

School-Based Trauma-Informed Care to Increase Educational Engagement Among Zambia's Rural Girls

Worldwide, 244 million children, adolescents, and youth do not attend school. In low-income nations, this includes 19% of primary children (6 to 11), 32% of lower secondary adolescents (12 to 14), and 53% of youth (15 to 17) (Global Education Monitoring Report Team [GEMR] & United Nations Educational, Scientific, and Cultural Organization [UNESCO], 2022). Sub-Saharan Africa has the greatest out-of-school population, with the highest rate of unenrolled girls (GEMR & UNESCO, 2022). The sub-Saharan low-income nation of Zambia ranks eighth among nations with the most significant barriers to girls' education, with 84% of secondary school-aged girls from poor households unenrolled (GEMR & UNESCO, 2022). Zambian girls, especially in rural areas, face severe marginalization related to poverty, gender, and AIDS-related stigma (Burger, 2011; GEMR & UNESCO, 2023; 2024; Lembani, 2021; Mfum-Mensah, 2017; 2018; Mpolomoka, Chulu, et al., 2023; Mpolomoka, Luchembe, et al., 2023).

Zambian government and community boarding schools serving rural girls reflect this marginalization (GEMR, 2010; Lembani, 2021; Mbewe, 2020; Mfum-Mensah, 2017). Many operate without plumbing or electricity; most lack internet, libraries, and science labs, as well as sufficient desks and books (Burger, 2011; GEMR & ADEA, 2024; Lembani, 2021; Mbewe, 2020; Mpolomoka, Chulu, et al., 2023; Sinkala, 2024). Qualified teachers, especially female role models, and STEM specialists are in short supply (Burger, 2011; Lembani, 2021; Mbewe, 2020; Mpolomoka, Chulu, et al., 2023) while overcrowded classrooms complicate behavior management and differentiated instruction (Burger, 2011). Girls frequently experience harassment and assault when walking long distances to school, deterring families from sending them to school (Burger, 2011; Mpolomoka, Chulu, et al., 2023; Sinkala, 2024), and those who live too far to walk must board in overcrowded school dormitories for extended periods (Lembani, 2021; Mpolomoka, Chulu, et al., 2023; Mpolomoka, Luchembe, et al., 2023).

Once enrolled, rural girls face retention challenges (GEMR, 2010; Mpolomoka, Chulu, et al., 2023). Poverty, gender norms, and AIDS orphanhood push girls into domestic labor, early marriage, and pregnancy when families prioritize the security of marriage over a girl's education (Blystad et al., 2020; Mpolomoka, Luchembe, et al., 2023). Schools rarely provide pregnancy or childcare support, leading to dropout (Blystad et al., 2020; Mbewe, 2020; Mpolomoka, Luchembe, et al., 2023; United Nations Population Fund [UNFPA], 2022). Despite a normative culture that supports early marriage and motherhood, stigma often isolates married girls, undermining educational engagement (Blystad et al., 2020; Mbewe, 2020;

Mpolomoka, Luchembe, et al., 2023; Zulu et al., 2022). Facing formidable barriers, rural girls must go to great lengths to stay in school.

In 2022, Zambia was praised for embracing the United Nations' Education for All mandate with its Free Education Policy (GEMR, 2015; GEMR & Association for the Development of Education in Africa [ADEA], 2024). It guarantees free primary and secondary education but fails to address the other obstacles rural girls face. Years later, regional and gender disparities persist, and education remains challenging for most marginalized rural girls (GEMR & ADEA, 2024; GEMR & UNESCO, 2024; Sinkala, 2024).

Global research confirms that educating girls is the most transformative investment a developing nation can make (GEMR & UNESCO, 2024; Sperling & Winthrop, 2016). Education boosts economic growth, improves health, increases agricultural productivity, builds disaster resilience, and reduces maternal mortality, malaria, and HIV (Sen, 2000; Sperling & Winthrop, 2016; Vandermoortele & Delamonica, 2002). In 63 nations, girls' education increased farm productivity and reduced child malnutrition by 43% (Smith, 1999). Zambian out-of-school girls were more than twice as likely to contract HIV as those in school, with higher education linked to lower infection rates (Michelo et al., 2006). Where gender norms push girls out of school, education challenges them by raising income, status, agency, and physical and mental health (GEMR, UNESCO, 2022; GEMR & UNESCO, 2023; Sen, 2000; Sperling & Winthrop, 2016). In sum, where marginalized rural girls are educationally engaged, traumagenic factors like neglect, violence, and stigma give way to female voices and choices that impel brighter futures for individuals and nations (GEMR & UNESCO, 2022; GEMR & UNESCO, 2023; Sen, 2000; Sperling & Winthrop, 2016).

Zambia's Rural Girls Experience Through the Lens of Trauma and Resilience

Trauma is individually debilitating and globally pervasive (Bloom, 2013; DeCandia & Guarino, 2015; Quiros & Berger, 2014). It is defined as "an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life-threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being" (Substance Abuse and Mental Health Services Administration [SAMHSA] 2014a, p. 7). Trauma is frequently caused by past adverse childhood experiences (ACEs) (Felitti et al., 1998). The most problematic type of trauma, however, does not occur in the wake of a time-limited horrific event. Instead, debilitating complex trauma, defined as exposure to chronic, cumulative, or sequential adversity, abuse,

or fear, occurs when children are too young to protect themselves (Anda et al., 2010; Anda et al., 2006; Bloom, 2013; van der Kolk, 2014; van der Kolk et al., 2005). For these children, toxic stress, defined as a state where overwhelming demands dysregulate the body's stress response system, causes hyperarousal and the overproduction of neurochemicals that prepare the body for danger with a fight-flight-freeze response that, over time, interrupts neural connections and eventually changes the brain (Bloom, 2013; van der Kolk, 2006). These brain changes destabilize the healthy integration of emotions, impulses, attachments, and thinking patterns (Anda et al., 2006). As adults, these children are at elevated risk for a host of medical and mental illnesses (Anda et al., 2006; Shonkoff et al., 2012; van der Kolk, 2014).

