

Trauma-Informed Service Delivery:

Strategies and Actions for Working with Individuals

A trauma-informed approach to service delivery is rooted in two primary areas:

1. **Creating a safe and supportive environment**
2. **Fostering trusting and meaningful relationships**

In this resource, we have included specific strategies and examples of what you can do and say to effectively deliver trauma-informed services.

10 Strategies for Trauma-Informed Service Delivery

01 Ensure that your physical space feels safe and inviting	02 Prepare for meetings	03 Set clear expectations & continuously check-in about them
04 Focus on “What happened to you?” rather than “What’s wrong with you?”	05 Actively listen	06 Demonstrate empathy
07 Take a strengths-based approach to conversations and/or problem solving	08 Focus on partnership and minimize any power differential (real or perceived)	09 Offer predictability – be reliable and consistent
10 Be mindful about closing the case or relationship		

Strategy 1: Ensure that your physical space feels safe and inviting

What you can do	What you can say
Greet people in the waiting area, even if they're not there to meet with you.	"Welcome. Have you been helped?"
Ensure decorations, brochures, and other materials are culturally responsive and available in the language(s) spoken by program participants. Make sure flyers and brochures are written in plain English, remember that most U.S. adults (54%) have reading comprehension level at or below 6th grade.	"Our materials are available in 10 languages and are located in the reception area."
When updating flyers or written materials, check-in with participants about the language they use and consider including that language in your communication standards	"Would you like us to go over the program expectations together? Please let me know if anything is unclear."
Make sure your meeting space is well lit, calm, and comfortable. Ensure that the basics are available such as water, tissues, adequate seating, coloring books for kids, etc.	"Feel free to take a seat. Can I get you anything before we get started?"
Whenever possible, move to a private space and/or use a white noise machine to conduct sensitive conversations.	"I want to respect your privacy. Let's move into the small conference room for this conversation."

Strategy 2: Prepare for meetings

What you can do	What you can say
Before meeting with a participant or family, familiarize yourself with the case, name(s), pronoun(s), and the reason for their visit.	"Hello Andrea. It's nice to meet you. Thank you for coming in today to talk about..."
Prepare the participant for the intake process (or meeting) - what types of questions you will be asking, why you will be asking certain questions, etc.	"I have have some personal questions I need to ask, in order to figure out what services and supports will be most beneficial to you. If you feel uncomfortable with any of the questions, you can simply say 'pass.'"
Make sure participants know what to expect when they arrive at your office (e.g., where to go, who to ask for, what childcare and/or activities are available, etc.).	"When you arrive, please take the elevator to the 3rd floor. Walk through the glass doors and check in with the receptionist. We have trained childcare providers so feel free to drop Cody off in the Children's Room to the left of reception while we discuss your case."
Make sure participants know what to bring to an appointment at your office (e.g., photo ID, court orders, bank statements, bills, etc.).	"Please remember to bring your passport and a document proving residency, such as a utility bill or bank statement dated within the past 60 days."
For external meetings or referrals (i.e., intake sessions, court appearances, etc.), let the participant know what to expect including documents needed, space layout, security, and translation/interpretation options.	"When you arrive at The Center, you'll need to show a form of ID. There will be a metal detector. Ask to meet with Cynthia on the 3rd floor. There may be police officers in uniform in the waiting area. Cynthia will call an interpreter for you. Do you have questions about any of this?"

