# SAMHSA's Six Key Principles of a Trauma-Informed Approach

A trauma-informed approach reflects adherence to key principles rather than a prescribed set of practices or procedures.  These principles may be generalizable across multiple types of settings, although terminology and application may be setting- or sector-specific.

From SAMHSA's perspective, it is critical to promote the linkage to recovery and resilience for those individuals and families impacted by trauma.   Consistent with SAMHSA's definition of recovery, services and supports that are trauma-informed build on the best evidence available and consumer and family engagement, empowerment, and collaboration.

The six key principles fundamental to a trauma-informed approach include: [24,36]

1. *Safety*: Throughout the organization, staff and the people they serve, whether children or adults, feel physically and psychologically safe; the physical setting is safe and interpersonal interactions promote a sense of safety.  Understanding safety as defined by those served is a high priority.

2. *Trustworthiness and Transparency:*  Organizational operations and decisions are conducted with transparency with the goal of building and maintaining trust with clients and family members, and among staff, and others involved in the organization.

3. *Peer Support:* Peer support and mutual self-help are key vehicles for establishing safety and hope, building trust, enhancing collaboration, and utilizing their stories and lived experience to promote recovery and healing. The term "Peers" refers to individuals with lived experiences of trauma, or in the case of children this may be family members of children who have experienced traumatic events and are key caregivers in their recovery. Peers have also been referred to as "trauma survivors."

4. *Collaboration and mutuality*: Importance is placed on partnering and the leveling of power differences between staff and clients and among organizational staff from clerical and housekeeping personnel, to professional staff to administrators, demonstrating that healing happens in relationships and in the meaningful sharing of power and decision-making. The organization recognizes that everyone has a role to play in a trauma-informed approach.  As one expert stated: "one does not have to be a therapist to be therapeutic"[12]

5. *Empowerment, Voice and Choice*:  Throughout the organization and among the clients served, individuals' strengths and experiences are recognized and built upon. The organization fosters a belief in the primacy of the people served, in resilience, and in the ability of individuals, organizations, and communities to heal and promote recovery from trauma.  The organization understands that the experience of trauma may be a unifying aspect in the lives of those who run the organization, who provide the services, and/ or who come to the organization for assistance and support.  As such, operations, workforce development and services are organized to foster empowerment for staff and

clients alike. Organizations understand the importance of power differentials and ways in which clients, historically, have been diminished in voice and choice and are often recipients of coercive treatment.  Clients are supported in shared decision-making, choice, and goal setting to determine the plan of action they need to heal and move forward. They are supported in cultivating self-advocacy skills. Staff is facilitators of recovery rather than controllers of recovery[i].

6. ***Cultural, Historical, and Gender Issues:***  The organization actively moves past cultural stereotypes and biases (e.g. based on race, ethnicity, sexual orientation, age, religion, gender-identity, geography, etc.); offers, either directly or through referral, access to gender responsive services; leverages the healing value of traditional cultural connections; incorporates policies, protocols, and processes that are responsive to the racial, ethnic and cultural needs of individuals served; and recognizes and addresses historical trauma.

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[i] Brave Heart, M.Y.H., Chase, J., Elkings, J., & Altschul, D.B. (2011). Historical trauma among indigenous peoples