

# FROM THEORY TO ACTION: Exploring Process for Trauma-Informed Approaches in Design

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Thesis Submitted in Partial Fulfillment of the Requirements of the Degree of Master of Design in Integrative Design

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
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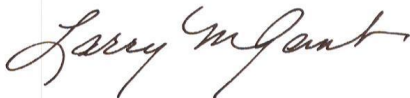
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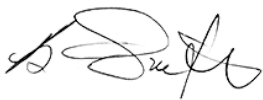
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UNIVERSITY OF MICHIGAN

Date Degree Conferred: April 28, 2022



MAKING JUSTICE

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# Acknowledgements

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# Abstract

Designers are increasingly using their unique skills and tools to find innovative solutions to the wicked social problems our day. Through design processes, we aim to make much-needed systemic changes by engaging the very communities that have experienced harm. While we want to make positive social change, but design education and continuing education must teach designers to address the social and emotional needs of design research participants and collaborators. The emerging conversation around trauma-informed design aims to give designers more tools to support a nonextractive approach to co-design in social impact settings.

Social designers are already laying a strong foundation for trauma-informed design practices as they inform other practitioners about how trauma impacts design work and how to become a more informed and inclusive designer. However, there are few case studies to reference when designers begin the process of becoming trauma-informed. Through collaborative work with Convergence Design Lab in Chicago, IL this work aims to fill this gap. During an eight-month process, I worked closely with these social designers to explore the use of new tools that combined strategies from design and social work. After three research phases that included observation, collaborative trauma-informed interviewing, and three design workshops, I observed the potential of trauma-informed approaches to design practice. While this case study shows that trauma-informed design has strong potential to inform and improve upon the practices of social designers, it also displays the challenges of this multidisciplinary effort and offers recommendations for future work.

# Keywords

Social design, co-design, Human-Centered Design, trauma, trauma-informed, trauma-informed design practice, multidisciplinary, social work, design praxis, case study, collaboration

Proposed Next Steps  
(based on team discussion)

Reflect on your use of the 4 Principles of a Trauma Informed Approach in your project or for CDL in the table to reflect on your practice. Examples can include points like strengths in your practice of these principles, places where you think address requirements required a client's/participant's behavior, and examples of where you think you are strongest or in the most need of growth. The **most principles** will be covered here.

Safety	Transparency & Transparency	Peer Support
Collaboration & Mutual Aid	Engagement, Voice, & Choice	Cultural, Historical, & Identity Issues

David Miller, 2022

Expanded -

Confusing -  
w/out more  
knowledge  
& principles

Edit -  
~~make~~ align  
with CDL  
terms

Terms  
- Community  
practice  
- Other term  
= co...

Trauma Informed Design Practice  
**Case Review**

Team Guide and Notes  
For discussion to help use together during writing.  
Share with presenter after notes are complete.

Provide the presenter with feedback about the 4 Principles of a Trauma Informed Approach. Feedback can be used to help them improve writing, allow them to be informed or reflect on their own practice, and encourage to be their own voice. Not every principle will be covered here.

Safety	Transparency & Transparency	Peer Support
Collaboration & Mutual Aid	Engagement, Voice, & Choice	Cultural, Historical, & Identity Issues

General Feedback for Presenter  
(notes from meeting)

# PREFACE

## Context

For too long US culture has minimized the impact of experience, memory, and emotion on our lives. We ignore uncomfortable truths about what has happened and what we have done in the hope that the impact will never come to pass. Unfortunately, we know that this is not reality – not for our national identity nor our individual ways of being. The ways in which our experiences stay with us as deep memories fundamentally shape how we see and interact with the world.



None of us would be who we are without the good or the bad experiences in our lives. That being said, the deep injuries of the past have come calling through a series of compounding crises. The impact of the chronic stress and trauma caused by COVID-19, political unrest, a coup attempt, race-based violence resulting in nationwide protest, and the global threat of war will reverberate into the future for generations. We are entering a time of collective global trauma and healing where we will endure hardships, but also incredible resilience. Now is the time to engage with others intentionally, empathetically, and with kindness while holding true to our values. We should approach inevitable conflict and repair with healing in mind, but have the strength to know our boundaries.

The following work about trauma-informed practices lives within this context and cannot be separated from the many systemic and individual traumas that we face and which our communities face. Looking still more broadly at the context, we must also understand the great resilience that people and communities have proven to have over the course of generations. We may be shaped by what happens in our lives, we are not defined by it. This work hopes to address the growing conversation around trauma-informed practices in nonclinical settings while understanding that practitioners must always focus on strengths and with humility that there are – and always have been – multiple ways to become an effective, engaging, and generous practitioner.

## **Motivation and Bias**

I am both a Social Worker and a Designer, two fields that are fields that are intrinsically linked through aligning goals and complementary skills. Adding the Designer role into my skill set after many years as a Social Worker and frontline practitioner in social impact programming, gives me an admittedly specific approach to design. Social work is a practice-based field that generally teaches skills in tandem with social theory. Social work education employs community-based fieldwork as part of the experience while simultaneously teaching overarching social theories and evidence-based clinical practices. While there are many pathways from social work education, the foundation of social work is practice based on theory. In other

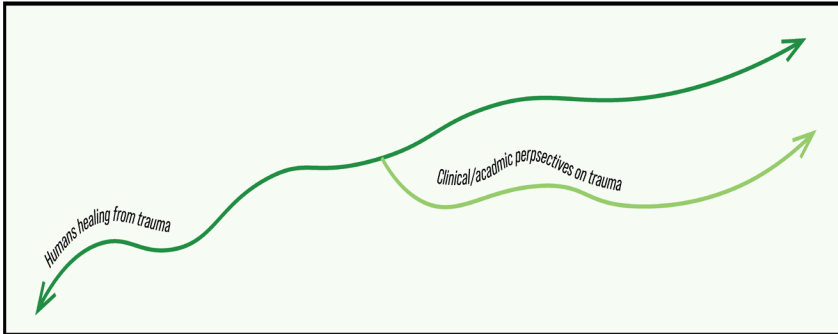
words, praxis is essentially a naturally occurring process in social work education. This was my foundation in joining the field of design and I see the frontline work of social impact as a necessarily practice-oriented endeavor regardless of training or background. The same can be said for socially engaged design.

My personal social work practice has always included some elements of micro practice in which I worked directly with clients and macro practice where I developed services and programs. I chose to pursue design because of the similarities of scope and approach. Design with social impact aims similarly impacts people directly and on a more systemic level, but the element of design that I became focused on was the process. While engaging with communities, what are the practices that social impact designers employ to ensure that the engagement process is not only in service of the outcome, but supportive of the community itself? The more I learned about design methodologies, the more questions I had about the process of engagement. Therefore, I chose to spend my time and opportunity to expand my understanding of engagement through design and to offer insights from multiple disciplines on how to have more ethical and impactful practices.

Additionally, my identity as a white, cisgender female influences my perspectives on this work and requires a deep look into the biases that I may hold. The work of becoming trauma-informed must also recognize that my involvement in the work has historical precedents that are both important and potentially harmful. My reflective practice around my many identities includes ongoing assessment of professional and personal interactions with groups and individuals. At times this is largely solitary work, but I have also participated in formal and informal discussion groups to help move the work forward and be held accountable for my action and advocacy. The present work hopes to be a contribution to the work of healing in community, at work, and within larger social systems.

# Foundations of Healing Work

As will be discussed throughout this writing, the multidisciplinary principles that form the basis of my work are derived from research and practice approaches in the mainstream academic and clinical conversation about mental health treatment and organizational functioning. The purpose of this – for better or worse – is to make specific connections between mental health fields and design. However, it is important to acknowledge the breadth of work that is done in nonclinical settings, community-based organizations, cultural contexts, and spiritual spaces. People and communities were successfully healing from generational trauma long before the clinical and academic perspectives were developed.



While the specificities of nonclinical and nonacademic perspectives are not the focus of this work, they are certainly not separate. Healing from trauma, resilience, and the fortitude of the communities is an integral part of humanity, but especially in communities that have faced significant trauma over generations. In the United States, Black and Brown communities as well as Indigenous people – to broadly name a few – have faced systemic and state-sponsored violence and marginalization. There are also global acts of genocide and violence that have impacted communities in the United States and elsewhere that continue to impact current generations of people. While these traumas are present, it is equally important to highlight the resilience of communities throughout the US and the world that often developed not as a result of clinical treatment but out of community, spiritual, and cultural strengths.

Designers and anyone working to support communities or amplify marginalized voices must understand the presence of this resilience and healing even if the details are not revealed. In these spaces, practitioners must always start with strengths before all else. Designers in social impact work must also remember that they are not coming in at the beginning of the healing, restructuring, or redevelopment work. Because of this, we must also remember that context and experience have a huge impact on how we are perceived in any given situation. That said, we should not expect immediate acceptance without earned respect. Finally, a common phrase said within the field of social work is “Start where they are.” This means that we can’t force change or participation, but rather we must integrate our mutual goals and be flexible in our aims to encourage more effective collaboration and co-design.



