

Trauma and Resilience Informed Research Principles & Practice (TRIRPP)

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About me

Academic research

Applied health research

- Stigmatised and disenfranchised populations
- Sexual & reproduction health
- Mental health and psychosocial predictors
- Epidemiological and qualitative methods
- RGN background

Research methodology as political in the age of EBM

- Who, what, **how**

TRuST

Training in TI Physical Health examinations and consultations

TI support for staff teams

TI coaching

Research support and coaching

The TRIRPP idea

Trauma informed approaches and resilience informed approaches to care/services already used to improve uptake and experience

Each already used applied to their respective research topics

- Could they be combined?
- Could they be applied to research more generally?
- Could they be extended to improve researcher inclusion and wellbeing too?

Why bother with a Trauma (& Resilience) Informed Approach to doing Health and Social Care Research?

Aim

To improve research uptake and experience among disadvantaged individuals and populations

Why does this matter?

Academic Capitalism and Tame Populations (Barry 2011)

Intervention Generated Inequalities (Lorenc et al. 2013)

The **right** to participate in and undertake research **safely (physically and *emotionally*)**

Barry J. Knowledge as Power, Knowledge as Capital: A Political Economy Critique of Modern 'Academic Capitalism'. Irish review (Cork, Ireland). 2011(43):14-25

Lorenc T, Petticrew M, Welch V, Tugwell P. What types of interventions generate inequalities? Evidence from systematic reviews. Journal of epidemiology and community health. 2013;67(2):190-3

TI Research and TI Services as distinct

Just because your service is TI doesn't mean that your patients' experience of research in that setting will be TI

It's not enough to have TI services. We need TI research principles and practices too

- www.trialforge.org.uk – Improving trial diversity – TRIRPP
- NIHR Applied Research Collaboration Kent, Surrey & Sussex
- The BRICE study (DRC)

TRIRPP Aims

To improve study accessibility, acceptability and participation from disenfranchised and/or traumatised individuals and populations

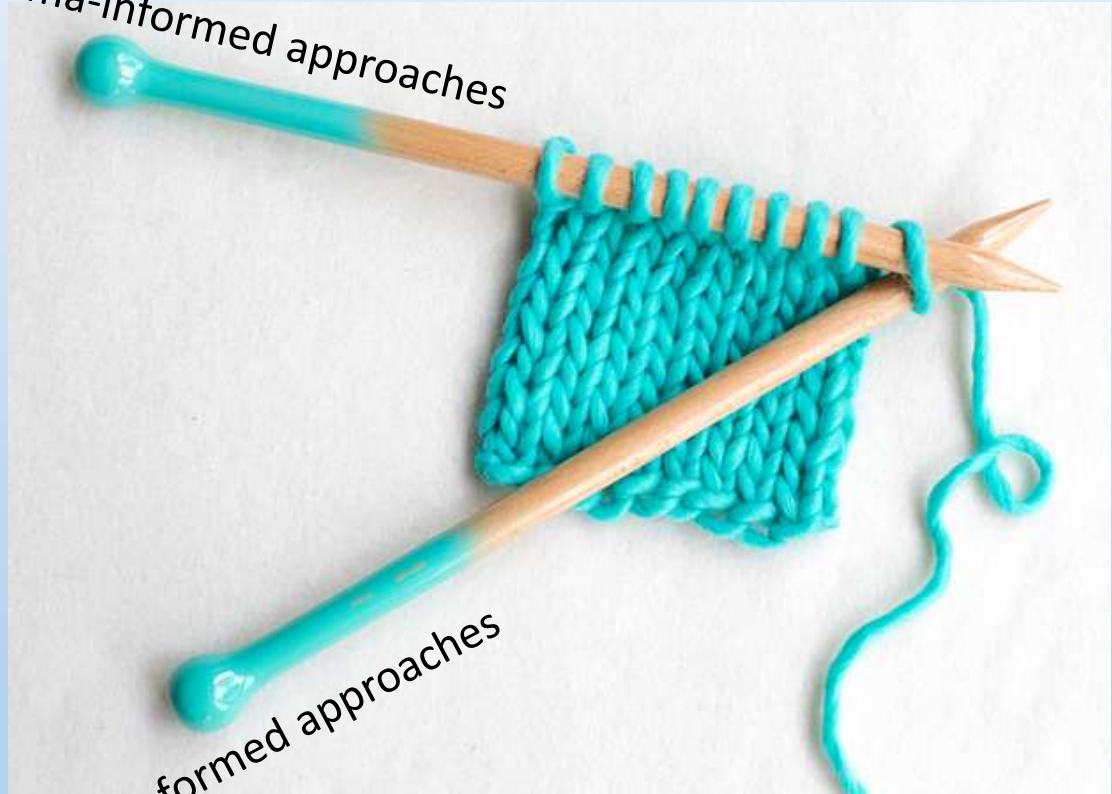
To recognise and address the likelihood of trauma experiences among those in sampling frames, research participants and researchers - and seek to avoid re-traumatisation