Complex trauma in childhood produces feelings of anxiety and helplessness, compromises coping capacity, diminishes academic aspirations, and increases the risk for psychiatric and mental illness in adulthood (American Psychological Association, 2013; Anda et al., 2006; van der Kolk, 2014). It gives rise to developmental delays in the physical, cognitive, emotional, and social domains, which are foundational for learning (Chafouleas et al., 2018; Overstreet & Matthews, 2011; Perfect et al., 2016; Shonk & Cicchetti, 2001). These outcomes pose formidable obstacles to educational engagement and are associated with adverse school-related outcomes like behavior, attendance, participation, grade completion, and graduation (Overstreet & Matthews, 2011; Perfect et al., 2016; Shonk & Cicchetti, 2001).

Beginning when they are too young to do anything about it, many of Zambia's rural girls experience complex trauma in the forms of famine, draught, gender-based violence, AIDS-related grief and loss, and a lack of medical care when facing wild animal injuries or disease (Amene et al., 2024; Lee et al., 2021; Miedema et al., 2024). Their responses to toxic stress are wide-ranging (Brown et al., 2024; van der Kolk et al., 2005). Some girls respond with adaptations that once served a useful purpose in the face of immediate danger but later became maladaptive (Bloom, 1995). Maladaptive coping mechanisms include avoidance, risk-taking, aggression, suppression of feelings, negative thought distortions, violence, suicidality, and biases in attention, memory, and interpreting events (Amene et al., 2024; Brown et al., 2024; Matto et al., 2014; Miedema et al., 2024; Zhang et al., 2020). Left unchecked, the effects of trauma combine to put educationally marginalized rural girls at high risk for a host of medical and mental illnesses as adults (Anda et al., 2010; Anda et al., 2006; Felitti, 2002; Felitti et al., 1998; Shonkoff et al., 2012; Zhang et al., 2020).

While trauma elevates risk, it does not always result in poor life outcomes (Buchanan, 2014; Fraser, 2004). Many children display incredible strength in adversity (Buchanan, 2014). Others learn to realign responses that do not hinder development and future functioning because the brain is neuroplastic (Arden, 2010; Seigel & Solomon, 2017). While neurobiology has improved the understanding of brain responses to trauma and resilience (Hunter et al., 2018), a key goal of current research must be understanding how to create resilience-promoting care systems (Brunzell et al., 2016). If Zambia's rural girls access protective factors embedded in school environments rich in supportive, caring relationships, their brains may be rewired for new paths of successful strategies for facing adversity (Arden, 2010; Hunter et al., 2018). These are the paths of resilience (Arden, 2010). School-based student-adult relationships are a second chance for children with early trauma to develop empathy skills that fuel future healthy relationships (Bloom, 1995; Brunzell et al., 2016; Roffey, 2013; Seigel & Solomon, 2017; Stewart et al., 2004; Woodside-Jiron et al., 2014). Not surprisingly, access to healthy school-based relationships and services has been repeatedly heralded as an effective means for building resilience in children with complex trauma, including Zambia's rural girls (Cluver & Gardner, 2007; Heath et al., 2014; Sharp et al., 2018; Sperling & Winthrop, 2016; Sporleder & Forbes, 2016; Vandermoortele & Delamonica, 2002; Zulu et al., 2020).

Understanding the Intersections of Trauma Among Zambia's Rural Girls

To understand trauma among Zambia's rural girls, an examination of the intersecting marginalized identities that magnify and shape their experiences -- like gender, socioeconomic status, and AIDS orphanhood status -- is necessary (Bryant-Davis, 2019; Quiros & Berger, 2014). These girls face trauma at the intersections of imperialist exploitation, tribalism, regional bias, poverty, gender inequality, and stigma (Mfum-Mensah, 2017; 2018). Their risk for ACES related to abuse, hunger, and disease is compounded by chronic and cumulative traumas at the intersection of poverty, gender, and AIDS-related stigma (Amene et al., 2024; Brown et al., 2024; Lee et al., 2021; Miedema et al., 2024; Zhang et al., 2020).

Poverty. In Zambia, poverty runs deeper in rural areas, where 76.6% of the population is poor compared to 23.4% in urban areas (Population Council & UNFPA, 2018; UNFPA & African Institute for Development Policy [AFIDEP], 2015). Only 27% of rural children are enrolled in secondary school compared to 59% of urban children (UNFPA & AFIDEP, 2015). Rural families frequently lack clean water, food, electricity, transportation, healthcare, and schools, creating adverse conditions leading to trauma (Behnke et al., 2017; Republic of Zambia Central Statistical Office & World Bank, 2016). Chronic poverty overwhelms coping mechanisms and self-regulation (Evans & Kim, 2012), reducing school

engagement. However, when girls attend school, they can access many protective factors, such as clean water, nutrition, hygiene education, and safe relationships with caring adults.

Gender. In rural Zambia, gender norms are conduits for trauma and a barrier to school engagement (East & Roll, 2015). Female responsibilities like fetching water and trading sex for fish expose girls to physical danger and HIV (Ashraf et al., 2017; Béné & Merten, 2008; Merten & Haller, 2007; Michalopoulos et al., 2017). Still, girls are expected to participate in domestic labor, marry early, and become young mothers (Blystad et al., 2020). One-third of 18-year-old girls are mothers, with higher rates among rural and poor girls (UNFPA, 2023). Social norms surrounding early marriage and fertility are deeply rooted and complex to address (Blystad et al., 2020; Mfum-Mensah, 2017; Zulu et al., 2022). Despite intervention efforts, Zambian adolescent pregnancy rates remain among the highest in the world (UNFPA, 2023; Zulu et al., 2022). There is a strong connection between early motherhood and poor health, domestic abuse, and trauma-related mental health complications (East & Roll, 2015). However, when girls attend school, marriage can be delayed, the space between pregnancies can be widened, health can improve, societal standing can rise, and communities can grow stronger (Sen, 2000; Sperling & Winthrop, 2016).