# INTRODUCTION

## The Problem

Social design – defined here as the application of design methodologies to address, change, or dismantle harmful social systems – encourages participants and community collaborators to share details about their experiences. Applied in this context, design methodologies extract emotional content from participants to be used in the design process and outcome. This action leaves the Designer with an additional level of responsibility because participants share their lives and inner



thoughts to address the wicked problems that impact their lives. It can be painful and disrupting for members of communities impacted by the wicked problems to share these details and harmful when shared without a system of support. When social design projects are not community-led, the lead designer must acknowledge this responsibility and make every effort to support the wellbeing of the participant and/or collaborator throughout the process.

In an effort to build empathy for an individual, to understand context more deeply, or to codesign an end product, designers use varying methodologies and apply specific methods to an environment. Some of these methods require participants to reflect on experiences from the past, simulate new experiences, or provide insight on their current circumstances. Within the design process, this is a logical step. We need to understand the context and ask for insight about the community with which we design. However, some of these methods run the risk of activating an emotion, sentiment, or fear that may be within the participant. For example, the intention of an ethnographic interview is to get the participant to share their stories and experiences related to the topic at hand. Typically, ethnographic interviews are more open-ended and allow for a less structured exploration of the participant's experience. While this type of exploration is vital to design research, the method closely resembles both the aims and approach of therapy. This is especially risky when the participants of a project or study are intentionally recruited from marginalized or at-risk populations. The action of encouraging the participant to expand on a statement sounds like the therapist's request to "tell me more." This is where there is a particular risk of transference wherein the participant may identify and bond with the researcher. These themes will be further explored in the Literature Review below.

While this work aims to explore ways to mitigate the risk that these methods may pose, it is not intended to deter designers from using these methods. Rather, it will encourage designers to reflect on the purpose and approach of the methods to more deeply understand parallel processes that are happening with the participant as they are being used. For example, a designer using ethnographic interviewing with immigrant populations about the relocation experience must anticipate the impact that line of questioning will have on the participant prior to and during the interview. The designer should watch out for verbal and nonverbal cues that the participant is having a reaction to the content and remember that when the interview is over the experience being described may be closer to the surface and more impactful than before the designer entered the room.

Designers also frequently adopt frameworks and mindsets to inform their work without the benefit of a roadmap to practice implementation. In other words,

while these mindsets and frameworks support a more well-rounded view of practice and community, they are not in and of themselves a pathway to changed practice. Creating change in practice requires designers to integrate additional skills that will help them understand their role in the community, encourage them to reflect on their personal bias, reflect on their practice values and organizational approach, and intentionally adapt their way of communicating, understanding, and approaching their collaborators and partners. For example, Design Justice as a framework is an essential component to the ethical and value-based system of a designer. It is unlikely that a social impact designer will look at any of the principles of Design Justice and question the purpose or value of that assertion. However, the question may be “What does this look like as a daily practice of design?”

To this end, the present work will establish the emergence of a framework for design – Trauma-Informed Design – that brings principles from the mental health field into design research and practice in an effort to have a less extractive and more ethical approach to social impact design. Used in this work, trauma-informed is defined as, “an multidisciplinary approach that applies principles which are known to mitigate the impact of trauma and integrates them more broadly into practice. These practices must be understood within the context of our sociopolitical, economic, historical and racialized society.” Further, I will highlight Trauma-Informed Design as a method of praxis. That is, both a signifier of the values of a designer and a driver behind practice approaches and decisions. This is all in a larger effort to assert that design frameworks more broadly can be both values-systems and concrete approaches to practice.

## **Why Trauma-Informed?**

In order to understand the current use of the term “trauma-informed” it is important to briefly discuss its origins. The use of the term derives from the work to address the needs of people who have experienced trauma or trauma survivors. Since there have been increased efforts in clinical settings to directly address the symptoms of trauma exposure, practitioners, policy-makers, and survivors acknowledged that the treatment of these symptoms on its own was not



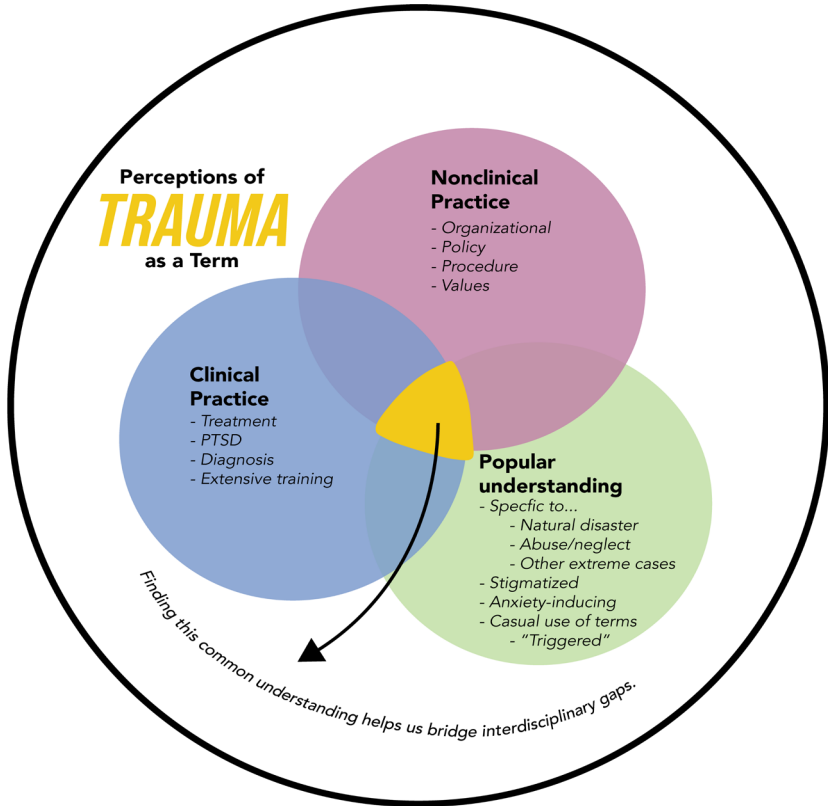
enough to counteract the broader challenges they pose in a larger context. As a result, trauma-informed as a term became more prevalent in that it broadened the supportive lens to be organizational or community-based. Based on the knowledge of care for trauma survivors and applying it organizationally led to a broader application of concepts. The Substance Abuse and Mental Health Services Administration released their interpretation of these concepts in their six principles of a trauma-informed approach: safety, trustworthiness and transparency, peer support, collaboration and mutuality, empowerment, voice, and choice, and cultural, historical and gender issues. These principles were created in an effort to encompass the overlapping needs of trauma survivors and external factors that impact their behaviors.

The argument here is that trauma-informed, as applied to design, acknowledges the impact and prevalence of trauma in a wider societal sense. Further, trauma-informed design applies principles, values, and skills of engagement within research and practice that is supportive of participant, collaborator, and community wellbeing in the short and long term. Importantly, design is a nonclinical field and should not consider the adoption of trauma-informed practices as a clinical practice. However, as trauma-informed practices are adopted across many fields and disciplines, it necessarily becomes an intrinsically multidisciplinary term.

## Interpreting Terms and Concepts

Central to the present research is the interpretation, understanding, and application of contextual terms between disciplines. As trauma-informed practices become increasingly common in professions outside of mental health, there is a need to broaden the language that we use to discuss the terms and clarify where and when the terms are used. This challenge becomes complex when considering the many ways in which trauma is understood across populations. Clinical practitioners have a particular understanding of the term while nonclinical practitioners of other fields and popular culture apply different meanings in their everyday life and work. The image below visualizes the barriers in creating interpretations for terms related to trauma and trauma-informed practices. The connotation of the

word trauma can be confusing, anxiety-provoking, intimidating, or even offensive to people depending on the context from which they come. Therefore, it is important to carefully explain the meaning and use of the terms as design adopts the framework more broadly.



The vital work of clarifying the designer's role within trauma-informed approaches and an understanding of the context and concepts will allow for more translation between disciplines. In other words, though the overlapping understanding and integration of the principles is not yet clear, the vital clarifying discussions encourage a more multidisciplinary approach to social impact projects. The perspective of this work is that trauma-informed practice is an intrinsically multidisciplinary term. As it becomes adopted into the lexicon of varying disciplines, varying disciplines may view the terms in vastly different ways – some may not even accept the term at all. However, discussions between disciplines about the opportunity to integrate

the principles helps guide the conversation toward shared language and common values. For trauma-informed design practices specifically, it is vital that designers have partners and resources with specific training who can provide additional insight and support in conversations that engage with emotional content. Professionals from a field such as social work will have received training on the individual and collective implications of a trauma-informed approach as a part of their education.

A final, yet nevertheless essential, part of the broader conversation in trauma-informed design practice is the link to professional ethics within design. The overarching field of design does not have an ethical code by which to practice. Unlike fields such as medicine, social work, and journalism, designers' ethical practices are more individualized and directed by the values of the designer. While this allows for additional freedoms within the field of design, there are fewer mechanisms for accountability outside legal implications or peer-driven measures. In "Upon Opening the Black Box and Finding it Full: Exploring the Ethics in Design Practices," Marc Steen proposes that "contemporary design practices, such as participatory design (PD), human-centered design (HCD), and codesign have inherent ethical qualities, which often remain implicit and unexamined (2015)." He argues that moving from implicit to explicit ethics in these methodologies makes design more effective. With this argument in mind, the present work agrees that these methodologies are inherently ethical and that applying them in social impact settings makes ethical guidelines increasingly important.

