

# TRAUMA-INFORMED PRACTICE

## What it is, why it matters, and how to apply it in your work

### 1. Understanding Trauma

The phrase “trauma-informed care” was first introduced by Dr. Sandra Bloom and colleagues in the early 2000s, building on work by the Substance Abuse and Mental Health Services Administration (SAMHSA) in the United States. It describes an approach that recognises the widespread impact of trauma and actively works to avoid re-traumatisation.

Trauma affects how people think, feel, and respond. It can shape trust, decision-making, and emotional regulation.

It's not “*What's wrong with them?*” — it's “*What happened to them?*”

#### Find out more:

- SAMHSA's Six Principles of Trauma-Informed Care: [www.samhsa.gov/trauma-violence-types](http://www.samhsa.gov/trauma-violence-types)
- Dr Sandra Bloom's Creating Sanctuary (book and model resources)

### 2. Why It Matters

- Trauma can be hidden behind anger, silence, compliance, or withdrawal.
- Without safety and trust, survivors can't engage, disclose, or recover.
- Trauma-informed responses protect both the client and the professional.
- Recognising trauma doesn't mean excusing harm — it means understanding context.

### 3. Core Principles

- **Safety** – Create emotional and physical safety in every interaction.
- **Trust** – Be consistent, transparent, and reliable.
- **Empowerment** – Build on strengths, not deficits.
- **Collaboration** – Share power and work alongside, not above.
- **Cultural humility** – Recognise difference and avoid assumptions.
- **Sustainable practice:** Compassion and boundaries are not opposites — they sustain each other.

### 4. How Trauma Can Show Up

Trauma can manifest as withdrawal, avoidance, hostility, over-compliance, or high distress. These are often protective strategies, not personal attacks.

Stay compassionate — but also maintain your boundaries and safety.

### 5. In Practice

Non-Trauma-Informed Response	Trauma-Informed Response
You're overreacting — calm down.	I can see this feels overwhelming. Let's pause for a moment.
You need to follow the process.	I'll explain what happens next and what choices you have.
You're being difficult.	Something about this feels hard — can you tell me what's worrying you?
We don't have time for this now.	I want to make sure you're okay. Let's arrange a time to come back to this safely.

### 6. Applying It Day to Day

- Use calm tone and open body language.
- Ask before moving closer or initiating physical contact.
- Explain what's happening and why.
- Offer choice wherever possible.
- Recognise your own triggers; seek support or debriefs.



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