To identify, acknowledge and address the adversity context which may underpin the lives of research participants, researchers and the research phenomenon under study

To recognise and promote the resilience of research participants and researchers

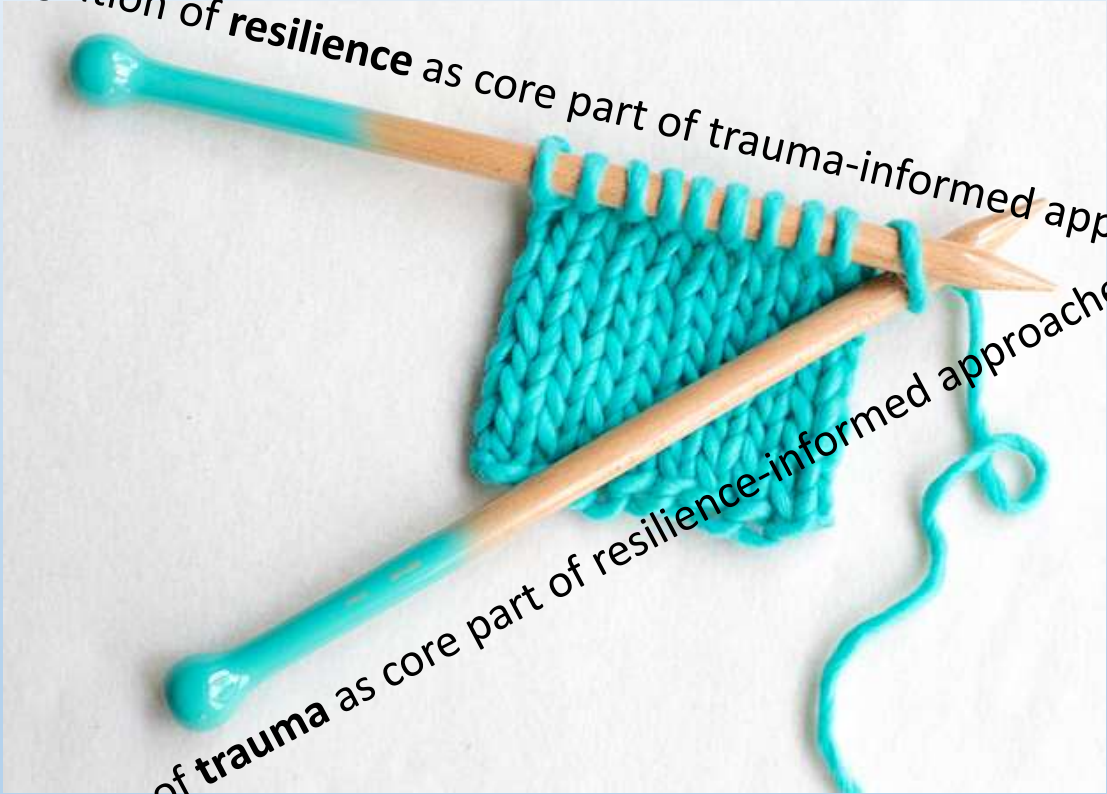
KNITTING TOGETHER TRAUMA AND RESILIENCE INFORMED PRINCIPLES TO RESEARCH

Trauma-informed approaches



Resilience-informed approaches

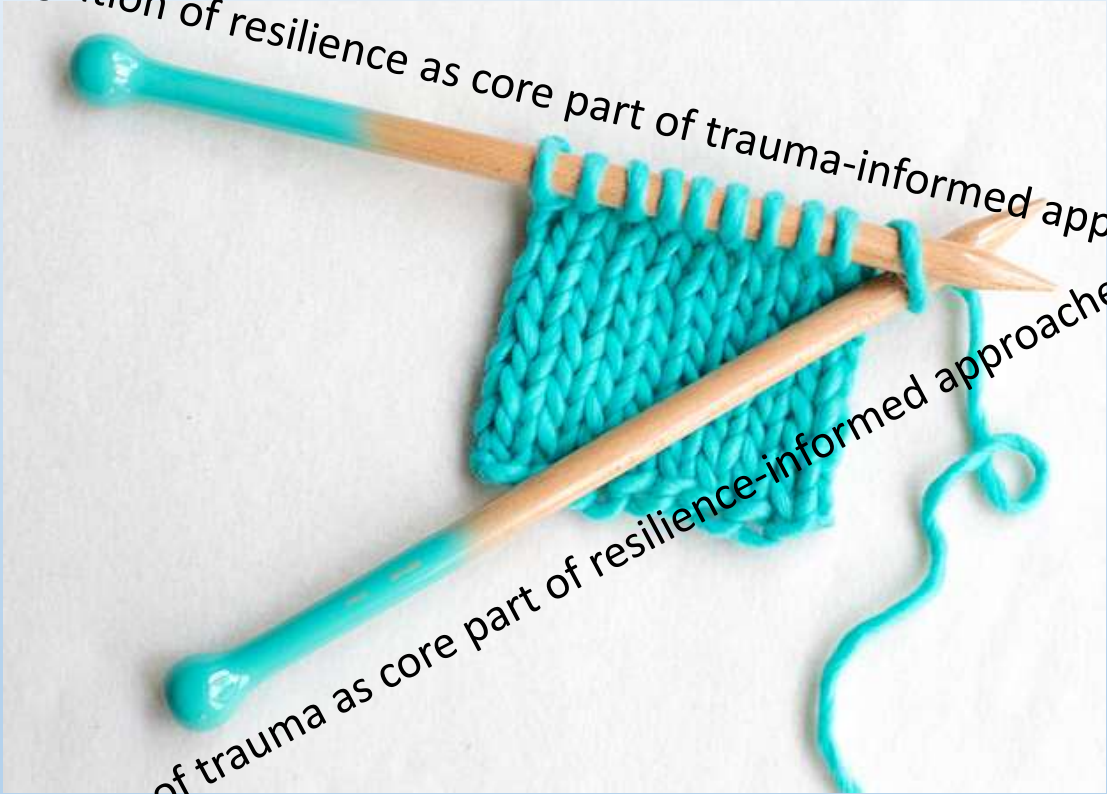
KNITTING TOGETHER TRAUMA AND RESILIENCE INFORMED PRINCIPLES TO RESEARCH



Recognition of **resilience** as core part of trauma-informed approaches

Recognition of **trauma** as core part of resilience-informed approaches

KNITTING TOGETHER TRAUMA AND RESILIENCE INFORMED PRINCIPLES TO RESEARCH



Recognition of resilience as core part of trauma-informed approaches

Recognition of trauma as core part of resilience-informed approaches

Assumption of **adversity**

Culture defining meaningful outcomes (resilience) recognising cultural legacies (trauma)

Disempowerment at both the centre of the original trauma and the failure of conventional care to enable recovery

*'Neither trauma nor resilience can be understood, fostered or attenuated without recognising the **interdependence of context and individual**'*

CONCEPTUALISING TRAUMA & RESILIENCE

- TRAUMA – a failure of context – lack of social and environmental containment to cope with potentially traumatic events (PTEs) or chronic adversity, leading to neurological, physiological and psychological harm
- RESILIENCE – Positive psychological and behavioural responses to adversity (psychology lens), ‘overcoming adversity’ (social justice lens)

A key assumption of TRIRPP is the notion that the research context itself can attenuate, exacerbate or present new adversities

THE 10 TRIRPP PRINCIPLES

Take active steps to seek participation from disenfranchised groups and individuals

Unite with social justice; tackling deprivation and health inequalities

Frame the researcher- participant relationship as relational

Empower individuals and communities through choice and agency

Emphasise strengths and resilience

Minimise re-traumatisation

Recognise potential impact of trauma in all participants

Strive to be culturally competent

Support researcher wellbeing – recognising and supporting resilience and possible pre-existing trauma and traumatic impact from doing research

Remove barriers to conducting research arising from structural issues, disadvantage and stigma

BRIDGING THE GAP BETWEEN PRINCIPLES AND PRACTICE

How do we translate principles into practices?