How can designers create mechanisms to not only avoid potential harmful impacts of our actions, but embrace a mindset that sees people and communities holistically while employing strategies that support the health and wellbeing of them? This work will examine the role of design as a powerful tool for change within the landscape of trauma-informed practice in social impact settings. Given that designers in such work engage with vulnerable and/or marginalized populations, we must become adept at practices that keep our work from becoming more extractive than they are helpful. The multidisciplinary application of trauma-informed practices could be a pathway to finding these mechanisms.



## Design in Social Impact Spaces

As society grapples with the persistent failure of financial, educational, political, and other social systems, there is increasing interest in finding more innovative solutions to the problems that we face. Design has begun to see its place in this change and moved further into social impact spaces. As used in the present work, design will be defined as disciplines that use iterative creative and hands-on methodologies to create or recreate a product, environment, service, program

or system. Social design furthers that definition by adding that the creativity and hands-on methodologies be used to address the individual, community, or systemic barriers that cause marginalization and oppression. Though based on the secondary research presented here, this definition was formed for the uses of this particular document.

Thomas Markussen defines social design and highlights the field's transition in the 2017 work "Disentangling the 'Social' in Social Design's engagement with the Public Realm." Markussen states, "Social design is defined according to (i) its modus operandi, i.e. its specific way of working and operating through 'participatory approaches' and (ii) its aim towards 'social ends' as being prioritised over commercial objectives." Markussen positions social design squarely in micro practice - or individual-level interventions - rather than having direct influence in the broader social context. By Markussen's analysis, social innovation is closer to how social design is used here. According to this definition, social innovation includes larger scale change and is flexible enough for others to adopt. Still, Markussen's perspective opposes the goals of this research in that it clearly demarcates the impact of micro- and macro-design projects and focuses heavily on the outcome rather than the process. My work adds to this definition by arguing that they are not inherently separate because the impact on the individual participant in the design process is part of a larger social system that must be considered in direct work with communities regardless of the outcome aims.

In another stance on the issues of social design, Cinnamon L. Janzer and Lauren S. Weinstein understand the importance of working within micro and macro contexts in their work, "Social Design and Neocolonialism." Their definition of social design is simple and concise. They write that, "social design is, in its broadest sense, the use of design to address, and ultimately solve, social problems (2014)." As with Markussen, this work takes a similar stance that social design has evolved in the last decade in response to crumbling systems and exacerbated conditions of poverty, illness, and climate change. However, the authors go further and write, "If social design strives to positively reshape the social realm, then social design study, practice, and practitioners must consider, and be able to consider, the macro and micro political, economic, and cultural systems that contribute to the issues and ills

that social design seeks to change.” Trauma-informed practice, when evaluating its uses within design, is presented as a pathway to help practitioners consider context more deeply. As used here, trauma-informed design does not only consider the experiences of the individual participant, but the impact on their community – whatever that may be for the individual.

More broadly, the notion of ethical codes within design as it expands reach in social impact spaces is an ever-present conversation. Looking more deeply into Marc Steen’s “Upon Opening the Black Box and Finding it Full: Exploring the Ethics in Design Practices,” there is a heavy focus on the inherent and implicit value-setting that occurs when designers engage in participatory design, human-centered design, and co-design. As stated in the introduction, Steen argues that these methodologies cannot be conducted without a consideration of ethics because of the human engagement they entail. For each of these three methodologies, Steen also offers a parallel values theory thereby providing supportive literature for his stance. The stance taken in the framing of trauma-informed design practice is similar to Steen’s in that it also understands that human interaction in a professional setting such as design necessarily presents ethical challenges. However, my stance here is that social design as a whole presents designers with ethical challenges regardless of the chosen methodology.

## **Adapting Approaches for Social Design**

Despite the work of many well-intentioned and skilled designers that have used their training to solve contemporary problems, the standard or traditional application of design methods are not adequate to address the transition to social design. Janzer and Weinstein make the case for reworking or discarding design methods that are no longer appropriate in these new sets of circumstances. They write, “As designers enter the social realm – and shift from designing objects to designing social change – the need for capable and ethical social practice must be acknowledged and developed (2014).” They assert that design has not effectively adapted methods and that some methodologies like human-centered design, co-design, and design thinking are distilled from other types of design when they should be

fully adapted for social design. Janzer and Weinstein created a matrix to support designers in making more intentional and ethical choices in methodology. This matrix helps to place design methods in four quadrants: Transformative Social Change, Human-Centered Design, Traditional Design, and Design Neocolonialism. The image in Figure 1 (adapted for use and clarity) shows the matrix as designed by the authors.

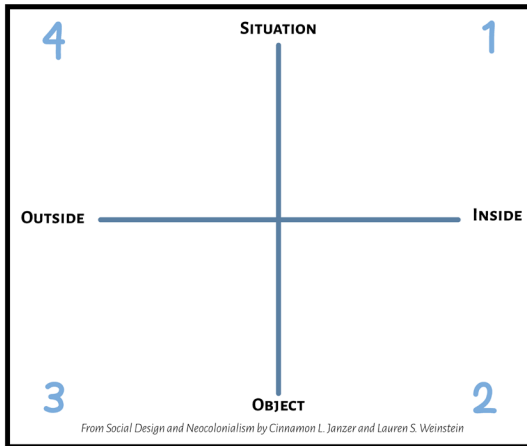


Figure 1. Blank Design Neocolonialism Grid adapted from Janzer and Weinstein

Each quadrant has a specific way of viewing and assessing design methods. Therefore I adapted the grid to contain a summarized explanation of each quadrant's purpose.

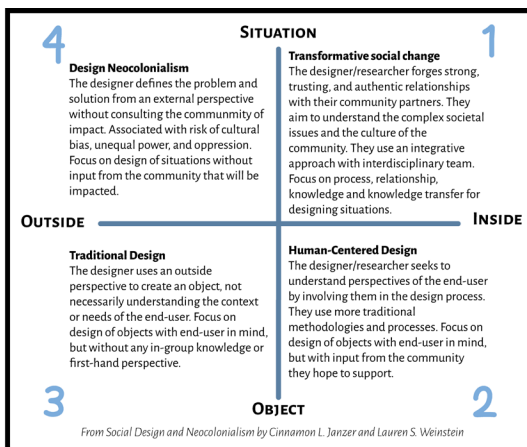


Figure 2. Description of Design Neocolonialism Grid adapted from Janzer and Weinstein

Finally, Janzer and Weinstein presented examples of design methods that fit within each quadrant. Presented visually in the following grid, the authors offered examples of which methods were more adaptable to a non-colonial mindset.

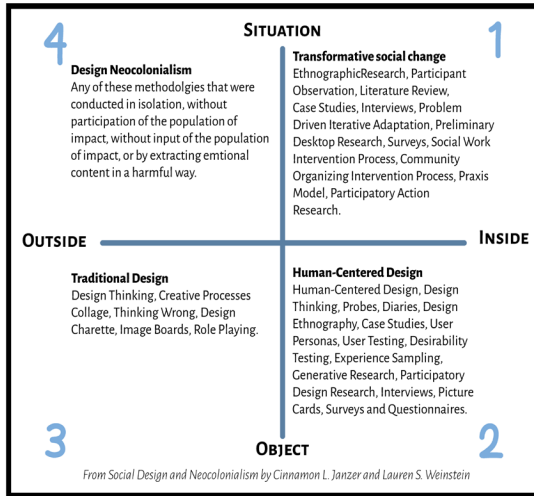


Figure 3. Design Neocolonialism Grid with examples adapted from Janzer and Weinstein

The thoroughly written recommendations and thought processes in the Janzer and Weinstein research are important additions to the conversation about how designers can transition to socially impactful work. It provides a strong call to action for designers to reflect more thoroughly on their practices. The research presented here will add to this work by offering reflections about the mindset and approach of the designer in addition to the choice of methods. In other words, while the choice of methods is vital to a more ethical transition into social impact work, designers must also evaluate their approach to engagement within any of the methods that they use. Even methods that fall within Janzer and Weinstein's quadrant of transformational social change must only be used when carefully considering context, designer role, and with support of participant and community wellbeing. Another reason to address the use of methodologies and methods in design is to address the parallels that designers and design researchers have seen between design and other fields or systems. This is particularly important as social impact designers attempt to define and carve out the role of designers in these spaces. In order for designers to collaborate within multidisciplinary teams,



we must first understand our roles more clearly. Part of this is distinguishing and distancing ourselves from others.

First, Sarah Fathallah and A.D. Sean Lewis recognized parallels between policing and traditional design work. When it was applied to social impact without adapting the methods, they found the process of engagement and co-design with impacted communities to be extractive and harmful. Fathallah and Lewis discussed the extractive qualities of design in "Abolish the Cop Inside Your (Designer's) Head," by highlighting the ways that design has aligned with policing and pointing out similarities in ideologies between the two institutions. In addition to pointing out that designers have created many of the tools of policing, the authors detail many shared ideologies. Importantly, Disposability and Extraction is one of the points of shared ideology about which they write. They write:

In design research, 'subjects' are useful as long as designers are able to extract knowledge, insight, or social capital from them, and are quickly disposed of once their value is no longer of use. Even when designers attempt to facilitate processes with research or user testing participants in inclusive, democratic, or participatory ways, design processes remain by and large extractive to communities. (2021)

Another concerning point about using design methods in social impact work is the increased likelihood of a designer or design researcher asking questions that extract emotional content from the participants. Many methods ask that designers push participants to share their experiences and explain details for more evidence. Without proper training or experience, this can create unsafe and psychologically damaging environments for participants. Tad Hirsch found this connection in a 2020 paper entitled, "Practicing Without a License: Design Research as Psychotherapy." While Hirsch does not see an intrinsic issue with delving into emotional content with design research or development participants, there is a strong recognition that the conversations often lead to exchanges that mimic those of psychotherapy. Hirsch asserts that designers must be aware of those relationships because most designers are not prepared to manage the relationships as a therapist would. For example, designers are not tied to the idea of professional

boundaries by a larger entity as therapists or doctors would be. However, the mental health field knows that healthy boundaries are better for both the participant/client and the designer/therapist. Additionally, designers do not learn how to navigate transference – where a participant attaches more closely to the designer because the designer reminds them of someone else in their life – or countertransference – when the same process happens from the designer with a participant.