AIDS-Related Stigma. In Zambia, AIDS has traumatized a generation of school-aged children. In 2023, someone died of AIDS every minute, with adolescent girls in sub-Saharan Africa at the highest risk of HIV infection (Joint United Nations Program on HIV/AIDS [UNAIDS], 2024). In Zambia, 17,000 children died from AIDS in 2022, and 580,000 were AIDS orphans (Centers for Disease Control and Prevention [CDC], 2024). AIDS orphans who attend school are often hungry or abused, and many others are out of school (Cluver & Gardner, 2007). Often facing poverty, stigma, and lack of health care, HIV-positive adolescents suffer alarmingly high rates of mental illness (Dessauvague et al., 2020; Kapungwe et al., 2011; Kapungwe et al., 2010; Li et al., 2022; Mason & Sultzman, 2019). Education has been named the social vaccine against AIDS (Vandermoortele & Delamonica, 2002), but stigmas can still harm students unless schools embrace trauma-informed practices that foster resilience. When the question shifts from “What is wrong with you?” to “What happened to you?” stigma is disempowered, and helpers can transform their goals to promoting resilience (Bloom, 2013; SAMHSA, 2014a).

The Social-Ecological Theory of Resilience

Resilience is characterized by the positive adaptations a child makes to facilitate the development of healthy traits, along with the protective factors in a child’s social and political environment (Fraser, 2004; Luthar, 2003; Luthar et al., 2003).

Rather than attributing resilience exclusively to an individual child's capacity to overcome the effects of trauma, the social-ecological theory of resilience also attributes resilience to the reciprocal capacity of the child's environment (social ecology) to support positive development in the face of adversity (Bloom, 2013; Chafouleas et al., 2021; DeCandia & Guarino, 2015; Ungar, 2013b; Ungar et al., 2012). Education is a powerful intervention opportunity for students living with the effects of trauma, and schools are ideal systems for building resilience (Bloom, 1995; Brunzell et al., 2016; Roseby & Gascoigne, 2021; Soleimanpour et al., 2017). The positive relationships and routines available during a predictable school day can deliver strengthening experiences that mitigate the effects of trauma (Brunzell et al., 2016; Morton & Berardi, 2017). The social-ecological theory of resilience lends itself to an inclusive approach to supporting traumatized students by engaging the entire school community (DeCandia & Guarino, 2015; SAMHSA, 2014b). It moves from a medical model toward a more comprehensive understanding of how the environment (social ecology) impacts recovery (SAMHSA, 2014b).

Importantly, social-ecological resilience theory places the responsibility for resilience on those who hold power over the resources that promote it, including caregiver attachment, affirmation of self-worth, community belonging, and access to education (Ungar, 2013a). Ensuring that schools are equipped to meet the trauma-related needs of marginalized rural girls is a profound responsibility for Zambia. Social-ecological resilience theory is aligned with trauma-informed approaches, which are aimed at creating living, learning, and healing environments that more adequately meet the needs of individuals navigating a host of traumatic stressors.

Trauma-Informed Care (TIC)

In response to research highlighting the pervasiveness of adverse childhood experiences, as well as the potentially deleterious impacts of untreated trauma and re-traumatization within helping professions, trauma-informed care approaches were developed (Bloom, 1995; 2013; SAMHSA, 2014a). While trauma-informed *practice* focuses on clinical intervention, trauma-informed *care* supports resiliency across all levels of an organization (Bloom, 2013; Levenson, 2020). Reflecting this focus, the United States government (e.g., SAMHSA) defines TIC as an organizational approach in which all staff 1) *realize* trauma's impact and the paths to recovery, 2) *recognize* trauma symptoms, 3) *respond* with the integration of trauma knowledge into policy and practice, and 4) *resist* re-traumatization.

A TIC approach explicitly recognizes the impact of trauma on the mind and body, including the neurobiological effects (Hunter et al., 2018; Matto et al., 2014; van

der Kolk, 2014; van der Kolk, 2006; van der Kolk et al., 2005). It integrates knowledge of trauma and resilience into the organization's fabric to create a safe environment where traumatized individuals experience healing relationships that promote resilience (Bloom, 1995; Cicchetti & Banny, 2014; Elliott et al., 2005; Harris & Fallot, 2001; Levenson, 2017; Shonkoff et al., 2012). A TIC approach appreciates the vulnerabilities of traumatized individuals and trains all members of the staff to create environments and deliver services in ways that support resiliency and avoid re-traumatization (Bloom, 1995; Elliott et al., 2005; Harris & Fallot, 2001; Knight, 2015; Levenson, 2017; Siegel, 2012; van der Kolk, 2014). Recognizing that most individuals are living with the effects of trauma on one level or another, TIC works to ensure that all interactions with clients are conducted with compassion and respect (Knight, 2015; Levenson, 2017, 2020).

School-Based TIC to Support Resilience. School-based TIC is an organizational approach that supports individual students living with the effects of trauma by focusing on the entire student body (Bloom, 1995; Overstreet & Chafouleas, 2016; Sporleder & Forbes, 2016). School-based TIC aims for every administrator, teacher, coach, counselor, and staff member to be trained in the neurobiology and symptomatology of trauma and committed to creating physically and psychologically safe environments that promote resilience at every turn (Bloom, 1995). Recognizing that classroom behavior problems and educational disengagement can be indicators of trauma, trauma-informed educators develop relationships with students in ways that support their capacity for resilience (Levenson, 2017). Trauma-informed educators accept responsibility for facilitating trust by engaging with students compassionately and respectfully (Bloom, 1995; Levenson, 2017).