A **principle** is defined as ‘a moral rule or standard of good behaviour’

A **practice** is defined as ‘*an action rather than thought or ideas*’

Principles with *examples* of practices incorporating :

formal research activities (e.g. identifying research questions or recruiting participants)

informal actions which underpin and surround formal activity

TRIRPP PRINCIPLE 9

Support researcher wellbeing – recognising and supporting resilience and recognising and responding to possible pre-existing trauma and traumatic impact from doing research

P Regular debriefing and/or scheduling check-ins with other researchers before and after interviews

Acknowledge researchers' resilience and competence, and any lived experience contributions as valuable

Ensure access to a Community of Practice or other shared space for reflecting and peer support

Ensure protocols have clear processes for addressing disclosure by participants

Train researchers to support distressed participants & those disclosing serious risk of harm

TRIRPP PRINCIPLES:4

Principle: Empower individuals and communities through choice and agency

Practices:

Use co-production so that communities & individuals are researchers and agents of change

Give study participants control of recording devices - when to activate them and what is recorded.

Give participants choices re where to sit and taking breaks

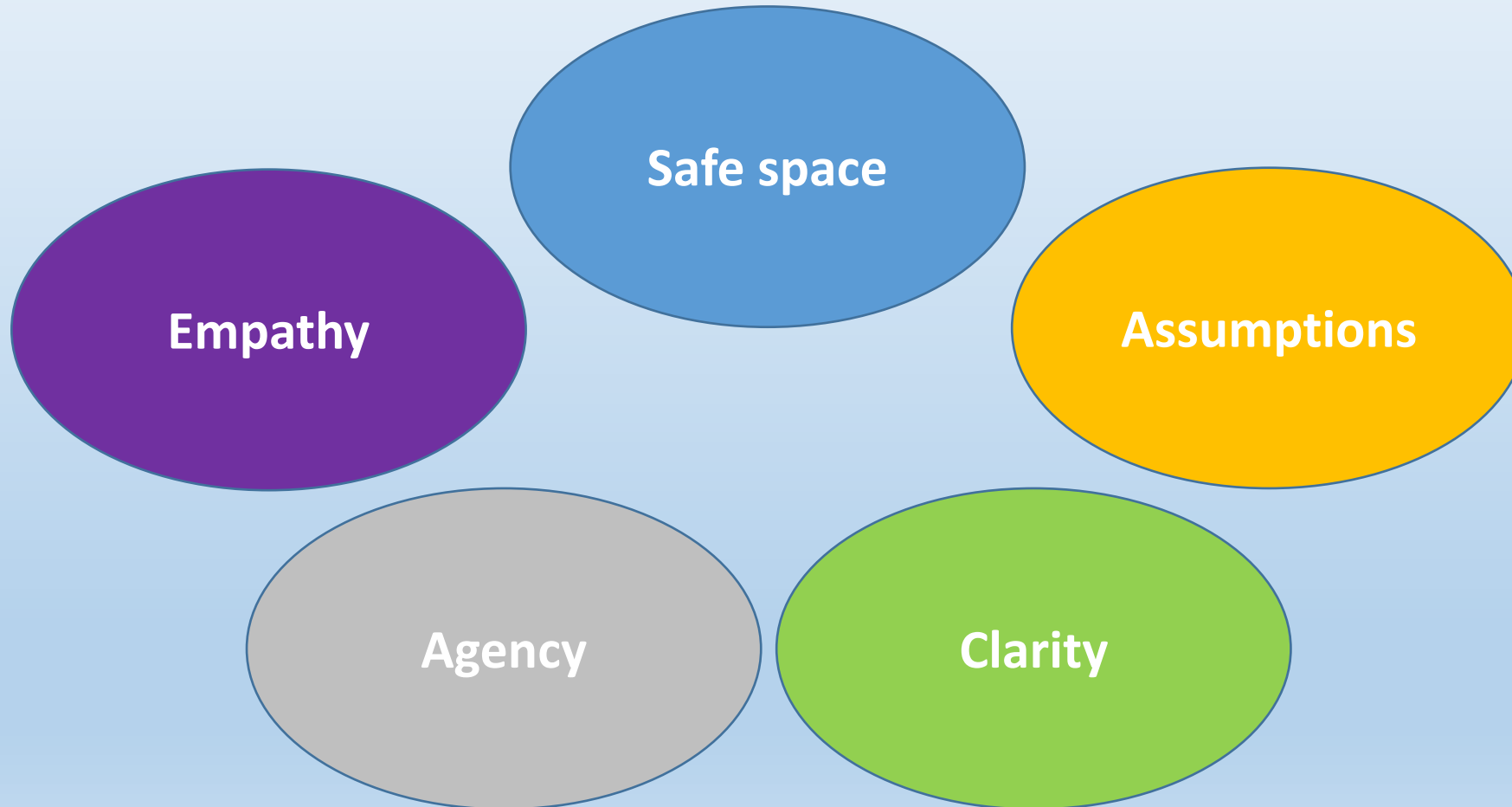
Give participants choices re data sharing

