

The theories about trauma-informed approaches have emerged over the past 30 years, prompted by the aftermath of the Vietnam War. Increased understanding of Post-Traumatic Stress Disorder (PTSD) and of the effects of war on veterans have, over time, contributed to a heightened awareness of similar impacts of trauma on survivors of interpersonal violence. The victim/survivor advocacy communities have since then begun to examine, develop, and use practices related to trauma-informed care.

In spite of the growing trend across the sexual assault, domestic violence, stalking, and dating violence fields to adopt trauma-informed care frameworks, there remains general curiosity about several aspects of the trauma-informed concept: Is it a fit for advocacy services? Is it fully understood? Is it being adopted broadly by advocates working with survivors of interpersonal violence? Might it be in conflict with founding principles of the advocacy movements? Does it present other obstacles or benefits?

In response to these unknowns, this cooperative project was designed by the Minnesota Coalition Against Sexual Assault (MNCASA) and the Office on Violence Against Women (OVW) to gather data and experiences to assess how the trauma-informed concept is understood and practiced within the sexual assault, domestic violence, stalking, and dating violence fields. Multiple methods were used to gather the necessary data including interviews, a roundtable discussion, affinity calls, webinars, and others. A comprehensive literature review provided the basis for the project direction. More than 150 survivors, practitioners, and content experts representing a diversity of experience and opinion participated in project methods.

## Summary of Findings

There is general agreement that the concept of trauma-informed services is a model that, in principle, is consistent with excellent advocacy practices and support services that are survivor-driven, provide equitable access, and attend to practices that decrease the likelihood of re-traumatization. There are critical aspects of the concept, however, that require ongoing attention in order to ensure that the implementation of trauma-informed services reflects the goals of providing safety and accountability to survivors and challenges the systems of oppression from which violence emerges.

*First, consensus must be reached on how the fields of interpersonal violence define and understand the terms “trauma” and “trauma-informed.”* These fields are seeking a definition of trauma that acknowledges not only the individual experience but also the impact of generational, historical and community trauma on survivors. The definition must also acknowledge that the signs of trauma are, in fact, a normal reaction to a life-altering event or pattern of events rather than signs of a mental disorder. The distinction between trauma-informed and trauma-specific services is likewise unclear for many, and yet clarifying that distinction is important. *Trauma-specific* approaches involve particular practices or treatment protocols to address the trauma experienced by individuals, families, and communities. In contrast, the focus of *trauma-informed* approaches is on creating an environment that acknowledges the impact of trauma and works to create a sense of safety, trustworthiness, and empowerment. Most advocacy organizations are focused on developing *trauma-informed* environments and practices. Even so, while most interpret the trauma-informed framework to be exclusively about how services for survivors are designed, there is less clarity about how to apply trauma-informed principles to the partnerships among the practitioner, survivor, organization and the larger community.

*Second, there is consensus that implementation of trauma-informed practices in the fields to date is uneven and inconsistent.* The challenges with implementation are varied. Programs may not understand how to implement trauma-informed practices or may call themselves “trauma-informed” without fully understanding or committing to the definitions, principles, or practices. Agencies may be missing internal policy and procedure changes that are indicators of the necessary agency-wide shift. Moreover, implementation in a community-based program can be challenging when the external partners and systems are not practicing trauma-informed approaches. Some participants raised the issue that mandated reporting laws and the criminal legal system are inherently adversarial and not easily adaptive to the needs of a trauma survivor. Another challenge is that culturally-specific practices may be thwarted because they may be outside of funders’ guidelines and not viewed as evidence-based practices. Regarding the neurobiology of trauma, many organizations have benefitted from using this information to help their staff and community responders understand the impact of trauma on survivors, and subsequently develop practices that are less likely to be re-traumatizing.

*Third, differences in ideological and theoretical frameworks that cannot be easily bridged are frequently cited as challenges to embracing the trauma-informed concept.* Some practitioners voiced concern that the trauma-informed approach may shift the focus away from social oppression models as a root cause of violence against women, a historical commitment of the anti-violence fields. The role of advocates as agents of social change is a critical element that some argue is missing from the trauma-informed frame. Also, the trauma framework comes from the field of psychology giving rise to some concern that the approach will pathologize survivors rather than assist in creating safe avenues to healing. The overarching danger therein is the fear that survivors may suffer consequences in child custody determinations if they are perceived to have a mental disorder rather than to be experiencing a normal reaction to traumatic events.

*Finally, there is concern that organizations may adopt the trauma-informed concept without fully committing to the continuous learning and evaluation necessary for effective implementation.* Organizations must be constantly reflecting on their adherence to trauma-informed principles, evaluation of survivor experiences, and adaptation of policy and procedure at all levels of the agency. Leadership, staff, community partners and survivors should all have input into these practices. This reflective practice must include ensuring that the organization is equitably accessible to *all* survivors in the community. Operationally sound trauma-informed services have the promise of erasing the service gap that underserved communities experience. As such, resources must be allocated to ensure that the implementation remains consistent with the spirit of the trauma-informed concept.

These challenges are not too large to overcome. Definitions can be drafted that incorporate currently missing language. More in-depth dialog about adapting and implementing a trauma-informed approach can be offered. Trainings that skim the surface and shortcut the nature of this work are counterproductive and should be discouraged or eliminated. Resources to support organizations that commit to providing trauma-informed services should be available to help defray the costs of ongoing monitoring, evaluation, and implementation. Trauma-informed approaches must be routinely described in ways that include not only survivors’ experiences but also the socio-political context of survivors’ lives and the necessary collaboration between the survivor, the organization, and the larger community. Finally, it must be clear that the trauma-informed concept is exclusively a description of services or approaches that are provided in a way that is equitable, welcoming, and physically and emotionally safe for survivors rather than a means to pathologize or label a survivor’s normal responses to trauma.

With care, these clarifications can be made to the trauma-informed concept and ensure a model that enhances the work of those responding to interpersonal violence in their communities. Experts in the fields of interpersonal violence are available to assist with various aspects of refining the concept. Diverse voices of those with experience in both trauma-informed approaches and survivor-centered advocacy are invaluable in the ongoing conversation.

*This project is supported by Grant No. 2013-TA-AX-K024 awarded by the Office on Violence Against Women, U.S. Department of Justice (OVW). The opinions, findings, conclusions, and recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect the views of the OVW or SVJI@MNCASA.*