Schooling as a protective factor is well-established (Herrenkohl et al., 2019; Sharp et al., 2018), and research underscores the effectiveness of school-based mental health interventions (Bains & Diallo, 2016; Herrenkohl et al., 2019; Kataoka et al., 2018; Martin et al., 2017; Mendelson et al., 2020). When schools feel safe and trustworthy, they are ideal settings for nurturing resilience to increase engagement in students living with the effects of trauma (Bains & Diallo, 2016; Herrenkohl et al., 2019; Kataoka et al., 2018; Martin et al., 2017). A growing body of interdisciplinary research suggests that school-based TIC reduces depression and PTSD symptoms (Ellis et al., 2013; Hansel et al., 2010; Layne et al., 2008) while improving classroom behavior, academic success, and educational engagement (Brunzell et al., 2016; Chafouleas et al., 2015; Chafouleas et al., 2018; Herrenkohl et al., 2019; Holmes et al., 2014; McConnico et al., 2016; Morton & Berardi, 2017; SAMHSA, 2014b).

Effectiveness of School-Based TIC in Low-Resource, Non-Western Settings

Studies on school-based TIC in low-resource, non-Western settings and with marginalized populations yield mixed results. Some report weak or mixed effects (Baez et al., 2019; Day et al., 2015; Gormez et al., 2017; Gudiño et al., 2015; Kim et al., 2023; Mendelson et al., 2015; Tol et al., 2014), while many highlight positive effects like decreased anxiety, hyperactivity, and PTSD symptoms, as well as strengthened prosocial skills and peer relationships (Allison & Ferreira, 2016; Diggins, 2021; Elswick et al., 2022; Hoover et al., 2018; MacDonnell et al., 2021; McMullen & McMullen, 2018; Murray et al., 2015; Osborn et al., 2020; Osborn et al., 2021; Rossouw et al., 2018; Santiago & Kataoka, 2013). Positive effects are possible only when program components are culturally responsive and feasible in specific settings and populations (Hammond, 2014).

Effectiveness hinges on responding to local challenges with culturally responsive modifications (Hammond, 2014). Hoover et al. (2018) described a successful statewide program in a high-resource area of the United States. However, the unmodified model was not culturally transferable in low-resource contexts. Santiago (2015) implemented the same program in a low-income Latino community facing mental health stigma. Initial results were disappointing. After researchers reframed goals to focus on life skills rather than therapy, stigma reduced, engagement increased, and results dramatically improved (Santiago & Kataoka, 2013). In addition to cultural challenges, schools in low-resource settings face feasibility challenges due to severe resource limitations and shortages of mental health professionals (Kapungwe et al., 2011; Kapungwe et al., 2010; *Mental Health ATLAS 2020*, 2021; Mfum-Mensah, 2017; Rossouw et al., 2018; Sen, 2000; Weinmann & Koesters, 2016). However, programs can become feasible through task-shifting, a process by which trained non-specialists (e.g., teachers, nurses) deliver interventions (Dorsey et al., 2020; Galvin & Byansi, 2020; Gormez et al., 2017; McMullen & McMullen, 2018; Murray et al., 2015; Osborn et al., 2020; Osborn et al., 2021; Rossouw et al., 2018; Tol et al., 2014).

When TIC programs from high-income countries are adapted for cultural relevance and feasibility, they can thrive in low-income, non-Western countries. Zambia's rural girls, affected by poverty, gender exploitation, and AIDS-related stigma, benefit from school-based TIC supported in a social ecology conducive to resilience. They gain protective factors like relationships with caring adults, peer support, clean water, nutrition, health education, and mindfulness skills at school. When enrolled in TI schools, Zambia's rural girls will be empowered, barriers to education will be reduced, and social justice will be advanced.

Literature Gap and the Rationale for Addressing It

An act of the United States Congress declared the 1990s the ‘decade of the brain. This catalyzed global scientific research in neurobiology, neurogenetics, neurochemistry, developmental psychopathology, and the neuroscience of trauma (Cicchetti & Banny, 2014; Shonkoff et al., 2012; van der Kolk, 2014). Subsequent studies demonstrated that the accumulation of adverse childhood experiences (ACEs) strongly correlates with poor physical outcomes, mental illness, suicidality, chemical dependence, heart and liver disease, intimate partner violence, and unintended pregnancy (Anda et al., 2010; Anda et al., 2006; Felitti, 2002; Felitti et al., 1998). Building on the burgeoning neurobiological, psychological, and social science, the Substance Abuse and Mental Services Administration (SAMHSA) of the United States government established six principles of TIC that guide the therapeutic process at the organizational level to create environments that enable healing and resilience: 1) Safety, 2) Trustworthiness and Transparency, 3) Peer Support, 4) Collaboration and Mutuality, 5) Empowerment, Voice, and Choice, and 6) Cultural, Historical, and Gender issues (SAMHSA, 2014a; 2014b). SAMHSA’s six principles of TIC are employed across the United States among myriad disciplines, populations, and organizations today. While the neurobiology of trauma is the same in every setting, SAMHSA’s sixth principle highlights the critical importance of providing cultural, historical, and gender relevance through nuanced, culturally responsive services delivered in relational ways (SAMHSA, 2014a).

SAMHSA’s six principles of TIC provide a Western lens for viewing their application in diverse organizations serving diverse people living with the effects of trauma. However, to date, there is no scholarship aimed at contextualizing the application of SAMHSA’s six principles of TIC in low-income, non-Western settings with marginalized populations. This conceptual article provides culturally relevant, research-informed guidance for applying TIC to schools serving Zambia’s marginalized rural girls. Addressing this gap in the literature will advance social work practice and the cross-cultural reach of TIC.