Strategy 3: Set clear expectations and continuously check-in about them

What you can do	What you can say
Be clear about the scope of your role. Before asking personal questions, outline the goals of the conversation and explain why you will be asking such questions and what the information you gather will be used for. Only ask what you really need to know (i.e., avoid unnecessary retelling of trauma histories).	<ul style="list-style-type: none"> "I'm an economic empowerment specialist. I'm able to assist you with exploring educational, training and employment opportunities. The information you provide will help us determine together which programs might be a good fit." "I am not an attorney. I am a paralegal. I will not be giving you legal advice, but the information you share with me will help me support you in drafting your family offense petition." "I'm a mandated reporter. This means..."
Discuss who the participant will talk to, what services they will receive, and when.	"Maria Mecenaz will call you within the next 2 weeks to schedule your placement exam."
Be clear about what you expect from the participant.	"In order to receive the certificate, you would need to arrive by 9:15 each session and attend 6 out of 8 sessions. Please let me know if you can't make a session or if you will be arriving late."
Determine the best time of day and method of communication (phone, text, email) to reach the participant.	"What is the best way and the best time to reach you? Is this a safe number to call, text and/or leave voicemail messages?"
Make sure the participant knows who their contact person will be and how and when they can be reached.	"Your contact person moving forward will be Mary González. You can reach her at ext. 689. She's in the office Mon. and Tues., 12:00-5:00."

Strategy 4: Focus on "What happened to you" rather than "What's wrong with you?"

What you can do	What you can say
Ask more open-ended questions and listen to the answers. Start questions with "what" or "how" rather than "why".	Instead of "Why didn't you come in sooner?" ask "What would help you feel safe now?"
Keep in mind the participant's trauma history. If you notice that a participant has been "triggered" or is feeling "flooded" (i.e., starts speaking loudly, shakes their leg, shuts down, starts to tell things out of order, etc.) try to de-escalate the situation. You might speak in a softer voice, sit down, offer choices, or shift to another topic of conversation.	<ul style="list-style-type: none"> "Why don't we take a break for a bit?" "I can see that this is upsetting you. Let's shift gears and talk about your upcoming graduation instead. We can always come back to our original conversation."
Help the participant to identify coping strategies and emotional management skills, where appropriate.	"I understand that this is difficult to talk about. You're safe right now and I'm here to support you. Let's take a few deep breaths together to recalibrate."

Strategy 5: Actively listen

What you can do	What you can say
Leave time for the participant to respond, even if there is some silence.	Ask questions like "Can you tell me more about that?" or "What happened next?"
Repeat or summarize what the participant shares. Demonstrate that you have heard the content, feeling and meaning of the experience.	"I'm hearing you say..." Note: mirror the language used by the individual (e.g., victim vs. survivor).
Turn your phone face-down on the table or leave it outside of the meeting area.	"I need to keep my phone nearby in case of an emergency, but I'm going to put it face-down over here so that I can focus on our conversation."
Be mindful of your facial expressions, body language, and reactions to what is being shared with you both in-person or virtually. Avoid crossed arms, looking away, doodling, etc.	"I'm going to be taking some notes so if I'm looking down during our conversation, please know that I am listening and writing."
Make sure the participant feels the interaction was valuable/helpful, that their concerns were met and their questions were answered.	<ul style="list-style-type: none"> • "Do you feel that I understood your concerns?" • "Do you have any additional questions?" • "Did we cover everything you wanted to discuss?"

Strategy 6: Demonstrate empathy

What you can do	What you can say
Normalize and validate the individual's reaction to, or feelings about, difficult experiences.	<ul style="list-style-type: none"> • "I'm sorry that happened to you. It sounds extremely upsetting". • "I can't begin to imagine what that was like for you. I can understand why it might be difficult to talk about it." • "No one should have to face such upsetting and scary situations." • "Everything you're feeling is valid." • "Your reactions are totally understandable given the situation."
Help minimize self-blame or self-doubt by avoiding judgmental statements or phrasing.	Instead of "Why did you wait so long to report this?," try "Tell me about your decision to report this now?" or "Did something happen to lead you to call now?"
Avoid silver-lining the situation. Resist the urge to respond to difficult conversations with a statement that starts with "At least...".	Instead, say "I don't really know what to say right now. Thank you for telling me."
Use people- first language.	Say "person with a history of substance use" instead of "addict" or "individual with justice system involvement" instead of "offender."

