**Trauma Informed Practices In Inclusive Schools :A Narrative Review Of Psychosocial Wellbeing And Mental Health Readiness**

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**Abstract**

The cognitive, emotional, and social development of students is greatly impacted by childhood trauma, which frequently results in major obstacles to both academic achievement and general well-being. This narrative review looks at how trauma-informed practices are incorporated into inclusive schools, highlighting how they promote mental health readiness and psychosocial well-being. Important domains covered include how trauma affects pupils, how inclusive education helps, how parent-child interactions aid in trauma healing, how to control emotions, and how socioeconomic status (SES) affects trauma and education. Anxiety, despair, and behavioral problems are more likely to occur when adverse childhood experiences (ACEs) interfere with emotional control and cognitive performance. Emotional safety, flexible teaching methods, and nurturing surroundings that build student resilience are all encouraged by trauma-informed education. Furthermore, solid parent-child bonds and constructive coping techniques, like cognitive reappraisal, greatly enhance the results of trauma healing. Effective implementation is nevertheless hampered by issues like socioeconomic inequality and restricted access to mental health resources. In order to guarantee that inclusive classrooms become places of healing and development for every kid, this review emphasizes the critical need for policy-driven interventions, teacher preparation, and school-based mental health care.

***Keywords :***Trauma , Anxiety , Cognitive Reappraisal , Mental Health .

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Children's mental health and psychosocial well-being are profoundly and widely impacted by trauma, which frequently affects their capacity to learn, build relationships, and participate meaningfully in school settings (Marusak et al., 2022). The repercussions of trauma can pose serious obstacles to a child's academic and personal growth in inclusive schools, where variety in needs, experiences, and skills is a defining feature. The goal of inclusive education is to give all students, especially those with disabilities, those from underrepresented groups, and those who have suffered from adverse childhood experiences (ACEs), equal chances. However, these objectives are still challenging to accomplish if trauma-informed methods are not incorporated into the curriculum (Moses, 2010) .

Recognizing the symptoms of trauma, establishing emotional safety, and developing supportive environments that encourage recovery and resilience are the main goals of trauma-informed approaches. Beyond just treating the immediate impacts of trauma, these methods seek to give schools the resources and know-how they need to empower students on all levels. A key component of this strategy is mental health preparation, which equips students to digest their experiences and participate in their education in a positive way (Marusak et al., 2022) .

Examining how trauma-informed practices are incorporated into inclusive schools, this narrative review highlights how they support students' psychosocial wellbeing and mental health preparedness. By combining the most recent studies, it emphasizes how crucial it is to acknowledge and treat trauma as a necessary component of inclusivity. Effective interventions, implementation issues, and the wider ramifications for educators, legislators, and mental health experts are all further examined in the review. It aims to offer a thorough grasp of how trauma-informed practices may turn inclusive classrooms into places where all children can find healing, development, and achievement.

**Aim**

The aim of this narrative review is to explore the integration and effectiveness of trauma informed practices in inclusive school settings , with a focus on promoting psychosocial well - being and mental health readiness among students .

