WHO RELEASES GUIDANCE ON MENTAL HEALTH CARE AFTER TRAUMA

New clinical protocol and guidelines to enable effective mental health care for adults and children exposed to trauma and loss.

Geneva 6 August 2013 – The World Health Organization is releasing new clinical protocols and guidelines to health care workers for treating the mental health consequences of trauma and loss.

Mental disorders are common, disabling and usually untreated, and WHO's *Mental Health Global Action Programme* (mhGAP) was developed in 2008 to scale up care for mental, neurological and substance use disorders with simple treatment protocols that can be offered by primary health care doctors and nurses.

Now, WHO is extending this programme by including care for post-traumatic stress disorder (PTSD), acute stress and bereavement within its global programme.

Traumatic events and loss are common in people's lives. In a previous WHO study of 21 countries, more than 10% of respondents reported witnessing violence (21.8%) or experiencing interpersonal violence (18.8%), accidents (17.7%), exposure to war (16.2%) or trauma to a loved one (12.5%). An estimated 3.6% of the world population has suffered from post-traumatic stress disorder (PTSD) in the previous year, the study showed.

Using the new protocol, which is co-published with the United Nations High Commissioner for Refugees (UNHCR), primary health care workers can offer basic psychosocial support to refugees as well as people exposed to trauma or loss in other situations.

Types of support offered can include psychological first aid, stress management and helping affected people to identify and strengthen positive coping methods and social supports.

In addition, referral for advanced treatments such as cognitive-behavioural therapy (CBT) or a new technique called eye movement desensitization and reprocessing (EMDR) should be considered for people suffering from PTSD. These techniques help people reduce vivid, unwanted, repeated recollections of traumatic events. More training and supervision is recommended to make these techniques more widely available.

Primary health care staff are also warned against certain popular treatments. For example, benzodiazepines, which are anti-anxiety drugs, should not be offered to reduce acute traumatic stress symptoms or sleep problems in the first month after a potentially traumatic event.

Both the mhGAP clinical protocol on Assessment and Management of Conditions Specifically Related to Stress as well as the WHO guidelines underpinning the module are available at: http://www.who.int/mental_health/resources/emergencies/en/index.html.

World Health Organization. Media centre. WHO releases guidance on mental health care after trauma [Internet]. Geneva: WHO; 2013 [cited 2013 Sep 20]. Available from: http://www.who.int/mediacentre/news/releases/2013/trauma_mental_health 20130806/en/.