SAMHSA’s Six Principles as the Framework for School-Based TIC in Zambia

SAMHSA’s six principles of TIC provide a guiding framework for a trauma-informed approach that can be effectively utilized across a range of human service systems worldwide, including healthcare, child welfare, military, and education sectors. The framework allows for easy adaptation across settings, populations, and organizations positioned to ameliorate the effects of trauma. In particular, the

framework's simplicity lends itself to contextual modifications that can be leveraged to create an educational milieu that catalyzes resilience and propels school engagement for Zambia's rural girls.

Key Cultural Influences for the Zambian Context

Culturally responsive practices utilize knowledge about key cultural influences and the intersections of trauma to make school communities inclusive for every student, enhance learning, and strengthen school engagement (Gay, 2009; 2015; 2018; Hammond, 2014; Kalyanpur, 2016). Culturally responsive TI practices address students' strengths and challenges to build resilience (Chafouleas et al., 2021). Adaptations of SAMHSA's six principles of TIC for implementation in Zambian schools must consider the Zambian national culture and how its values impact cultural norms and experiences relevant to rural girls' lives and experiences. By positioning TIC practices within Zambian culture, the adaptations bring to light the tension between celebrating traditions that foster resilience and challenging norms that can interfere with rural girls' educational engagement. This equilibration demands careful attention to harmonizing values, like collectivism and reverence for elders, as well as the problematic influence of traditional rites of passage and gendered expectations that keep girls out of school.

Zambia's national culture, comprised of more than 70 languages and ethnic groups, is a blend of collectivism (prioritization of group over individual needs), communality (shared responsibility, belonging, and harmony), reverence for elders, and respect for authority that can positively influence rural girls' educational engagement (Matshakaile, 2019). Traditional art, music, and dance explain and beautify everyday life and, when integrated into the school curriculum, can mold members of a diverse learning community into a unified student body (Mkandawire et al., 2019; Nanyangwe-Moyo et al., 2020; Taylor, 2006). However, in rural areas where the culture is patriarchal and highly conservative, specific values can have a mixed influence on educational engagement: security and protection, hard work, conformity, purity and propriety of a woman, respect of a man (Ministry of Gender of the Republic of Zambia, 2019; Nanyangwe-Moyo et al., 2020). Ceremonial rites of passage are the primary and only trusted institution for transmitting cultural expectations to pubescent girls: submission, sex, childbearing, and domestic work (Mkandawire et al., 2019; Nanyangwe-Moyo et al., 2020; Taylor, 2006). Initiation ceremonies have been scrutinized for their deleterious impact on educational engagement, especially for rural girls (Fumpa-Makano, 2019; Mpolomoka, Chulu, et al., 2023; Mpolomoka, Luchembe, et al., 2023; Mushibwe, 2013; Nanyangwe-Moyo et al., 2020). In addition to traditional cultural influences, rural girls who attend school are introduced to modern cultural trends, like the high value placed on appearance and sport. Dressing well in self-selected salal (secondhand Western

clothing) communicates social standing, personal agency, and well-being (Hansen, 2000a; Hansen, 2000b), while playing for the Copper Queens, Zambia's national football team, is the dream of many schoolgirls (Meier & Saavedra, 2009; Mkandawire et al., 2019; Taylor, 2006).

Contextualizing School-Based TIC in Zambia

School-based TIC can address the needs of rural girls living with the effects of trauma only if it finds ways to integrate the complex tapestry of Zambian cultural values into the Western framework. The following section explores SAMHSA's six principles of TIC, focusing on culturally responsive implementation in Zambian schools. Incorporating national cultural values into school-based TIC will significantly augment effectiveness. It begins with renaming SAMHSA's six principles of TIC in terms that better reflect nuanced cultural values and traditions.

Principal One: Safety (Safety, Security, and Protection)

SAMHSA's first principle of TIC, Safety, applies to physical and psychological safety. For Zambian TI schools, safety should be renamed *Safety, Security, and Protection*, recognizing that safety extends beyond physical and psychological safety and encompasses one's secure future and communal well-being.

Physical Security. Rural girls affected by trauma must feel physically safe when they arrive at boarding school for the first time (Elliott et al., 2005). For many, malnutrition, water shortages, and a lack of medical care have been everyday realities. Campus tours should emphasize safety, like regular meals, clean drinking water, and insecticide-treated nets (ITNs). In light of the cultural emphasis on protection, campuses should be fenced with a single access point, and the perimeter should be monitored. An attendant should monitor a single entrance. Prominent signage should display campus rules regarding weapons, noise, and visitation. Walkways used after dusk should be clear. Dorms should be well-maintained and supervised by trusted female dorm attendants. Menstrual hygiene supplies should be accessible, and body privacy should be protected in dressing areas (Mbewe, 2020; Mfum-Mensah, 2018; Sinkala, 2024). These provisions will have a differential impact on rural girls, improving focus and school engagement.

Psychological Security. New rural girls may have little experience interacting with strangers and benefit from carefully paced introductions that lead to safe relationships. Concerns about hair and clothes can create anxiety when facing a contemporary culture that values appearance. Schools can help reduce stress with hair care and access to quality second-hand clothes before peer introductions. Culturally valued art representing the many tribes of the school community can

promote belonging and ease isolation (Mkandawire et al., 2019; Taylor, 2006). Fear of stigma and collectivist values that protect family honor may inhibit girls from disclosing personal information such as AIDS, orphanhood, or child head of household status, so intake should be an extended process. TIC honors the individualized pacing of building rapport, allowing disclosure over time in a context that feels relationally safe (Levenson, 2020; Pachankis, 2007).