Revisit informed consent at different stages of research process according to participant preference

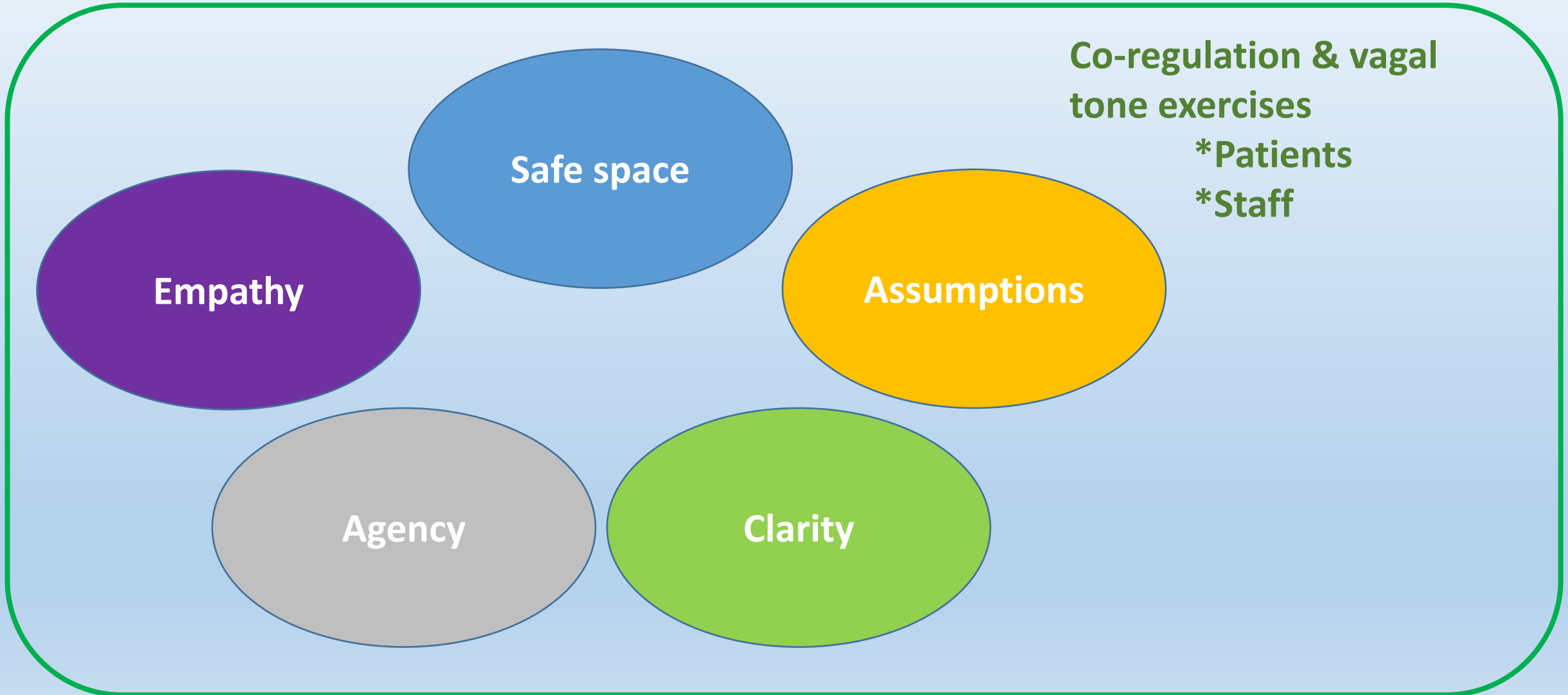
Offer greater choice re withdrawal of data and communication of findings– even in large-scale surveys & trials

Ensure participant information sheets are clear about what is meant by a research ‘interview’

TI practices for patient consultations



TI practices for patient consultations



Contact me at: drnatalieedelman@gmail.com

TRuST

TI leadership coaching

Training in TI patient and service user physical examinations and consultations

Research consultancy and TRIRPP training

Open-access paper:

[Trauma and resilience informed research principles and practice: A framework to improve the inclusion and experience of disadvantaged populations in health and social care research - Natalie L Edelman, 2022 \(sagepub.com\)](#)

TRIAL Forge

www.trialforge.org.uk – Improving trial diversity – TRIRPP

New book chapter:

Qualitative Researcher Vulnerability: Negotiating, Experiencing and Embracing, 2023 Routledge T&F