**Method**Analysis was done on literature available concerning substance abuse in relation to impact of trauma on students , parent - child relationship in trauma recovery in the Indian context. Studies that were published between 2005-2024 were taken from PubMed , PubMed Central , National Library of Medicine Catalogue and Research Gate .The term used for screening comprised of the variables relating to the study design such as “ Trauma and Its Impact on Students” , “Inclusivity In Trauma Informed Education”, “Parent Child Relationship in Trauma Recovery”, “Emotional Regulation and Coping Mechanism in Children”, “Impact of Socio- Economic Status in Trauma and Education” . Furthermore the search was restricted to focus mainly on inclusive school setting including those with disability , marginalised backgrounds , trauma affected students . Empirical Studies including ( Quantitative , mixed method , meta analysis , case study and program evaluations were included in the review . It was made sure to that the studies that were included are in the time frame of 19 years ( 2005-2024) including the articles that are published in english to ensure accessibility and consistency . Peer-reviewed articles, academic research studies, and reports were also included . In order to address the issue appropriately it was made sure not to include researches which are conducted outside of India , Grey literature, including unpublished manuscripts, dissertations, and opinion-based articles , and Studies lacking substantial relevance to the selected domains. Articles were obtained that yielded 14 results . After the removal of duplicates , an overall search gave 12 hits . The references in each of the articles selected from the preliminary search were also reviewed to select the article that further highlighted and gave a much more meaningful and depth understanding of the topic . In this Review , 12 research studies were included . A cumulative total of approximately 14,731 participants, aged between 14-27 years. This narrative review exclusively incorporates studies that adhere to the following criteria (1)Studies conducted between 2005 and 2024 that focus on the Indian population , (2) Trauma and Its Impact on Students , (3) Parent Child Relationship in Trauma Recovery , (4) Emotional Regulation and Coping Mechanism in Children, (5)Impact of Socio- Economic Status in Trauma and Education , (6) Peer-reviewed articles, academic research studies, and reports ( Figure 1).

Identification of Studies via Databases

Records identified from

Databases : 16

Reports assessed for eligibility

( n= 16)

Studies included in review (n=13)

Duplicate records (n=2)

Reports not retrieved : (n=1)

Reports excluded : studies conducted outside India , lacking substantial relevance to the selected domains.

**Figure 1:** Identification of studies via databases .

**Prevalence Rate of Trauma among Children**

Studies estimate that globally, over 50% of children experience at least one adverse childhood experience (ACE) by the age of 18, including abuse, neglect, or exposure to violence (World Health Organization, 2021). Such experiences significantly impact psychosocial well-being and academic success, necessitating trauma-informed practices in educational settings. In the United States, approximately 34% of elementary school children have encountered at least one traumatic event, such as domestic violence, natural disasters, or community violence (Perfect et al., 2016). Furthermore, studies estimate that 14%–43% of children worldwide are exposed to trauma annually, with a significant subset developing post-traumatic stress disorder (PTSD) (National Child Traumatic Stress Network, 2022). These statistics underline the urgent need for trauma-informed practices in inclusive schools to address the profound impact of trauma on children’s academic, emotional, and social development.

Childhood trauma is a significant concern in India, with studies revealing high prevalence rates of various forms of abuse among children. Research indicates that up to 74% of Indian children report experiencing physical abuse, up to 72% report emotional abuse, and up to 69% report sexual abuse. ￼ Additionally, neglect is reported by up to 71% of children, with emotional and physical neglect reported by up to 60% and 58%, respectively. ￼ These alarming statistics underscore the urgent need for implementing trauma-informed practices within inclusive educational settings in India to support the psychosocial well-being and mental health readiness of affected students (Kurian , 2022) .