Cultural and Communal Protection. In a patriarchal society, schools must assure fathers that their daughters are safe from influences that may compromise their future. Particularly in conservative rural environments, the protection of girls' purity and propriety is important. School staff should serve as guardians, balancing discipline and structure with cultural alignment. Involving trauma-informed community elders in decisions and ceremonies can reinforce security and cultural continuity while supporting resilience among rural girls. When community elders are included in the process, reciprocal trust is enhanced among the school, community, and students.

Principal Two: Trustworthiness and Transparency (Integrity and Trust)

SAMHSA's second principle, Trustworthiness and Transparency, applies to relationships with trustworthy helpers who act transparently. For Zambian TI schools, the second principle should be renamed *Integrity and Trust*, recognizing that reciprocal trust is the foundation of a society rooted in hierarchy and communality. Integrity should be promoted by maintaining transparent policies that support resilience without violating cultural expectations. Student welfare decisions, including discipline, should involve trauma-informed community elders and respected school authorities to ensure alignment with traditional values. Honest communication reinforces trust among students, staff, and parents, increasing a sense of belonging and shared responsibility. School staff should model cultural humility, celebrating linguistic, ethnic, and tribal diversity to strengthen credibility and foster trust and safe relationships.

Safe relationships are steady, dependable, and affirming with clear but not harsh boundaries (Levenson, 2020). These are the tools that model flexibility and adaptability, which build resilience. A school characterized by safe relationships is possible when leaders and staff treat one another with integrity, kindness, and respect. The cultural preference for authoritarian organizational structures (Matshakaile, 2019) can lead to unilateral decision-making, strict behavior codes, and formal, distant staff-student relationships. These can disempower rural girls and inhibit help-seeking. However, when safe relationships are prioritized, even within authoritarian structures, students living with the effects of trauma who have learned not to trust others will be empowered to seek and receive the help they need

to heal (Bloom, 2013). The most effective TI schools will be those willing to expand their strategies from authoritarian leadership to include more participative ones. Senior leaders should model shared decision-making and train staff to assume collective responsibility for earning student trust. Trust is ignited when interested leaders and staff listen without judgment, meet commitments, and maintain boundaries. It is deepened when leaders and staff admit mistakes and pursue relational restoration. It is solidified when leaders and staff demonstrate unconditional positive regard for students, even during behavioral breakdowns.

Principal Three: Peer Support (Community)

SAMHSA's third principle, Peer Support, applies to the healing dynamic when individuals with similar lived experiences process common difficulties, emotions, and positive experiences to enable mutual aid, validation, and hope (Yalom & Leszcz, 2020). For Zambian TI schools, the third principle should be renamed *Community*, recognizing that Zambia's deeply rooted value of collectivism emphasizes interconnectedness, communal responsibility, and supportive community networks.

The community of peers is crucial for rural girls living with the effects of trauma in boarding schools far from home. These girls often experience familial pressure to drop out of school and return home to marry, bear children, and fulfill domestic responsibilities. Communal bonds and educational engagement are strengthened when schools provide structured opportunities for experienced rural girls to mentor newer ones, especially in the dormitories. Schools should leverage the power of cultural expression to build community by integrating traditional music, dance, and storytelling around relaxed evening fire circles facilitated by trusted, trauma-informed dormitory mothers. Beyond mentorship, schools should integrate a trauma-informed approach to coaching, transforming extracurricular experiences like soccer teams and drumming clubs into powerful therapeutic groups. Here, de-escalation, self-regulation, and relational skills can be taught, practiced, and refined to reinforce girls' capacity to navigate trauma and build resilience (Bandura, 1977; Knight, 2015; Mkandawire et al., 2019; Taylor, 2006).

Principal Four: Collaboration and Mutuality (Collaboration)

SAMHSA's fourth principle, Collaboration and Mutuality, applies to leveling power differences in favor of relationships defined by power-sharing. For Zambian TI schools, the fourth principle should be renamed *Collaboration*, recognizing the challenge posed by Zambia's emphasis on the cultural values of reverence for elders and respect for authority (Matshakaile, 2019). Without collaboration, these

cultural values can combine to tip the balance of power in schools with hierarchical structures.

For rural girls living with the effects of trauma, culturally aligned hierarchical structures may feel threatening (East & Roll, 2015; Knight, 2015). Authoritarian decision-making may limit staff influence over policies that enhance the school climate, while students may hesitate to engage with staff in open dialogue and help-seeking. To compensate, schools must balance hierarchical structures with a firm commitment to encouraging staff and students to ask open-ended questions, invite feedback, and actively listen to one another to create a mutually supportive classroom climate (Levenson, 2020). However, culturally responsive commitments to mutuality must be framed within the context of respect for elders and authority figures. Schools that rely on restorative or peer mediation approaches to conflict resolution for addressing school-related disputes must ensure that cultural norms of communal harmony and deference to authority guide interactions.

In contrast to the challenges associated with authoritarianism, Zambian collectivism supports the TIC principle of mutuality (Matshakaile, 2019). Mutuality encourages collective problem-solving. It encourages staff to model power-sharing by inviting students to help set learning goals, resolve conflicts, draft classroom rules, plan meals, host traditional celebrations, and organize community service initiatives. When these activities are built into the curriculum and framed as extensions of the cultural value of working together for the common good, their acceptance is enhanced. Resilience flourishes when schools emphasize mutuality so that every community member feels valued, heard, and engaged.

Principal Five: Empowerment, Voice, and Choice (Tenacity)

SAMHSA's fifth principle of TIC, Empowerment, Voice, and Choice, applies to building self-advocacy skills for individuals affected by marginalization and trauma. For Zambian TI schools, the fifth principle should be reframed as *Tenacity* to align with cultural values of discipline and hard work, especially for women. At school, tenacity is goal-oriented, self-regulated, persevering, and resilient in facing challenges. It drives empowerment and self-determination.