## Summary of Trauma and its Impact

While the main focus of this work is not on the actual experiences of trauma, it is important to know the prevalence of trauma as a foundation of why this framework exists to begin with. Trauma is a widespread experience in the United States. Research that studies the impact of Adverse Childhood Experiences (ACEs) is commonly cited to show the prevalence of trauma. ACEs are a list of experiences which are used to screen adults and youth for trauma. Multiple studies have shown that there are clear physical and mental health implications for people who report having experienced one or more ACEs. In the classic ACEs study in the 1990s, 1 in 10 reported verbal instances of abuse and more than 1 in 4 reported physical abuse (slapping, pushing, throwing, etc.). 1 in 8 of respondents had witnessed violence against a parent. Additionally, 28% of women and 16% of men reported sexual assault as a child. Of the respondents who reported ACEs, 87% experienced at least two different ACEs and 1 in 6 experienced four or more (Van Der Kolk 2014). Many ACEs studies have been conducted since the original with similar results. All of this is to reiterate that trauma exists, is widespread, and has implications beyond the immediate aftermath.

Trauma is often considered related to extreme events such as war, abuse, neglect, violence, and natural disaster, and other extreme events. However, the definition of trauma is evolving to address chronic stressors, race-based trauma, and other circumstances outside of this traditional thought. More contemporary definitions address the idea that the event is not what defines trauma but that experience of the individual and the impact on their life. Having researched multiple definitions of trauma within multiple contexts, I define trauma as, “the experience of a

threatening, harmful, or injurious event, series of events, and historical contexts, and the physical and emotional responses of an individual or collective to these conditions." This definition was created to include two important aspects that were not common across definitions. First, this definition acknowledges the impact of historical trauma on the present. Especially for marginalized groups that have been historically oppressed in the United States, it is important to acknowledge the generational impact. However, there may be additional information in the study of epigenetics. Second, this definition includes a perspective of collective trauma. Though individual people may experience trauma differently and respond in various ways, communities are impacted by and heal from trauma collectively so it is important to acknowledge this as a central component of trauma studies. More definitions are discussed in the results section of this document.

Central to experience is memory - whether or not trauma is present. The inner workings of the brain hold these memories and help to keep us safe from potential threats. Stressful or traumatic experiences shape the memories stored in our brain and tell us how to respond the next time you are under threat. Sometimes this function works in your favor and saves us from potentially harmful events. Other times this function works against you by activating the threat response within a seemingly innocuous moment. In this way, trauma changes the way your brain works and alters the way you see the world and relate to others. The image below simply explains the part of the brain related to these memories and how they respond to threat or crisis. The most important takeaway here is that our brain functions to protect us from physical and emotional harm. Therefore, we hold mechanisms that often operate outside of our conscious minds and initiate a physical response to real or perceived threats. As practitioners of social impact design, we must understand that no one enters a space as a blank canvas and that part of the role within a trauma-informed approach is to acknowledge this fact and do what we can to acknowledge, address, and mitigate when and how participants and community collaborators perceive threats in our work and actions. The image below briefly explains how the brain works and perceives threat.

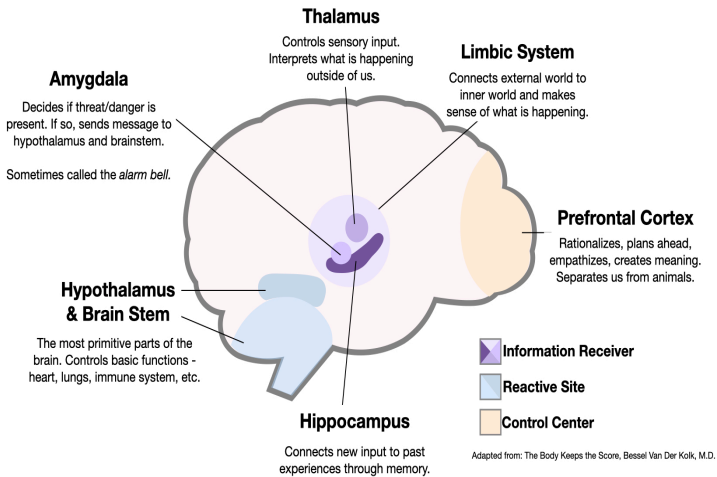


Figure 4. Basic brain map with Explanation related to trauma

In response to the harm caused by trauma and otherwise adverse experiences, clinical, community-based, and spiritual supports were created. Over time, communities at the center of trauma and harm created models of resilience and clinical models were developed to address the psychological and physical symptoms – the clinical models developing long after the more community-based systems of support. Either way, there have been attempts to help people regain identity and meaning after trauma occurs.

## Evolution of Trauma-Informed Approaches

As discussed briefly in the introduction, trauma-informed principles and approaches have evolved from use in mental health and treatment of people who have experienced trauma. Based on what clinicians and healing practitioners know to be true about trauma, the term trauma-informed came to be used in settings where trauma was being directly treated and addressed. As consciousness of the impact and prevalence of trauma grew, these were the settings where the specific skills to address trauma individually and collectively were developed and researched. This was not necessarily only clinical settings as community- and

faith-based organizations were also working to address trauma. A chapter by Caroline C. Piotrowski called “ACEs and trauma-informed care” from a larger 2020 publication called “Adverse Childhood Experiences”, attributes the development of this trauma-consciousness to domestic violence women’s shelters in the 1970s, child abuse advocacy and prevention centers in the 1980s, and responders to the crisis of post-traumatic stress disorder (PTSD) for veterans of the Vietnam War. Service providers saw patterns in the way that trauma survivors thought, behaved, and engaged in services. Since then, the awareness and prevalence of trauma and traumatic stress has only increased, leading to an expansion of this awareness to more sectors of health and other disciplines altogether.

As this work evolved over the decades, people who worked with trauma survivors recognized the need for practice shifts that mitigated the risk of retraumatization to their patients or clients. As providers adapted, researchers watched this work and started to define and document the approach. With popular clinical/organizational definitions coming from the Substance Abuse and Mental Health Services Administration (SAMHSA), the National Child Traumatic Stress Network (NCTSN), as well as many academic and governmental institutions, trauma-informed care came to signify a strengths-based approach to treatment that supported empowerment and self-sufficiency after a traumatic event. Practitioners began to see client behavior from a different lens. Rather than put the full onus of negative behaviors on the client, they understood that behaviors they saw were part of a larger picture. Common phrasing within trauma-supportive communities tells us that we should ask “what happened to you?” rather than “what is wrong with you?”

A 2014 document by SAMHSA called “SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach,” offered practice and implementation recommendations for organizational adoption of trauma-informed approaches. In it, they summarized the Six Principles of a Trauma-Informed Approach that are now widely used in literature in the United States: safety, trustworthiness & transparency, peer support, collaboration & mutuality, empowerment, voice & choice, and cultural, historical, & gender issues. For this document, I have updated “gender issues” to reflect multiple and intersectional identities and will use “identity issues.” While these are popularly used principles and the principles that I used in this research,

there are other frameworks to support trauma healing. The present research and documentation uses the SAMHSA principles in an attempt to create interdisciplinary bridges between social work (mental health) and design specifically. The image below is a visualization of the six SAMHSA principles.

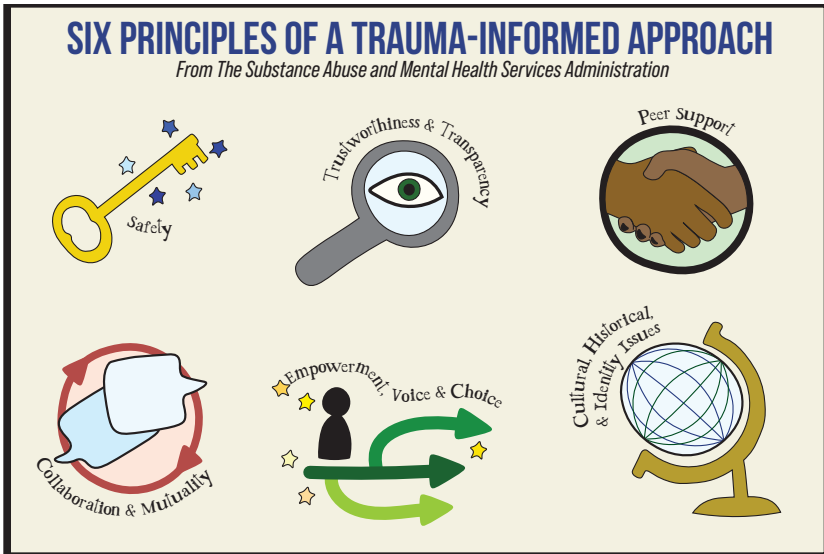


Figure 5. SAMHSA's Six principles of a trauma-informed approach

Over time, the use of the term expanded to professionals in various fields – especially those that engage with marginalized, vulnerable, and/or at-risk populations.