**Discussion**

The Review provides the comprehensive examination of the existing body of literature on the Trauma Informed Practices in Inclusive Schools . This Narative Review aimed to explore the role of Trauma informed practices in inclusive schools , with a focus on promoting psychosocial well being and mental health readiness among students . The findings provide valuable insights into the challenges and opportunities for implementing such practices in educational settings .Firstly , Analysis was done on literature available concerning substance abuse in relation to the impact of trauma on students , parent - child relationship in trauma recovery in the Indian context. Studies that were published between 2005-2024 were taken from PubMed , PubMed Central , National Library of Medicine Catalogue and Research Gate .The term used for screening comprised of the variables relating to the study design such as “ Trauma and Its Impact on Students” , “Inclusivity In Trauma Informed Education”, “Parent Child Relationship in Trauma Recovery”, “Emotional Regulation and Coping Mechanism in Children”, “Impact of Socio- Economic Status in Trauma and Education” . Furthermore the search was restricted to focus mainly on inclusive school setting including those with disability , marginalised backgrounds , trauma affected students . Empirical Studies including ( Quantitative , mixed method , meta analysis , case study and program evaluations were included in the review . It was made sure to that the studies that were included are in the time frame of 19 years ( 2005-2024) including the articles that are published in english to ensure accessibility and consistency . Peer-reviewed articles, academic research studies, and reports were also included . In order to address the issue appropriately it was made sure not to include researches which are conducted outside of India , Grey literature, including unpublished manuscripts, dissertations, and opinion-based articles , and Studies lacking substantial relevance to the selected domains. Articles were obtained that yielded 14 results . After the removal of duplicates , an overall search gave 13 hits . The references in each of the articles selected from the preliminary search were also reviewed to select the article that further highlighted and gave a much more meaningful and depth understanding of the topic . In this Review , 13 research studies were included . A cumulative total of approximately 14,731 participants, aged between 14-27 years. This narrative review exclusively incorporates studies that adhere to the following criteria (1)Studies conducted between 2005 and 2024 that focus on the Indian population , (2) Trauma and Its Impact on Students , (3) Parent Child Relationship in Trauma Recovery , (4) Emotional Regulation and Coping Mechanism in Children, (5)Impact of Socio- Economic Status in Trauma and Education , (6) Peer-reviewed articles, academic research studies, and reports

The following table summarises the key characteristics of the studies reviewed in this research , it outlines the study type , the sample size , the methodology used and primary findings . it provides a clear overview of the breadth of the research included in the review , offering insights about how trauma has a impact on the development of children and the role trauma informed practices that help children .

