

FIVE MAJOR PRINCIPLES OF TRAUMA-INFORMED PRACTICE – by Cathy Malchiodi, PhD

For a more complete description, see *Trauma and Expressive Arts Therapy: Brain, Body, and Imagination in the Healing Process* (Guilford Publications, 2020)

Based on current definitions and information on trauma-informed practice (NCTIC, 2019; SAMSHA, 2019), the following five principles are essential when designing intervention and programming for children, adults, families, and groups. They are presented here as a foundation for understanding and implementing the interventions and approaches presented throughout the rest of this book.

- 1. Trauma is part of many disorders and challenges for people of all ages.***
- 2. Trauma is not just a psychological experience; it is a mind–body experience.***
- 3. Symptoms and trauma reactions are reframed as adaptive coping necessary to survive, not a pathology.***
- 4. The individual, family, group, or community is empowered to collaborate in therapy, and intervention reflects cultural preferences and worldviews.***
- 5. The individual, family, group, or community is viewed as having the potential not only to survive, but also to thrive.***

Finally, trauma-informed practice asks helping professionals to be knowledgeable about the various definitions and types of traumatic experiences children, adults, families, and groups bring to treatment settings. These include but are not limited to an understanding of what constitutes acute trauma, chronic or complex trauma, and post-traumatic stress. In particular, most trauma-informed practitioners consider individuals' experiences within the context of exposure to distress over the lifespan. The ACE study, developmental trauma (van der Kolk, 2005), and intergenerational and historical trauma are three of the current concepts related to trauma histories.