Piotrowski writes that trauma-informed approaches are:

“...designed, first and foremost, to reduce the risk of retraumatization for individuals engaging with professionals. This can include patients receiving care in healthcare settings, clients of social and public health services (e.g., homeless shelters, food banks, crisis shelters, immunization campaigns, home visitation), as well as participants who are recruited to engage with professionals (e.g., participation in a research study, interview with a professional journalist).” (2020)

Additionally, Piotrowski recommends that trauma-informed approaches be especially applied for people who are likely to have ACEs in their history, with children

and youth, with vulnerable women, in all systems of care including medicine and dentistry, and in organizational development (2020). This perspective on trauma-informed approaches makes a call to expand the use of trauma-informed approaches in other fields and allows for a more flexible understanding outside of clinical settings.

## Trauma-Informed Approaches in Nonclinical Settings

Recent trends in K-12 schools and in post-secondary education push for increased use of a trauma-informed approach. This typically includes an emphasis on the prevalence of trauma in their students as well as possible manifestations in the classroom with a step away from requiring a clinical understanding of how to clinically treat someone who has experienced trauma. This new direction is displayed in the “Trauma-Sensitive Schools Training Package” by The National Center on Safe Supportive Learning Environments that moves the learner from psychoeducation about trauma and its impact into how to address trauma in the classroom (2018). Additionally, one example of application of the approach is displayed in Tamar Mendelson et al’s article, “A Randomized Controlled Trial of a Trauma-Informed School Prevention Program for Urban Youth: Rationale, Design, and Methods.” The approach was applied in an urban school setting. Important to this article is the understanding that while the approach is based on what is known to support those who have experienced trauma, it is effective and applicable to all - students in this case (2020). Finally, in “Increasing Trauma-Informed Awareness and Practice in Higher Education,” Kristen Doughty writes about trauma-informed care in universities. Doughty writes that “...a trauma-informed higher education institution can provide a safe, supportive, respectful environment where students are empowered and share leadership” and that “students provided with a trauma-informed environment will feel connected and supported, and this connection has shown to positively impact academic success.” (2020).

Often in the literature about trauma-informed design is an acknowledgment of its

place in organizational development and change. Work environments - particularly in high stress environments - need to create a trauma-informed process that includes all people, processes, and mechanisms within the organization. There are many examples of this in the literature about trauma-informed care. One important document is The Substance Abuse and Mental Health Services Administration's (SAMHSA's) "Concept of Trauma and Guidance for a Trauma-Informed Approach" that provides succinct yet powerful guidelines on implementing a trauma-informed approach (2014). Many of the principles outlined in this document address not only the relationship and treatment between practitioner and community, but between organization and practitioner as well as between practitioners. This includes things such as policy, leadership, collaboration, evaluation, and many more elements of the process.

Practitioners such as interior designers and architects have applied these trauma-informed principles to the creation of physical spaces. One such example is related to the design of supportive housing for adults experiencing disability or people with substance use disorders. These spaces often address the need for safety and self-sufficiency while making services and treatment more accessible. This is shown in cases like those described in "East New York supportive housing to feature 'trauma-informed' design" by Real Estate Weekly (2021), "Trauma-Informed Design: Healing and Recovery in Second-Stage Housing" by Naomi Duddridge (2010), "New Denver housing community takes trauma-informed design to next level" by Gary Enos (2017). Additionally, as written in an article by Yvonne Jewkes, Melanie Jordan, Serena Wright, and Gillian Bendelow in 2019 called "Designing 'Healthy' Prisons for Women: Incorporating Trauma-Informed Care and Practice (TICP) into Prison Planning and Design," this is also being applied in prisons. However, one contradiction in prison design is that the fundamental use of incarceration contradicts the trauma-informed principles nor does it support a liberatory mindset. Therefore, there is a lot of criticism of designers practicing in these spaces.



# A Landscape of Trauma-Informed Design

In the past few years, design researchers and social impact design practitioners have discussed trauma-informed design more broadly as it applies to design approaches and mindsets. My present work aligns with the work of these practitioners and researchers with the hope of creating strong networks of parallel and intertwined work. To add to this work, I will outline their contributions while offering practice-based examples of how to apply them in the field.

One major contributor to trauma-informed design practices is Kelly Ann Mckercher, who wrote “Beyond Sticky Notes” in 2020, facilitated the creation of an online database on trauma-informed resources, and created the “Model of Care for Co-Design Cards”. Mckercher’s work supports a trauma-informed approach and helps to change the mindset of designers using the cards or the compilation of resources. The community-building around this type of work as well as the outlining of the approach itself moves the conversation forward. The co-design card deck highlights processes before and after community engagement to encourage reflexivity in project purpose and engagement style. For example, Mckercher encourages designers to assess whether the proposed project is needed before a designer begins the engagement process.

Another important contributor to the work of trauma-informed design is Rachel Dietkus who has a wealth of experience in design and social work settings and has done much work and publication around the connection between the two disciplines. Dietkus also writes extensively about the impact of the design process on individuals and communities and has done research and investigation into the interrogation of design methods as tools for harm if not done correctly. Dietkus is also working to consult with various design teams on how to use a trauma-informed lens in their work. For the purposes of transparency, I spoke to Dietkus in March 2021 to begin a shared understanding of our perspectives as social workers in design and the place for trauma-informed practices as well as to discern where this work can go.

As mentioned above in speaking about the parallels between design and policing, Sarah Fathallah has also done extensive work on participatory action including

applying a trauma-informed and culturally responsive mindset to the work. Jax Weschler is also doing extensive work online and locally in Australia to contribute to the conversation. These names are prominent in the conversation about trauma-informed design, but I must also reassert that there may be many more practitioners in social impact design and who effectively use trauma-informed approaches in their work that are not as visible within the national or international conversation about this work.

The above inroads to trauma-informed design have contributed greatly to the field's understanding of the term and elevated the visibility of the group of designers that work so diligently to advance the work. I hope to extend the previous work by exploring the praxis elements of this work. This means that I will focus on the combined value of a trauma-informed mindset and approach while pushing for an action-based model. Action here can be both the application of skills and the practice of reflexivity from a trauma-informed standpoint. While the above designers and others in social impact practice may deeply understand the way forward with praxis, I hope to create a clear demonstration and add to the discussion by highlighting the ways that it can – or cannot – create richer and more ethical design practices. It is my hope that this work continues to add to the field of design in collaboration and cohesion with those that are already working in the field.

## The Importance of Praxis

The term praxis will be used in this research to signify action based on a deep understanding of theoretical frameworks and lived experiences that creates lasting social change. Although this brief definition is influenced by a broader swath of explanations, it is most directly influenced by the work of Paulo Freire who wrote that, “[l]iberation is a praxis: the action and reflection of men and women upon their world in order to transform it.” (1970). This definition, first used in 1970 in the original edition of this work, emphasizes the need for both theory and practice. I also chose to adopt a Freirian way of thinking because his classic work encourages action toward liberation and for amplification of underrepresented groups; thereby closely aligning with the aims of social design and my own practice values.

For designers seeking to adopt a trauma-informed approach, the elements of the theory here are an understanding of what trauma is, how it impacts individuals and communities, and how trauma responses present in various contexts. Theory also includes acknowledgment of the broader approaches to the work such as using empathy, balancing power dynamics, providing voice and choice, and others. The conversation about these topics is already becoming more prominent with practitioners and researchers like Kelly Ann Mckercher, Jax Weschler, Rachel Dietkus, and Sarah Fathallah as discussed above.

The challenge in moving from theory to practice is envisioning how this

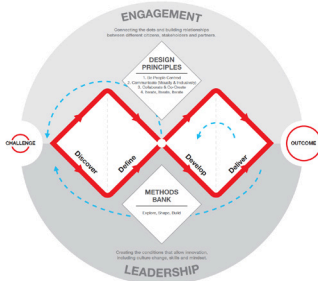


Figure 6. Design Council Process

understanding will change practice – if at all. Additionally, the theory of trauma-informed approaches was not created within the

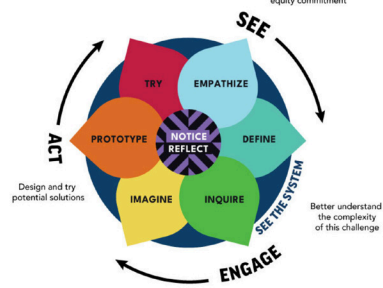


Figure 7. Liberatory Design Process

field of design so this requires a great deal of interpretation, research, and communication

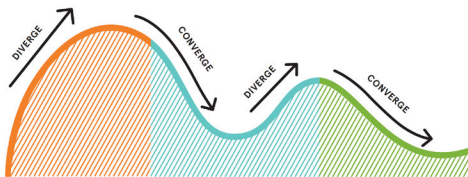


Figure 8. IDEO Design Process

to bridge the gaps between the two disciplines. However, one thing that designers and mental health practitioners can understand is the multiple

approaches to practice. Notably, many designers, studios, and organizations use visuals to show their process clearly. Some of the models, such as those from Ideo and the Design Council (Figure 6), are centered around a more classic approach to design. There is a focus on processes free from

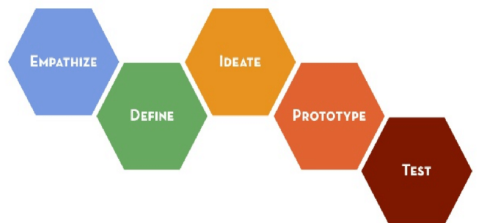


Figure 9. Stanford D School Design Process

specification about engagement strategies, but more straightforward on ideation, prototyping, and outcomes. The other models – from Stanford’s d.school (Figure 9) and Liberatory Design (Figure 7) – include some of the mindset and values discussed above. Liberatory Design specifically is an explicitly values-based model of design accompanied by a card deck – The Liberatory Design Deck – that further breaks down and encourages designers to use reflective practice. They question many aspects of power, privilege, and co-design that need to be reflected upon for practice.