***Table 1.1***Details of each article included after review in the manuscript

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Study Author(s)** | **Year**  | **Sample Size**  | **Methodology** | **Primary Findings**  |
| Singha, Neeta Austin;Gupta, Navita;Goyal, SandeepKumar | 2024 | 1326 Nursing students  | Cross Sectional Study | Around two-thirds (65%) of the nursing students reported exposure to some type of childhood trauma. More than half (58.2%) students were exposed to more than one type of CT and 8.6% experienced all five forms of CT. Out of five types of traumas, majority of the students experienced emotional neglect. CT was shown to be inversely related to psychological resilience. CT subscales also exhibited a statistically significant negative link with psychological resilience. |
| Nilamadhab Kar , Prasanta K Mohapatra , Kailash C Nayak , Pratiti Pattanaik , Sarada P Swain , Harish C Kar  | 2007 | 447  | Survey Method  | A study found that 30.6% of children had PTSD, with an additional 13.6% showing sub-syndromal symptoms. Parents or teachers reported mental health concerns in 7.2% of children, a small proportion of those with any syndromal diagnosis. Children in high-exposure areas had significantly higher PTSD rates (43.7%) compared to those in low-exposure areas (11.2%). Depression was strongly linked to PTSD. Logistic regression analysis revealed that high exposure, lower educational level, and middle socioeconomic status were significant predictors of PTSD. Factors like extreme fear, perceived life threat, family death, home damage, or shelter stays were not significantly linked to PTSD. |
| Chetna Duggal , KanakKataria LamiaBagasrawala , Anvita Walia  | 2024 | K- 12 Teachers of India  | Pilot Study  | the program garnered strong acceptability ratings and positive feedback, particularly for its relevant content, practical strategies, and emphasis on the well-being of both teachers and students.  |
| Smruti Raghani , Joanne Justus | 2024 | 12 studies  | Narrative Review of 12 studies  | findings emphasize the importance of integrating TID principles to create environments that not only fulfill basic needs but also promote mental and emotional healing. |
| Silvia Exenberger ,David Riedl ,Kumuthavalli Rangaramanujam ,Vijai Amirtharaj ,Florian Juen | 2019 | 164 | Survey Method  | Results showed that mother-child agreement on posttraumatic stress symptoms was poor, and a child’s age, gender and living situation (fishing village vs. family-based out-of-home care) did not positively influence this concordance. |
| S. Meheli , Poornima Bhola , Nithya Poornima Murugappan | 2021 | 5 | Qualitative Study  | The findings point to the importance of a developmental perspective in the emergence of NSSI and the need to assess and support individualised recovery pathways. |
| Eva Alisic , Revathi N. Krishna,Matthias R.  | 2015 | 24 parents and their children  | Quantitative study | Analyses revealed significant parent–child associations for number of words, rate of cognitive processing words, and rate of anxiety words. No associations were found for anger or sadness words. With both similarities and differences in parents’ and children’s narratives, the current findings encourage further research in the domain of posttrauma narratives. |
| Vipasha Naik1, Dr. Gunjan Trivedi, Riri G. Trivedi | 2024 | 130 parents and children  | Quantitative Study  | Parents in the highertrauma exposure (ACE16 score >=5) had significantly less Authoritative (desired) parentingstyle compared to parents in the low trauma exposure group (statistically significant, p< .05).Two of the three dimensions (Regulation and Autonomy) related to control were also lowerin individuals with a history of high childhood trauma (p<.05).  |
| Soham Gupta , Jonathan FischerJonathan , Sakhi Roy ,Atreyee BhattacharyaAtreyee Bhattacharya | 2024 | 200 | Quantitative Study  |  Findings suggest that lifetime suicidal ideation significantly differed between those who stay alone and those who live in a nuclear family (p < 0.01), and also those who stay in a joint family (p < 0.05). Cognitive reappraisal predicted a reduction in suicidal ideation mediated by perceived social support (B = −0.06, p < 0.05) and avoidant coping (B = −0.07, p < 0.05). Whereas, expressive suppression predicted induced levels of suicidal ideation through perceived social support (B = 0.05, p < 0.05), and avoidant coping (B = 0.06, p < 0.05) as mediators. |
| Lavanya, TP; Manjula  | 2017 | 419 | Explorative Study | Predominantly positive emotion regulation strategies were used by group 1 (positive refocusing, refocus on planning, and positive reappraisal, respectively). The sample as a whole used more positive strategies (positive refocusing: 82% and 64% and refocus on planning: 93% and 87% in groups 1 and 2, respectively). Significant correlations between emotion regulation strategies (CERQ) and psychological problems (YSR/YASR) were found, thereby indicating that negative emotion regulation strategies were associated with psychological problems and vice versa. Females were found to have more of anxiety problems as opposed to males with more of conduct problems. However with increase in age, increase in the percentage of psychological problems and usage of negative emotion regulation strategies was observed. |
| Siddarth David , Nobhojit Roy,Cecilia Stålsby Lundborg, Martin Gerdin Wärnberg ,Harris Solomon | 2021 | 21 Adult Patients | QualitativeStudy | study’s findings indicate that there are unmet health needs, acute financial burdens, types of social support, and various sociodemographic factors among trauma patients that affect their quality of life. |
| Evans , G.W. & Kim , P. | 2013 | 1400 | Quantitative and qualitative study  | This study highlighted that children from low socio economic background experience chronic stress due to poverty re;ated factors such as family instability and inadequate housing . this chronic stress affects their ability to self regulate and cope , leading to poorer academic courses .  |
| Masten , A.S., Tellegen  | 2012 |  | Longitudinal Study  | Findings suggests that how SES impacts resilience in children . it found that children from low SES families are more likely to experience trauma and face barriers to educational success , but protective factors like supportive teachers can mitigate some of these effects .  |

The reviewed studies collectively confirm that trauma significantly disrupts students’ ability to learn, form relationships, and manage emotions, consistent with existing literature. Moreover, this review sheds light on how inclusivity, family dynamics, and socio-economic challenges intersect to shape both trauma experiences and recovery pathways. These insights underscore the need for tailored interventions that address these diverse and interrelated factors, creating a nurturing environment that supports resilience and holistic development in all students .

