

{ TIMBO }

Trauma Informed Mind Body Program Global Empowerment Projects

It is our intention to make this learning accessible to as many individuals across the globe as possible, by way of our 3 Phase TIMBo Training and Empowerment Projects. We know this is a possibility because the movement does not depend on a single organizational effort, but on the passion and sense of purpose that the TIMBo program, training and practice creates in the participants (as seen in Haiti, the US and Kenya).

Treat, Train, Retain. A task-shifting model

The TIMBo program encompasses many of the essential elements of a successful peer to peer program model (Solomon, 2014) such as experiential learning, mutual benefit to both leader and group member, natural use of social support, and leaders as inspirational mentors who have healed and been empowered. Peer support is an intervention that leverages shared experience to foster trust, decrease stigma and create a sustainable forum for seeking help and sharing information about support resources and positive coping strategies. Peer support provides benefits to the individual participant, peer supporter, health care provider community and surrounding community. One of the major benefits of integrating a peer support model of programming into an existing organization or service is the potential cost/benefit ratio. As previously described results of the TIMBo program naturally ripple exponentially through systems (organizational, community, family) in which the individuals are interacting at minimal or no additional cost to the system. This aligning with the peer support model coupled with the simplicity and effectiveness of TIMBo positions is as a perfect program for a task-shifting model.

The UK Department of International Development reports that in low or middle income countries up to four in five people fail to receive proper mental health services or care. For example, in Kenya there is one psychiatrist for every 500,000 people and one psychologist for every million. The development of mobile apps for smartphone solutions is ongoing and has promise of much greater accessibility but the natural use of social support as seen in the TIMBo program is a powerful eradicator of symptoms of traumatic stress and PTSD and is not easily replicated over "electronic interventions." The World Health Organization defines task shifting as "the rational redistribution of tasks among health workforce teams" adding, "specific tasks are moved, where appropriate, from highly qualified health workers to health workers with shorter training and fewer qualifications". TIMBo successfully merges task shifting and peer to peer programming—the simplicity of the program allows "health workers" to be replaced by community/group leaders, and the effectiveness of the program (showing statistically significant reductions in the symptoms of anxiety, PTSD and depression) make it suitable intervention for improved mental health and well being.

To help address the lack of access to interventions for improved mental health across the globe a treat, train, retain framework has been implemented in partnership with organizations that share yogaHOPE's believe that trauma survivors can become powerful healers and change makers in their communities. Partner organization also need solid existing programs and infrastructures in order to ensure sustainability in the retain stage of the model. yogaHOPE calls this model the 3 phase TIMBo Training and Empowerment Project.

3 phase TIMBo Training and Empowerment Project

The first phase, or treatment phase of the project will begins with a group of women involved in the partner organization. This group is a combination of clients and/or patients as well as staff to ensure sustainability of the program within the organization upon completion of project. Phase 1 participants will be selected based on a number of criteria including expressed interest in the program, demonstrated capacity to take leadership position in her community, and interest in women's health and empowerment. ***Phase 1 allows future leaders to experience the program and understand first hand the benefits of the TIMBo curriculum.*** This experiential understanding is a core component of successful peer support programming (Solomon, 2014) and will help establish a more mutual relationship between group leader and group participant (Covington & Bloom, 2006).

This delivery method of the TIMBo program will allow women to participate in the program with the option to continue training as a TIMBo leader.

Phase two or train phase is normally offered within three to six of the completion of phase one. In phase two a self selected group from the phase 1 TIMBo chooses to participate in a full TIMBo facilitator training. Upon the completion of the training, yogaHOPE and senior staff of the partner organization work to determine which participants show strong facilitation skills and name potential TIMBo facilitation teams. It is expected that a small percentage of trainees will be have the skills and confidence to serve as lead facilitators, and the remainder of the women will serve as co facilitators and assistants. Groups are supervised by either partner organization staff or yogaHOPE staff. Experience shows that with repeated experience of facilitating or assisting in the program, women gain confidence and work toward a leadership position in current and future groups.

Phase three, or retain phase, allows partner organization to begin taking ownership of and integrating the TIMBo program into their organization and programs. Program staff at partner organizations help with coordination and scheduling of groups—providing space, support and encouragement to new facilitators. Newly trained facilitators will have generated enthusiasm and excitement within their peer groups and group enrollment is more successful in this phase. During this phase the new TIMBo facilitation teams will receive ongoing support services from yogaHOPE in the form of on site observation visits and supplemental training as needed. Observations provide a needs assessment opportunity to inform how follow up support and booster trainings are offered. yogaHOPE research and evaluation team work closely with partner organization research and evaluation team to collect and compile data compose case studies.