While reflexivity is included in praxis per my definition, the model can still be interpreted and applied in different ways. For example, when there is a call to include diverse voices there is a lack of specificity and nuance that case examples could clarify. This is not a critique of any of these models or the concepts herein. Rather, it is an acknowledgement of the importance of theory and praxis in tandem. Another practice model from IDEO (Figure 8), attempts to include more detail in how the model is applied. However, this is a step back from the values-based practice that we see with Liberatory Design. The main point in this

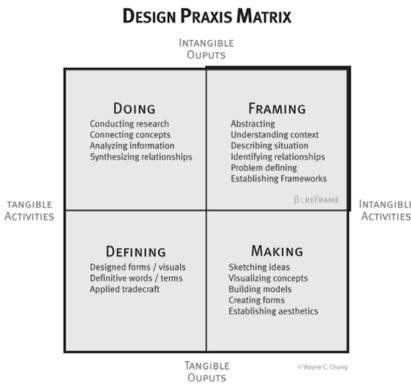


Figure 10. Design Praxis Matrix

part of framing is understanding context and establishing frameworks. However, without adding tangible activities or tangible outcomes, this mindset remains largely theoretical and within the mind of the designer. This is why my goal in the present research is to demonstrate how a designer’s outputs and activities as they relate to trauma-informed practice can be both tangible and nonextractive to co-designers and collaborators.

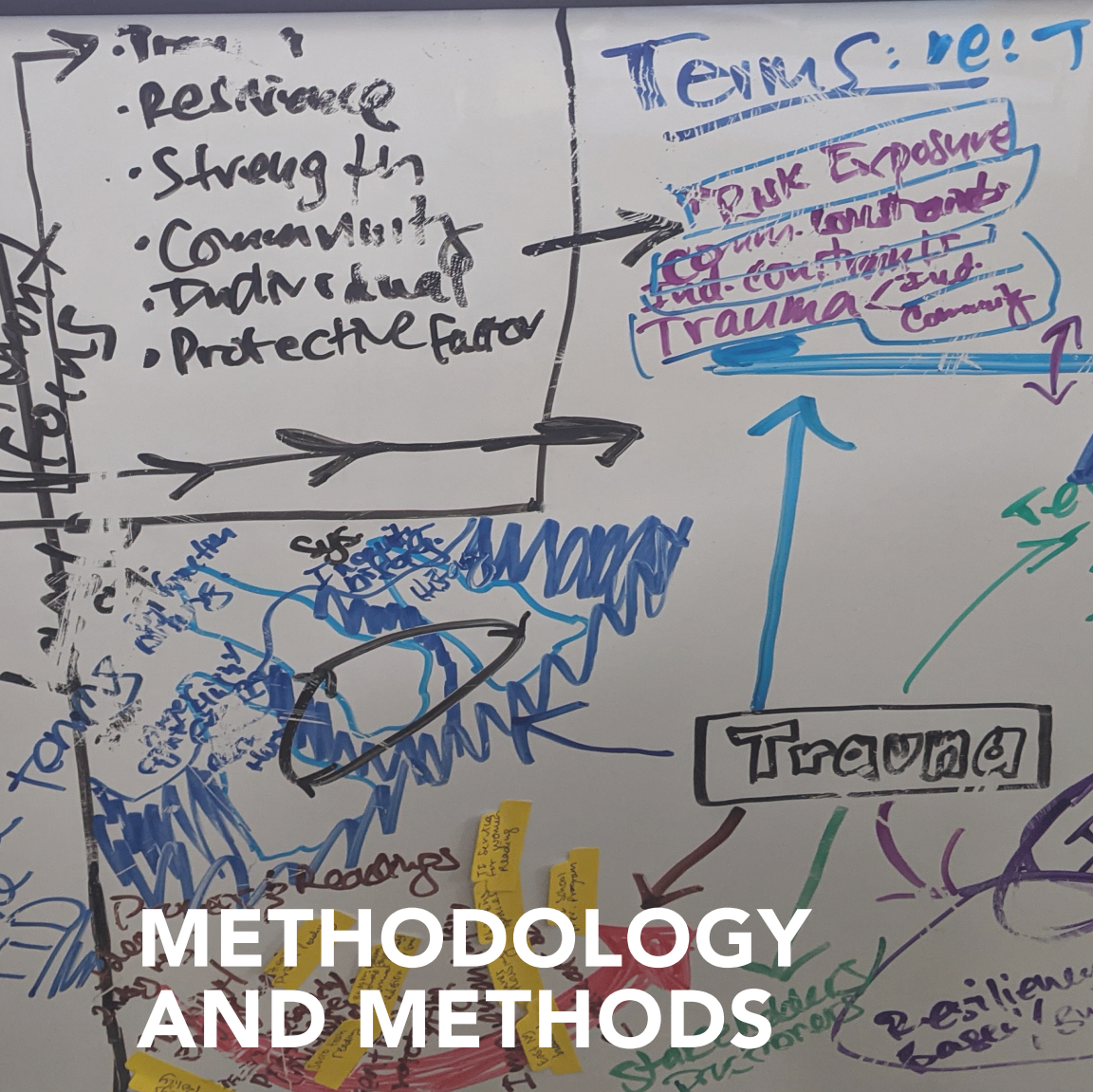
discussion about practice models is to highlight the fact that while these models have a large focus on the mechanics of the design process, trauma-informed design practices can fill in with a values- and skills-oriented approach to engagement and process within each step of any given design practice model.

According to Wayne C. Chung’s Design Practice Matrix from 2019 (Figure 10),

# Goals of the Present Work

While honoring the significant work of the past, my work explores both the process of understanding and applying a trauma-informed approach to design practice and research. In summary, this research explores the following questions:

1. How can trauma-informed design practices with vulnerable populations reduce the impact of design's more extractive elements and increase community motivation for participatory design and co-design methodologies?
2. How will the introduction of specific non-clinical trauma-informed practice skills impact the work of designers within their application of participatory design and co-design practices?
3. How might designers apply a demonstrated understanding of what it means to be a trauma-informed designer and replicate this process for the future work of their own and others?



# METHODOLOGY AND METHODS

## Overview

In order to answer the above questions, this design research project had two distinct methodologies. First, I conducted extensive desk (secondary) research. The goals of this research were to: 1) define terms for a multi-disciplinary audience; 2) establish a precedent for trauma-informed practices in multiple fields and; 3) understand the landscape of trauma-informed practices in design. Second, I conducted participatory research with practicing designers in social impact spaces. The

goals of this qualitative research were: 1) interpret the language of a trauma-informed approach in the context of design; 2) understand the baseline practices that drive social impact designers and; 3) make recommendations toward a model of praxis for trauma-informed design practices in social design.

## **Methods of Desk Research**

In order to accomplish the goals of this phase of the project, I conducted an extensive literature search and review. I first compiled definitions and contexts from literature about trauma and trauma-informed approaches to conduct a thematic analysis and create definitions for the purposes of this work. Second, I added additional references to the literature review that helped me explore the landscape of trauma-informed design and to understand the place and purpose of various design process models. From there, additional themes were created to discover potential opportunities for multi-disciplinary understanding and commonalities. Some of these takeaways are shared in the literature review above. Finally, I used these themes to explore gaps in the literature and practice of trauma-informed design. This bulk of this research took place between January until September of 2021 excluding research that was done to inform ongoing tangible activities and outcomes.

## **Methods of Qualitative Research**

In order to conduct qualitative research for this project, I sought design partners who work in social impact settings. Rather than partner with a community-based organization, I was intentional about choosing practicing designers for multiple reasons. First, I already have training and experience applying trauma-informed approaches to community-based organizations and in government contexts. I felt that this would not reveal new information about the design process in the way that I required. Second, I hoped that design partners would be able to immediately and directly apply the concepts I wanted to test rather than relying on memories or past experiences.