**Trauma and Its Impact on Students**

Trauma significantly impacts students cognitive , emotional and social development , creating substantial barriers to academic success . Trauma, particularly during childhood, has a profound and multifaceted impact on students’ psychological, emotional, and academic development. The exposure to traumatic experiences such as neglect, abuse, or adverse life events disrupts cognitive functioning, emotional regulation, and social interactions, often resulting in long-term adverse outcomes in educational settings.

A study conducted among nursing students revealed that nearly two-thirds (65%) reported exposure to at least one type of childhood trauma (CT), with emotional neglect being the most prevalent form. Notably, more than half (58.2%) of the students experienced multiple forms of trauma, and 8.6% endured all five types. The study found an inverse relationship between CT and psychological resilience, highlighting how trauma erodes the ability to cope effectively with stress and adversity. Additionally, CT subscales showed a statistically significant negative correlation with psychological resilience, further emphasizing the critical need for interventions targeting emotional and psychological support in educational settings(Singha et al., 2024).

Similarly, research examining children in high-exposure trauma regions found that 30.6% had Post-Traumatic Stress Disorder (PTSD), while an additional 13.6% exhibited subsyndromal symptoms. The study noted a striking difference in PTSD prevalence between children in high-exposure (43.7%) and low-exposure areas (11.2%). Depression was strongly associated with PTSD, and factors such as higher exposure levels, lower educational attainment, and middle socioeconomic status emerged as significant predictors. However, contrary to expectations, variables such as perceived life threat, family death, or shelter stays did not significantly contribute to PTSD development. This suggests that the cumulative impact of trauma and broader socio-environmental factors play a critical role in shaping psychological outcomes, rather than isolated traumatic events (Kar et al., 2007) .

These findings underscore the urgency of integrating trauma-informed practices into educational systems. Programs designed with a dual focus on student and teacher well-being have shown strong acceptability and positive outcomes, particularly for their practical strategies and emphasis on fostering resilience. Such initiatives can bridge the gap between trauma exposure and academic achievement by creating a supportive environment that addresses the needs of both students and educators.

**Inclusivity In Trauma Informed Education**

Trauma-informed education emphasizes creating safe, supportive, and inclusive environments that cater to the diverse needs of students who have experienced trauma. Such approaches go beyond addressing academic challenges and aim to foster emotional healing and resilience for all students, regardless of their backgrounds or trauma histories.

 A Research showed that Recent program evaluations have highlighted the value of trauma-informed practices in inclusive education. Programs designed with trauma-informed principles garnered strong acceptability ratings and positive feedback from educators and stakeholders. These programs were particularly praised for their relevant content, practical strategies, and emphasis on the well-being of both teachers and students. The dual focus on empowering educators while addressing students’ psychological and emotional needs has been instrumental in promoting sustainable outcomes within school systems (Duggal et al., 2024) .

Findings further underscore the importance of integrating trauma-informed design (TID) principles to create environments that not only fulfill basic needs, such as safety and belonging, but also promote mental and emotional healing. Inclusive trauma-informed schools prioritize building strong relationships, fostering empathy, and implementing practices that ensure every student feels seen and supported. For example, strategies such as flexible teaching approaches, peer support systems, and access to mental health resources help reduce stigma and create equitable opportunities for learning (Justus & Raghani, 2024) .

By embedding trauma-informed principles into the fabric of education, schools can create inclusive spaces that nurture recovery and resilience for students from diverse backgrounds. This holistic approach benefits not only trauma-exposed students but also the broader school community, as it cultivates a culture of empathy, safety, and mutual respect .

**Parent Child Relationship in Trauma Recovery**

The parent-child relationship plays a pivotal role in trauma recovery, serving as a critical pathway for emotional regulation, resilience-building, and psychological healing. However, trauma can significantly disrupt this bond, impacting both parenting practices and the child’s recovery trajectory.