Zambian schools often stress conformity and respect for authority, which may stymie opportunities for rural girls to voice their perspectives or make choices (Matshakaile, 2019). This may reinforce the feelings of powerlessness associated with trauma (Levenson, 2020). However, empowerment emerges when culturally aligned values of discipline and hard work are framed as tenacity. Acceptance of this principle may be enhanced when associated with Zambia's maturing policy environment. The 2024 National Action Plan on Youth Employment promotes

youth empowerment and self-determination through integrated economic development strategies (The Government of Zambia & United Nations Country Team, 2024). When schools support these strategies, tribal leaders committed to national progress are more likely to support empowerment for rural girls.

Shared power is transformative (Levenson, 2020). When staff replace dogma with dialogue, students learn to value their viewpoints and speak up. A strengths-based approach that emphasizes resilience over deficits cultivates tenacity, empowerment, and self-efficacy (SAMHSA, 2014a). Voice and choice take hold when rural girls who have grown up without power are invited to make simple decisions like choosing partners, songs, books, or chores. These opportunities build self-efficacy, the belief in one's capacity to overcome challenges, achieve academically, and lead (Bandura, 1977). Self-efficacy supports resilience and is an antidote to the cultural, historical, and gender-related trauma commonly experienced by rural girls.

Principal Six: Cultural, Historical, and Gender Issues (Culture and Stigma Sensitivity)

SAMHSA's sixth principle of TIC, *Cultural, Historical, and Gender Issues*, applies to delivering culturally responsive, historically attuned, and gender-specific support to maximize resilience and avoid re-traumatization. For Zambian TI schools, the sixth principle should be renamed *Culture and Stigma Sensitivity*, reflecting the complex intersectionality of poverty, gender, and AIDS stigma as traumagenic barriers to educational engagement (Bryant-Davis, 2019).

Given Zambia's tribal and linguistic diversity, school staff must remain vigilant to insidious manifestations of tribalism, the separatist identification with one's ethnic group (Hamalengwa, 2016; Mudenda, 2018). Microaggressions and bullying associated with tribalism must be addressed promptly, and when relational ruptures occur, repair must be prioritized. Staff should leverage Zambia's emphasis on communal values and affinity for traditional, indigenous culture to foster inclusivity, enrich the curriculum, and unite a diverse student body. By liberally incorporating sensory representations of each tribe's unique music, stories, handicrafts, fabrics, foods, games, and ceremonies into the school's life, each girl is helped to feel seen, included, and valued.

In light of the strong influence of patriarchy and conservatism in rural areas, schools must balance tradition and progress. Gender equity must be promoted through overtly acknowledging Zambia's legacy of gender-based educational marginalization in a context that respects cultural norms. In addition, propelled by

growing access to the internet and social media, the rise of contemporary fashion, sports, and other youth trends should be welcomed as part of an evolving national identity. These elements should be incorporated into the school's life to equip girls to navigate both traditional and contemporary dimensions of Zambian society. When school-wide trauma-informed programs are implemented in culturally responsive ways, schools remain flexible, adjusting their approaches to align with students' cultural values and dynamic needs. When school staff lead with cultural humility, rural girls from diverse linguistic and ethnic groups experience a potent sense of unity and belonging that supports resilience (Scarf et al., 2016).

Transforming the Six Contextualized Principles of TIC into Practice

Shifting from the Western paradigm inherent in SAMHSA's six principles of TIC to a contextualized Zambian paradigm transforms practice. Practitioners of school-based TIC in Zambian schools serving rural girls must actualize each principle by carefully applying it in countless micro-interventions. Table 1 offers sample case scenarios associated with each principle and examples of non-trauma-informed and culturally responsive trauma-informed responses.

Table 1: Case Examples of Trauma-Informed Practices for Schools Serving Zambia's Rural Girls

Case Exemplified	Non-TIC Approach	Culturally Responsive TIC Approach
Safety, Security & Protection (Safety)		
Twelve-year-old Joyce, from a rural area, is excited to attend boarding school but secretly fears food and water shortages due to past experiences of famine. After a long journey, she arrives exhausted, hungry, and dusty, wearing a tattered dress. Seeing other girls in clean uniforms, she feels ashamed and anxious about her appearance. As the headteacher approaches, Joyce panics, forgets her greeting, and fights the urge to flee.	The headteacher smiles and greets Joyce in English, then gives a curriculum-focused tour without addressing her basic needs. After handing her a uniform and leaving her at the dorm, she says, "We're honored you've joined us. Focus on your studies and you'll adjust." Overwhelmed and unheard, Joyce already believes coming to school was a mistake.	The headteacher greets Joyce in her tribal language and offers juice. Holding her hand, she introduces the staff nurse, who provides a bath, a clean uniform, a warm meal, and a soft bed in the infirmary. That evening, she explains safety protocols and dorm life. The next day, Joyce tours the campus before being introduced to the dorm attendant. "We're honored you've joined us," says the headteacher. "You're strong; we're here to support and protect you like family." Joyce breathes deeply and smiles.

Integrity & Trust (Trustworthy & Transparency)

Thirteen-year-old Agness has never left her rural village until now. A math teacher is conducting a lesson when the headteacher enters his tidy classroom and introduces Agness. The class recites a welcome poem, and the teacher shows Agness to her seat. Moments later, the teacher notices Agness quietly crying at her desk. When asked what's wrong, she murmurs, "I want to go home. I don't belong here."

The teacher insists, "You must be quiet while I teach. Our school is one of the most modern educational spaces in the region. Aren't you happy to be here?" Humiliated, Agness chokes back her tears and replies, "Yes, Sir." That night in the dorm, she silently cries herself to sleep.