The criteria for this search was simple: actively engaging with communities through design and a focus on social impact aims. For practical purposes, “actively engaging” meant that the designers at a studio, lab, or organization had a group mission and were in the process of using varying design activities to resolve an issue or create an output. “Social impact aims” for this search meant that the group specifically supports or creates projects that address a specific community issue or that explicitly support marginalized or at-risk populations. This criteria was intentionally broad for a variety of reasons. First, due to time and space constraints within an ongoing pandemic, I was not able to have strict criteria for partner collaboration. Second, many designers in social impact projects work on consultancy or contract basis and may therefore not have a lot of capacity to collaborate on an additional project. I therefore opened criteria because I was unsure of designer availability. Third, I decided not to focus on a specific community demographic because I felt that it was counter to the argument within my research. Within the foundational understanding of trauma used here, I argue that it is not designers’ role to qualify people as traumatized or not. Additionally, I argue that trauma-informed approaches are used broadly and across demographics. Therefore, I did not limit my search to designers working with a specific demographic. For the most part, I contacted designers working in the Midwest unless the mission was especially aligned with my values and/or interests.

I used email to reach out to designers from the Social Change by Design database and through additional web searches. If the designers responded via email and agreed to speak, I would meet with them virtually to discuss my project, propose the idea of a partnership, and explain or clarify expectations for mutual collaboration. After sending at least 15 outreach emails with 5 follow-up meetings, I ended up collaborating with Convergence Design Lab based out of Chicago, IL. Other designers opted out of a partnership because they did not have the capacity, they did not feel it was a good fit, or they were not in an active project.

My overall approach to working with Convergence Design Lab – which will be shortened to Convergence – was to start with relationship-building and to meet them where they are. According to my own values and a trauma-informed approach, it was extremely important for me to build rapport and focus on the



strengths of Convergence's practices rather than assume a deficit. My assumption entering the partnership with the designers at Convergence was that they are already intuitively using a trauma-informed approach and that my goal was to support this work and to create pathways to be more intentional about their approach. Upon first meeting with me, Convergence shared that they were in the middle of a project with their client SpyHop and saw an opportunity to explore trauma-informed approaches with SpyHop's Youth in Care program. SpyHop is a youth media organization based in Salt Lake City, UT and their use of Youth in Care signifies adolescents and teenagers who are in secure care facilities, in foster care, or in residential treatment facilities. Convergence has been working with SpyHop since its inception and Mindy Faber has a longstanding relationship with the organization that predates Convergence's founding. For more detailed information about Convergence demographic and focus, see profile on the following page (Figure11).



# ORGANIZATIONAL PROFILE

## Convergence Design Lab

**Location:** Chicago, IL

**Services:** Research  
Strategic consulting  
Learning experience design

**Features:** 100% women-owned  
Participatory methods  
Equity-focused

**Key Staff:** Mindy Faber  
Co-founder & Exec. Director

Margaret Conway  
Co-founder & Dir. of Learning

Jacob Watson  
Researcher/  
Ed. Specialist



### STRENGTHS AND ACHIEVEMENTS

- Extremely knowledgeable about the education system and youth development
- Skilled at creating and maintaining stakeholder relationships
- Caring and connected team
- Strong research and analytical process
- Passionate about equity and youth development
- Young studio with large impact

### FUTURE GROWTH

- Expanding and funding
- Continue with current clients
- Highlight and reflect (more) on practice values and culture
- Further document strong organizational identity and practice skills (*like relationship-building and youth journey*)

### RESOURCES

- Many organization-created tools and processes (*below*)
- Supportive team
- Institutional and topic knowledge
- Strong client relationships
- Culture of reflexive practice



LEADER HATS  
TOOLKIT



BUILDING A COMMUNITY OF  
PRACTICE



PASSION TO PURPOSE  
TOOLKIT



DIGITAL ATELIER  
TOOLKIT



MENTOR HATS  
TOOLKIT

Figure 11. Profile of Convergence Design Lab

More specifically related to the design and research for this project, I outlined a process of three phases: observation and reflection, planning and intervention, and reflection and recommendation. The phases were conducted mainly with Convergence staff – particularly the Executive Director, Mindy Faber – and at times included staff from SpyHop. The decision to use these phases was based both on my research needs and on the opportunities within the partnership. For my purposes, I needed a baseline understanding of how Convergence practices design and I needed to test new tools, resources, and processes with them. For their part, Convergence wanted to be sure that the relationship would support the functioning of their practice in some way and would determine the specificities of this as we continued.



Figure 12. Phases of Qualitative Research

The first phase of “Observation & Reflection” included building a relationship with Convergence, attending practice-based work meetings with them, and reading their publications, reports, and blog posts. For this phase my actual activities included: meeting with Mindy Faber and discussing various ways to explore themes, co-creating an interview protocol and script with Mindy, joining Mindy (virtually) on a stakeholder interview for evaluation, keepings notes on interactions and assessments of these interactions, reading and analyzing Convergence’s Medium posts about their work and culture, and reading and analyzing past transcripts from focus groups and discussing the themes with Mindy. For these activities, I made attempts to connect back to principles and themes of a trauma-informed approach.

During the second phase of the process “Planning & Intervention,” I created tools and experiences to use with Mindy and other designers with Convergence. I created a didactic guide (Appendix A) to discuss trauma and trauma-informed

principles and 3 workshops with themes progressing based on takeaways from the previous workshop or activity.

The workshops followed a trajectory that included foundational knowledge of trauma and trauma-informed principles, case study analysis and discussion, and trauma-informed practices in learning environments. Individual workshop themes were decided between workshop sessions. In other words, they were not pre-established during the planning stages of the workshop series. The reasons for this were: the amount of workshops for which Convergence was available was not determined, I wanted to practice flexible and responsive design and build on actual knowledge and conversation from workshops rather than on pre-planned agendas. The specific logic and details of this agenda trajectory will be discussed in-depth in the “Results” section of this document.

In some ways, the third phase – “Reflection & Recommendation” – took place concurrently with Phases 1 and 2. The purpose of this phase was to review research activities, analyze the findings, share conclusions on how trauma-informed approaches were applied to design practice in this case, and support future work of design. After completing activities in Phases 1 and 2, I reviewed and analyzed observation notes, existing Convergence materials and transcripts, and feedback from workshops. In order to create materials throughout Phase 2, I integrated elements of this phase as activities were rolling out. There were essentially two parallel outputs. First, the results of applying a trauma-informed approach and whether it was possible in this case and second, added value or material for Convergence through the process of collaboration with this project.

## **Broad Approaches**

Throughout the application of these methods, I stayed grounded in two broader design approaches: a praxis model of social design and social work approaches to design. As stated in the “Theoretical and Contextual Literature Review,” I drew heavily from Paulo Freire’s *Pedagogy of the Oppressed* as a grounding theory for the praxis model. His work emphasizes that theory and action are both necessary to make change (Freire 1970). This perspective resonates with this work as

it encourages designers to think beyond theory and discussion of mindset into concrete practice change and reflexivity. I also used the precedent of using a social work approach in design drawing from work by Victor Margolin and Sylvia Margolin in "A 'Social Model' of Design: Issues of Practice and Research". By applying a holistic and ecological approach to design practice and following a social work process, designers can engage in social impact work with guidance from a field with a longer stance within this work. I used these precedents and approaches in my foundational reasoning behind decisions and in my interactions with Convergence. I also reflected on my approach a practice often throughout the process to ensure that I was using a trauma-informed approach to this project. that I required. Second, I hoped that design partners would be able to immediately and directly apply the concepts I wanted to test rather than relying on memories or past experiences.



# DESIGN ACTIVITIES AND RESEARCH RESULTS

## Results of Desk Research

Due to the fact that trauma-informed design is still an emerging conversation in the field, the secondary research was vital in exploring potential for the approach. This research led to two major outcomes for a possible trauma-informed design approach; a step toward defining terms and a guide for process.

In order to write a broader definition for multidisciplinary use, a table (as shown in Figure 11) was created to track existing definitions of trauma and trauma-informed from various fields. Through an analysis of existing themes and contexts, the

New Denver housing community takes trauma-informed design to next level East New York supportive housing to feature 'trauma-informed' design.	Uses the term "trauma-informed design" Article	Physical space	TID is: "Apartments include many features designed to convey a safe and community-oriented living environment for a population that has experienced significant trauma." Don't provide a definition, but discuss a focus on serving populations recently released from prison and providing community services
Increasing Trauma-Informed Awareness and Practice in Higher Education	Different setting for TI practice PDF	Physical space and community programming	A trauma-informed higher education institution can provide a safe, supportive, respectful environment where students are empowered and share leadership. Students provided with a trauma-informed environment will feel connected and supported, and this connection has shown to positively impact academic success. No definitions, BUT - could be a good source material for definition of trauma-informed design practice.
Socio-technical systems: From design methods to systems engineering A randomized controlled trial of a trauma-informed school prevention program for urban youth: Rationale, design, and methods	Example of changed design process connecting method to practice PDF	GOOD ARTICLE. Lots of discussion about multi-disciplinary work and applying overarching themes to process. PDF	Don't provide a definition, but provide an in-depth look at a TI example and mental health-based intervention practice in schools. They describe TI intervention as a universal approach that should not necessarily be used only for students that have been screened to have trauma hx. No definition. Would be old if so.
Designing Trauma-Informed Addictions Services	Focus on TI intervention in substance use treatment PDF	Not much new information in this one, but talks about the universal approach. Focus on changing focus away from dominant male intervention perspective to women. Could be a good source to focus on marginalized groups when designing systems. However, kind of an old clinical document. Will support TI approaches as a start to finish and all-encompassing approach. I am arguing that it is a process, aim, and outcome. Not just one of these at any given time. The only issue is that I feel this article - from my scan - does not address the perception of women in prison as a population worthy of additional resources than the bare minimum. This is a significant barrier to overcome.	Not a clear definition, but a good statement from the abstract: "There has been growing acknowledgment among scholars, prison staff and policy-makers that gender-informed thinking should filter into penal policy but must be implemented holistically if gains are to be made in reducing trauma, saving lives, ensuring emotional wellbeing and promoting distance from crime."
Designing 'Healthy' Prisons for Women: Incorporating Trauma-Informed Care and Practice (TICP) into Prison Planning and Design	TI approaches as both a lens and an outcome PDF	This is a really great article, but is more based on direct principles. Still, really good information about why trauma-informed interventions are needed.	Trauma-informed services are those in which service delivery is influenced by an understanding of the impacts of interpersonal violence and victimization on an individual's life and development. To provide trauma-informed services, all staff of an organization, from the receptionist to the direct care workers to the board of directors, must understand how violence impacts the lives of the people being served, so that every interaction is consistent with the recovery process and reduce the possibility of re-stigmatization. The absence of this understanding about the impact of trauma on women's life, as the title of this article suggests, the equivalent of denying the existence and significance of trauma in women's lives.
TRAUMA-INFORMED OR TRAUMA-GENIC: PRINCIPLES AND IMPLEMENTATION OF TRAUMA-INFORMED SERVICES FOR WOMEN	Implementation of a trauma-informed service PDF		