Research indicates that the alignment between parents’ and children’s perceptions of posttraumatic stress symptoms is often poor, as demonstrated by studies showing weak mother-child agreement on these symptoms. Factors such as the child’s age, gender, and living situation (e.g., residing in fishing villages versus family-based out-of-home care) did not positively influence this concordance. This finding highlights the complexities of understanding trauma through shared narratives and the need for individualized assessments in trauma recovery(Exenberger et al., 2019).

Another study revealed significant parent-child associations in the use of language during post - trauma narratives, particularly in the number of words, rate of cognitive processing words, and rate of anxiety-related words. However, no associations were found in expressions of anger or sadness (Alisic et al., 2015). These similarities and differences in parent and child narratives suggest that trauma recovery requires a nuanced approach that considers both shared and individual emotional experiences, further encouraging research into posttrauma communication dynamics (Meheli et al., 2021).

Additionally, findings show that parents with high trauma exposure, as indicated by an Adverse Childhood Experiences (ACE16 score ≥ 5), were significantly less likely to exhibit an authoritative parenting style, which is associated with optimal child development outcomes. High trauma exposure was also linked to lower scores in parenting dimensions related to regulation and autonomy, which are essential for fostering a supportive environment. These disruptions underscore how parental trauma histories can negatively influence caregiving practices and hinder the recovery process for children (Naik et al., 2024).

When combined, these results highlight how crucial a developmental perspective is to trauma healing and how important it is to evaluate and encourage each child's and parent's unique route. Parent-child relationships can be improved and holistic recovery can be encouraged by offering specific interventions, such as family-centered trauma-informed therapies and parent-focused training programs.

**Emotional Regulation and Coping Mechanism in Children**

Emotional regulation and coping mechanisms are pivotal in determining how children navigate and recover from trauma. These strategies not only influence psychological resilience but also shape mental health outcomes such as suicidal ideation, anxiety, and conduct problems.

Research highlights the significant role of social and familial contexts in emotional regulation and coping. Lifetime suicidal ideation was found to vary significantly based on living arrangements, with individuals in nuclear and joint families exhibiting lower rates compared to those living alone (p < 0.01, p < 0.05, respectively). Cognitive reappraisal emerged as a protective factor, predicting a reduction in suicidal ideation mediated by perceived social support (B = −0.06, p < 0.05) and avoidant coping (B = −0.07, p < 0.05). In contrast, expressive suppression increased levels of suicidal ideation, mediated through reduced perceived social support (B = 0.05, p < 0.05) and higher avoidant coping (B = 0.06, p < 0.05). These findings underscore the critical importance of fostering positive emotional regulation strategies and supportive social networks to mitigate adverse mental health outcomes (Gupta et al., 2024) .

Further evidence indicates that children tend to use more positive emotion regulation strategies such as positive refocusing, refocus on planning, and positive reappraisal, with significant correlations found between these strategies and fewer psychological problems. For example, positive refocusing was employed by 82% and 64% of individuals in two distinct groups, while refocusing on planning was used by 93% and 87%, respectively. Conversely, negative emotion regulation strategies were strongly associated with psychological problems, as evidenced by correlations between the CERQ (Cognitive Emotion Regulation Questionnaire) and psychological problem measures such as YSR/YASR.Gender and age differences were also observed, with females more likely to experience anxiety-related problems and males exhibiting higher rates of conduct-related issues. Additionally, as children age, a greater prevalence of psychological problems and increased reliance on negative emotion regulation strategies were noted, emphasizing the developmental dynamics in coping mechanisms (Lavanya & Manjula, 2017) .

**Impact of Socio- Economic Status in Trauma and Education**

Socioeconomic status (SES) is a significant determinant in the trajectory of trauma recovery and educational success. Children from low SES backgrounds are disproportionately exposed to stressors that exacerbate the impacts of trauma, thereby hindering their psychosocial development and academic progress.