Strategy 7: Take a strengths-based approach to conversations and/or problem solving

What you can do	What you can say
Let the participant know that you believe in them and support their efforts to heal. Discuss what is working well and how they/we may be able to expand upon those actions.	"I know that you might feel overwhelmed by what you have had to deal with. I think it's important to point out that even though you were having a difficult time, you were able to keep up with your supervised visits. That says a lot about your commitment to being present for your children."
Guide the participant towards recognizing and using their strengths.	"What are some strengths that you have that have helped you in your life?" (e.g., smarts, social skills, talents, sense of humor, optimism)
Deliberately point out actions and characteristics that are positive, unique, or valuable.	"I'm so happy that you showed up for the afterschool program this week - that shows great dedication and commitment."
Explore ways the participant has been able to build coping skills throughout their life.	<ul style="list-style-type: none"> • "Who are the people you have turned to that have helped you in your life?" • "What are some activities or practices that have helped you heal in the past?"

Strategy 8: Focus on partnership and minimize any power differential (real or perceived)

What you can do	What you can say
Pay attention to positioning and setting (e.g., avoid having multiple staff members on one side of the table and participants on the other; explain who is in the room, who will be taking notes and why).	"This is my colleague, Jose. He's a licensed social worker and has years of experience with individuals on the autism spectrum. He is here today to introduce some specific techniques we may want to use in our future sessions."
Strive to be culturally sensitive and informed. Be open to learning, asking about and understanding what trauma and healing mean to the participant within their cultural context.	"Tell me, what is your understanding of the word trauma? Is it a word that you feel comfortable applying to your situation?"
Ask for permission.	<ul style="list-style-type: none"> • "I want to understand. Could you tell me more about that?" • "Would it be ok if I share what we discussed with your case manager?"

Strategy 8: Focus on partnership and minimize any power differential (real or perceived)

Approach discussions about trauma as an INVITATION. Respect the participant's decision to address trauma at their own pace and in their own way. Make sure the participant is comfortable with the conversation and knows they do not need to answer questions and/or go into detail.	"Take your time. The decision about when to talk about it is up to you."
When discussing sensitive information (e.g., disclosure of traumatic events), check in with the participant to make sure the discussion of trauma feels safe and not overwhelming.	"We can stop at any point."
Promote autonomy. Show the participant where/how they have control, no matter how minor it might seem.	<ul style="list-style-type: none"> • "It's ok if you're not ready to talk. What is the best way I can support you right now?" • "Would you like me to schedule you for..."
Make time for questions and concerns that the participant may have.	"Do you have questions about any of the items we've discussed so far?"

Strategy 9: Offer predictability - be reliable and consistent

What you can do	What you can say
Keep appointments and give reasonable notice when an appointment must be changed.	"I apologize. We have an emergency staff meeting that conflicts with our appointment on Wednesday. Do you have any availability to reschedule later this week? If not, what day(s) work best for you?"
Follow through on everything you say you'll do, even if that means calling the participant to tell them that nothing has changed yet.	"Hi Sam, I just wanted to call to let you know we're still waiting to hear back about your voucher approval. I'll give you another call next week to let you know if anything has changed."
Talk through changes (i.e., going on vacation, updated timelines, changes in staff contact, closing out cases, changes in service times, etc.).	"Hi, I wanted to let you know that I'll be out of the office for 2 weeks starting July 1. If you need anything during that time, you can reach Cynthia at extension 342."

Strategy 10: Be mindful about closing the case or relationship

What you can do	What you can say
<p>If you need to pass a case off to another staff member, make sure to inform the participant as early as possible about the change and what they can expect as next steps.</p>	<p>"I'll be out on parental leave starting Monday and won't be back until September. Your contact person moving forward will be Mary González. You can reach her at extension 689. She's in the office Mondays and Tuesdays from 12:00-5:00. She will give you a call next week to follow up on your case."</p>
<p>Give your colleague a warm hand-off, scheduling a meeting, if possible.</p>	<p>Mary, my client is a 68 year-old immigrant man from Barbados, he has 3 adult daughters who live out of state. He likes to go to his local senior center for bingo on Wednesdays"</p>
<p>Let the participant know when you are "closing the case" and what that means. Make sure they know what to do if something new comes up (e.g., should they call you directly or call the Helpline and open a new case).</p>	<p>"Now that you've received your certificate of naturalization, I'm going to close this case. However, please know that there is ongoing training, support, and resources available at our main office at 40 Broad Street."</p>

