermore, the unique experiences of male victims of IPV seeking help are explored in a qualitative systematic review. This research reveals profound societal barriers, persistent stigma, and a notable absence of gender-specific support systems, which collectively hinder men from disclosing abuse. For nursing practice, this translates into a clear directive to develop more inclusive screening tools, provide non-judgmental care, and offer tailored resources that specifically acknowledge and support male victimhood, ensuring comprehensive care for all [4].

The effectiveness of nurse-led interventions for IPV is well-documented. A systematic review and meta-analysis confirms their substantial positive impact on victim safety, overall well-being, and the reduction of subsequent revictimization [5]. This research highlights that well-designed nursing interventions, which include thorough screening, compassionate counseling, detailed safety planning, and appropriate referrals to support services, are indispensable components of a holistic response to IPV within healthcare settings [5]. Beyond immediate crisis management, fostering resilience among IPV survivors is also a critical area for nursing focus. Interventions geared towards empowering survivors, cultivating robust coping strategies, and building strong social support networks offer crucial insights for nursing practice [6]. Nurses are encouraged to apply these findings by crafting person-centered care plans that prioritize long-term recovery and resilience building, moving beyond just addressing the immediate crisis [6].

The imperative for continuous education and training for health professionals, especially nurses, concerning IPV is repeatedly emphasized. A systematic review focusing on such education and training programs reveals that effective interventions significantly enhance providers' knowledge, refine their attitudes, and boost their confidence in both identifying and responding to IPV [7]. This improvement is crucial for developing competent nursing interventions capable of supporting victims appropriately and engaging effectively with the complex dynamics of violence [7]. Concurrently, another systematic review and meta-analysis reinforces these findings, demonstrating that targeted training and educational programs notably improve providers' skills, confidence, and the rates at which they screen for and refer cases of IPV. These insights are fundamental for establishing robust nursing interventions that consistently prioritize victim safety and support within all clinical environments

[9].

Finally, the scope of nursing responsibility extends to child abuse and neglect. A systematic review delves into the experiences and perceptions of nurses regarding child abuse and neglect, uncovering significant challenges in accurate identification, timely reporting, and effective provision of support [8]. This review highlights a critical need for specialized training, clearly defined protocols, and accessible emotional support for nurses, who frequently serve as the initial responders in these sensitive situations. For nursing interventions to be truly effective in this area, they must be grounded in a profound understanding of victim vulnerability and the perpetrator's role, alongside fostering strong multi-agency collaboration [8]. These collective insights paint a comprehensive picture of the multifaceted challenges and indispensable contributions of nursing in addressing violence across the lifespan.

Conclusion

The literature highlights the critical role of nursing interventions in addressing various forms of violence, particularly Intimate Partner Violence (IPV) and child abuse, within healthcare settings. A significant focus is placed on developing and implementing trauma-informed approaches to care. This includes comprehensive screening tools for IPV survivors that go beyond basic identification to incorporate safety planning, resource navigation, and culturally sensitive support, aiming to reduce revictimization and improve health outcomes. The effectiveness of nurse-led interventions for IPV has been systematically evaluated, showing a positive impact on victim safety, well-being, and reduction in further violence through tailored strategies like counseling and referrals.

Research also underscores the necessity for specialized training and education for healthcare providers, especially nurses, to enhance their knowledge, attitudes, and confidence in identifying and responding to IPV and child abuse. This training is crucial for closing gaps in current practices and ensuring empathetic, competent care for all victims. Specific attention is given to the often-overlooked experiences of male IPV victims, emphasizing the need for inclusive screening and tailored resources to overcome societal barriers and stigma. Furthermore, integrating trauma-informed care principles into emergency departments and mental health nursing is identified as vital to prevent retraumatization, foster healing, and improve long-term outcomes for individuals with histories of violence. Ultimately, these studies advocate for a multifaceted nursing approach that includes robust screening, specialized training, and resilience-building strategies to support survivors effectively.

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