One study involving 21 post-discharge trauma patients revealed that the mechanisms of trauma and its aftermath often intersect with SES-related factors. The participants, with a median age of 35, reported road traffic injuries as the most common mechanism of trauma, and those from low SES backgrounds faced added challenges during recovery. Chronic stressors like poverty, family instability, and inadequate housing were highlighted as pervasive issues, particularly for children, which significantly affected their ability to self-regulate and cope with adversities. These deficits in self-regulation were directly linked to poorer academic outcomes (David et al., 2022).

Research further underscores that children from low SES families are more likely to experience trauma and encounter systemic barriers to educational success. Chronic exposure to stressors such as financial instability, limited access to resources, and unsafe living conditions undermines their ability to focus on learning and excel academically. However, the presence of protective factors, such as supportive teachers and school environments, can mitigate some of these adverse effects, fostering resilience and promoting better outcomes ( Evans et. al. , 2013).Additionally, findings on resilience in low SES children highlight the complex interplay between trauma exposure and coping mechanisms. While these children are at heightened risk for emotional and behavioral challenges, structured interventions and positive school experiences can play a transformative role in reducing these risks. Schools that incorporate trauma-informed practices and prioritize mental health support can serve as stabilizing forces in the lives of children from disadvantaged socioeconomic backgrounds ( Masten & Tellegen , 2013).

**Future Implications**

This research underscores the critical importance of integrating trauma-informed practices into educational systems to promote psychosocial well-being and mental health readiness among students. Future efforts should focus on designing comprehensive frameworks that address the multifaceted impacts of trauma, particularly in children from low socioeconomic backgrounds. This includes developing teacher training programs to foster supportive and inclusive classrooms, incorporating emotional regulation and coping strategies into school curricula, and strengthening parent-child relationships through community-based interventions. Additionally, policies should emphasize equitable access to mental health resources and targeted support for at-risk populations to mitigate the adverse effects of trauma. Longitudinal studies exploring the long-term outcomes of trauma-informed educational practices are also essential to refine these interventions and evaluate their efficacy in diverse cultural and socio-economic settings (Duggal et al., 2024) . Ultimately, this research provides a foundation for advancing inclusive education models that prioritize resilience-building and foster the holistic development of all students, ensuring they are equipped to thrive both academically and emotionally.

**Limitations**

This research, while shedding light on the significance of trauma-informed practices in inclusive education, has certain limitations. As a narrative review, it relies on existing literature, which may introduce publication bias, as studies with significant findings are more likely to be included. The variability in methodologies, cultural contexts, and sample populations across the studies reviewed poses challenges in generalizing the findings. Additionally, marginalized groups, such as children with disabilities or those from diverse ethnic and socioeconomic backgrounds, may be underrepresented in the literature, limiting the scope of the conclusions. Many studies also rely on self-reported data, which can introduce biases related to subjective perceptions and recall errors. Furthermore, the short-term focus of several studies makes it difficult to assess the long-term outcomes of trauma-informed interventions. Addressing these limitations in future research, particularly through longitudinal designs, standardized methodologies, and more inclusive participant samples, will provide a deeper and more comprehensive understanding of the effectiveness of these practices.

**Conclusion**

This research underscores the critical importance of trauma-informed practices in inclusive education, emphasizing their potential to transform schools into safe, supportive environments for students affected by trauma. By addressing the multifaceted impacts of trauma—ranging from emotional regulation and coping mechanisms to the influence of socioeconomic status and parent-child relationships—this study highlights the need for a holistic approach to education. Trauma-informed practices not only promote healing and resilience but also enhance academic and social outcomes, contributing to the overall well-being of students.While limitations such as variability in study methodologies and the lack of long-term assessments exist, this research provides a strong foundation for future exploration and application. To maximize the impact, it is essential to focus on equitable access, culturally sensitive practices, and ongoing professional development for educators. Ultimately, integrating trauma-informed principles into educational systems holds the promise of creating inclusive spaces where all students can thrive, irrespective of their past experiences.

**Type of Manuscript**: Narrative Review

**Conflict of Interest**

I declare that I have no competing interests or conflicts of interest , financial or otherwise , related to this research paper and its findings.

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