The teacher puts down his chalk and approaches Agness, saying, "Thank you for your honesty. I'm sorry this classroom still looks so plain. I admit I've meant to decorate it with student art reflecting our beautiful villages, towns, and tribes." He then invites the class to create cultural items like baskets, beadwork, and fabrics to transform the space. Over the next month, the teacher does what he promises. Now, the classroom feels vibrant and inclusive. For Agness, she finally feels like she belongs.

Community (Peer Support)

Spirited fourteen-year-old Esther returns to school after a two-week initiation ceremony for an unwanted arranged marriage. During the customary silence period, she broods about her upcoming wifely duties, becoming withdrawn and irritable. Her friends complain to the dorm attendant, saying Esther is no longer fun and has become mean. Esther, hurt and isolated, convinces herself she does not need friends.

The dorm attendant calls a meeting and asks for a volunteer to "help Esther get out of her shell." She reminds everyone of the school's expectations for greetings and polite speech. Overwhelmed, Esther yells, "That is stupid, and I hate you all!" and storms out of the dorm.

Privately, the dorm attendant invites Esther for tea and validates her feelings of loneliness after initiation. She gently says, "You are not alone. Older girls meet weekly by the fire to share stories of becoming women. They are a beautiful sisterhood." She pairs Esther with a mentor, a "big sister," who introduces her to the fire circle and checks in regularly. As Esther hears familiar stories and sees her peers share their struggles, she opens up. Over time, her warmth and humor return, and she reclaims her place in the dorm community.

Collaboration (Collaboration & Mutuality)

Eighteen-year-old Charity's baby boy died before his first

The discipline mistress sternly reminds Charity to

The discipline mistress kindly reminds Charity that

<p>birthday. She was called to the discipline mistress’s office because she was late to breakfast most mornings, avoiding the dorm while others dressed. When girls tease her about her stretchmarks, it triggers shame and memories of her husband’s harsh discipline and her father’s wedding-day warning: “I am poor, but I have arranged a secure future for you and a good lobola bride price for me. Work hard, show respect, and quickly give this man a son so your future in his house remains secure.”</p>	<p>respect authority, reads the rules, and warns her: “Two more missed meals and you will be suspended. Will you shame your family like this?” Charity’s face burns with fear, and she cannot speak.</p>	<p>her job is working with her to help her succeed. After reviewing the policy, she says, “I know you want to honor your family. Can you help me understand your mornings so we can collaborate to find a solution?” When asked about dressing room challenges, Charity opens up and requests to get ready ten minutes earlier than the others. The discipline mistress agrees, praises Charity’s solution, and affirms her strength. Charity leaves the meeting feeling heard and supported.</p>
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Tenacity (Empowerment, Voice & Choice)

<p>Seventeen-year-old Nyambe is a gifted footballer and student. A recruiter offers her a scholarship to play for the national team and attend university. Elated at first, Nyambe becomes despondent when her father forbids it, stating that sports and higher education are unfit for women. Feeling trapped, she stops trying at school and practice.</p>	<p>Concerned, the coach assumes Nyambe’s success has made her arrogant. He scolds her in front of the team about humility and hard work. The next day, Nyambe submits a letter resigning from the team.</p>	<p>Concerned, the coach privately asks about Nyambe’s family’s thoughts on the offer. She avoids eye contact and says nothing. He gently asks, “How can I help you persevere toward your dreams by showing your family that this opportunity benefits everyone?” They plan a village visit, during which the coach respectfully presents Nyambe’s case. That evening, Nyambe asks her father to reconsider, saying she wants to honor him through her talent. He smiles and agrees to think about it.</p>
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Culture & Stigma Sensitivity (Cultural, Historical & Gender Issues)

<p>Sixteen-year-old Mulenga, HIV-positive and a child head of household, lost both parents to AIDS. Her aunt and uncle live in Lusaka and have</p>	<p>The admissions officer rushes through the intake form, asking direct questions about family status and background. Nervous, Mulenga lies about</p>	<p>The admissions officer welcomes Mulenga with biscuits and praises her courage. She explains the intake process, assuring</p>
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<p>embraced contemporary values. They view education as the best way to secure Mulenga’s stigma-free future. They offer to care for her younger siblings so she can attend school. Mulenga, hopeful but anxious, fears her background will isolate her.</p>	<p>her HIV and orphan status, terrified that her peers will reject her.</p>	<p>Mulenga that shared information remains private. She asks open-ended questions, giving Mulenga space to describe her family in her own words. When signs of anxiety emerge, the admissions officer gently ends the session, saying, “Thanks for sharing today. Would you like to return later this week for more biscuits and a chat?” Feeling accepted for who she is, Mulenga nods and smiles, asking for one more biscuit to take with her.</p>
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In alignment with the National Association of Social Workers (NASW) Code of Ethics and International Federation of Social Workers (IFSW) Statement of Ethical Principles, American and international social workers must uphold human dignity, challenge injustice, and promote the well-being of vulnerable populations (International Federation of Social Workers, 2018; National Association of Social Workers, 2021). Contextualizing trauma-informed care for international, low-resource settings reflects this ethical mandate. The marginalization of Zambia’s rural girls is a pressing social problem with cascading adverse effects. These girls face significant barriers to education, many rooted in complex trauma at the intersections of poverty, gender, and AIDS-related stigma. Social justice is advanced when girls in school access protective factors like medical care, mentorship, peer support, clean water, and nutrition as they grow into flourishing leaders. School-based TIC offers a promising, whole-school approach to fostering resilience in a safe, trustworthy, peer-supportive, collaborative, empowering, and culturally responsive environment where healthy relationships are everyone’s responsibility. Applying SAMHSA’s six guiding principles of TIC in Zambian schools is thus an important step toward educational equity and a crucial strategy for advancing social justice.

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