

What Does It Mean to Be Trauma-Informed?

by Dr. Laura Quiros

- It is a practice that holds trauma at the center of how an individual or group session, classroom, meeting space and organization is structured and how people move through that structure, at every level. **While this practice is grounded in a good intention/healing ideology, missing is a critical analysis and integration of race and culture as a guiding principle of trauma-informed practice.**
- Becoming trauma-informed is an ongoing process, an ongoing lesson and a journey. Rather than claiming expertise, we develop it by sharing what we have learned from our individual and collective experiences and by inviting others to join us in developing a community that embodies equity-based, trauma-informed leadership and practice.
- It is the embodiment of social justice and the leaning into connection through use of self.

Putting A Trauma-Informed Approach Into Practice

There are several factors to consider for an environment to truly be a healing space of non-revictimization.

1. Who and how we define trauma is central to how trauma is understood and operationalized in theory and practice.
2. The social location and the training of the practitioner, leader and educator is a crucial factor in the attempts to create trauma-informed systems of care and avoid re-traumatization.
3. The extent to which students, educators, practitioners and leaders were—and still are—socialized and educated in a white supremacy framework lays the foundation for how trauma-specific concepts are defined, understood and operationalized.

Unless there is an active attempt to deconstruct and positively disrupt normalized ways of knowing and being, ways that are only grounded in a white ideology, educators and leaders in the trauma field may remain oblivious to skewed definitions, exclusionary actions and unintentionally re-traumatize the very staff/students/ colleagues/clients we aim to help.

Tenets of Trauma-Informed Practice (Adapted from Proffitt, 2010 and R. Abramovitz, 2020)

- **Safety:** Ensuring physical, emotional, spiritual safety; “do no harm.” This means not “claiming” a space to be safe but actively working in collaboration to make it safe. Building safety requires the naming of the connection between intergenerational and systemic trauma and individual well-being.
- **Trust/Trustworthiness:** Maximizing trustworthiness and transparency, making tasks clear, maintaining appropriate boundaries. Understanding that building trust takes times and is very much based on identity and positionality in context.
- **Choice:** Prioritizing choice and decision-making; supporting participants’ control over their own healing journey. Honoring the diversity of healing practices. Offering and inviting choice.
- **Collaboration:** Maximizing collaboration and sharing power. Equity- and inclusion-based approaches and interventions. Inclusion is practiced and honored in decision making.
- **Empowerment and Voice:** Identifying strengths, prioritizing building skills and a community that promote survivor/organizational healing and growth. Everyone has a value to add and every voice should have the opportunity to be heard.