Figure 11. Literature for Defining Terms

main elements of expanded definitions of trauma were: impact of an experience, cumulation of experiences, impact of historical and racial context, and accounting for cultural interpretation. The definitions in the following table were created:

TERM	DEFINITION
Trauma	The experience of a threatening, harmful, or injurious event, series of events, and historical contexts, and the physical and emotional responses of an individual or collective to these conditions.
Trauma-informed	Practices that use skills from evidence-based approaches for addressing trauma and integrating them into their work universally. These practices must be understood within the context of a sociopolitical, economic, historical and racialized society.
Trauma-informed design	A broad term to describe designers with an understanding and awareness of trauma. It also describes the construction and setup of spaces that support people who have experienced trauma.

<b>TERM</b>	<b>DEFINITION</b>
Trauma-informed design practice	An application of design methods/methodology that ethically and responsibly integrates universal concepts of empowerment, physical and emotional safety, trust, transparency, and collaboration - which are founded on evidence-based practices to support people who have experienced trauma.
Historical trauma	Threatening, harmful, or injurious event, series of events that were experienced in the past and the ongoing response of individuals and collective in the present day.
Racialized trauma	Threatening, harmful, or injurious event, series of events, and historical contexts that are experienced by Black, Indigenous, Latino/a, Asian, Middle Eastern and others based on their racial or ethnic identity. These can be experienced as microaggressions or more overt events of racism.
Intergenerational trauma	Threatening, harmful, or injurious event, series of events that were experienced in the past by relatives and community members. The present generations continue to experience the same circumstances and/or are impacted adversely by the experiences of earlier generations.



<b>TERM</b>	<b>DEFINITION</b>
Medical trauma	Threatening, harmful, or injurious event, series of events that were experienced through medical procedures and the response of individuals to these experiences. These can be routine, emergency or malpractice experiences.
Violence	An act of hate or anger that causes harm from one person to another. This can be emotional, psychological, or physical.
Neglect and abuse	The experiences of not being adequately cared for by your caretaker (neglect) or being subject to physical or emotional violence by them (abuse).
Violence	The experiences of the death of a loved one or the sudden disappearance of a person, place, or thing that held deep meaning.
Vicarious trauma	The experiences and responses of someone who encounters, treats, or otherwise supports someone who has experienced trauma. This usually results from hearing details of the experience. Responses mimic those of primary experiences of trauma.

Additionally, an exploration of themes in literature was done to expand on definitions and inform the larger concepts within design. These themes were analyzed in order to find purpose and means of a trauma-informed approach as documented in other fields. In some cases, fields that do not use the terms of trauma-informed

Title	Source Type	Review	Citation
East New York supportive housing to feature trauma-informed design.	Journal	Uses the term "trauma-informed design" to talk about physical space and community programming. Doesn't provide a definition, but discuss a focus on serving populations recently released from prison and providing community services.	"East New York supportive housing to feature trauma-infor Real Estate Weekly, vol. 65, no. 14, 29 Jan. 2020, p. B4. Gale Business, link.gale.com/apps/doc/A613510752/TIBC?u-umuser&aid-f-c3. Accessed 5 Feb 2021.
Healing Justice Report - The Astraea Foundation	Website	A useful website that defines healing justice and talks in detail about the framework. It has a good description of the origins and why it is useful for people who have been marginalized from traditional Western treatments. Also has a helpful list of resources. The caveat is that it is not clear whether it is written by the people who would make most use of it and mentions funders frequently.	"Healing Justice Report - The Astraea Foundation". 2021. Astraefoundation.Org. <a href="http://www.astraefoundation.org/microsites/healingjustice">http://www.astraefoundation.org/microsites/healingjustice</a> .
Why Am I Always Being Researched? Problematising Replicable Design to Practice Respectful, Reciprocal, and Relational Co-designing with Indigenous People	Publication	A publication by "Beyond Chicago" that presents case studies from the perspective of over-researched communities in Chicago. This is not specifically about design, but a useful perspective about community development that is not comprehensive or collaborative across organizations.	"Why Am I Always Being Researched?" 2018. Beyond Chica Akama, Yoko, Penny Hagen, and Desna Whaanga-Schollur "Problematising replicable design to practice respectful, rec relational co-designing with indigenous people." Design ana (2019).
Co-Design Process: Cheat Sheet	Publication		Auckland Co-Design Lab. 2018. Co-Design Process: Cheat: <a href="https://www.aucklandco-lab.nz/resources-summary/enable-mr0m-4fe2-mhw7n-wedah6-r4q7-3q4q">https://www.aucklandco-lab.nz/resources-summary/enable-mr0m-4fe2-mhw7n-wedah6-r4q7-3q4q</a> .
Universal Design for Underserved Populations: Person-Centered, Recovery-Oriented and Trauma Informed	Journal	Trauma-informed design focus. The first document I've seen that discusses TIC as "universal design". Very comprehensive article. The principles of TIC include: understanding trauma and its impact; promoting safety; ensuring cultural competence, establishing trusting relationships; supporting service- user choice, control, and autonomy; sharing power and governance; integrating care; acknowledging that healing occurs in the context of respectful relationships; promoting recovery, and addressing secondary traumatization and promoting self-care.	Bassuk, Ellen L, Rachel E. Latta, Robert Sember, Sheela Raj Richard. 2017. "Universal Design for Underserved Populatio Person-Centered, Recovery-Oriented and Trauma Informe Health Care for the Poor and Underserved 28 (3). Johns Ho University Press: 896-914. doi:10.1353/hpu.2017.0087
Socio-technical systems: From		Lots of discussion about multi-disciplinary work and applying overarching themes to process. No definitions, BUT - could be a good source material for definition of trauma-informed design practice. This	Baxter, Gordon, and Ian Sommerville. 2011. "Socio-Techni

Figure 12. Thematic Coding Process

The themes that emerged were: experience or culturally specific perspectives, foundational knowledge of trauma and storytelling about experiences, design-specific trauma resources and related frameworks, extractive qualities of design, empowerment in communities, and presence of trauma-informed practices in other fields. These themes were not only used as a contextual and literature review, but were the basis of design activities and outputs throughout the research process. In particular, I formed a four-stage process for integration of theory and practice as shown in Figure 13 below.

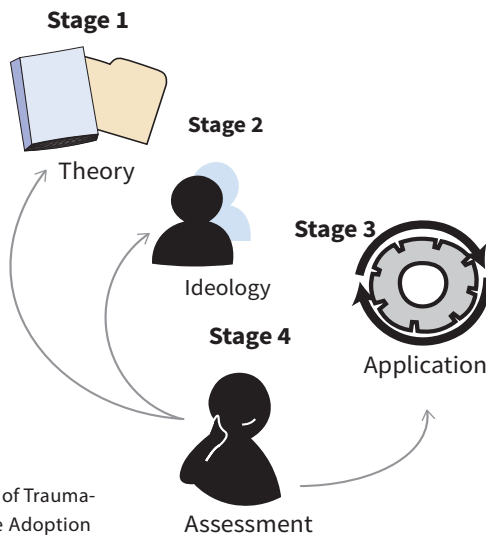


Figure 13. Stages of Trauma-Informed Practice Adoption

This model proposes four stages for praxis that move from theory into action. These stages are fluid and allow the practitioner to return to previous stages as needed. Stage 1 is “Theory” which emphasizes the need to learn foundational information about trauma, its impact, and how it manifests in everyday life. Stage 2 is “Ideology” which refers to the designer’s ability to engage in reflexive design practice and understand the context of their projects more deeply. Stage 3 is “Application,” referring to the tangible activities employed by designers that support a trauma-informed approach. Stage 4 is “Assessment,” which encourages an ongoing process of action and reflection. This differs from a traditional design practice model in that it emphasizes the designer’s personal process rather than the process used in a specific product or process.

## Results of Qualitative Research

### Phase 1 - Observation & Reflection

This phase consisted of dialogue with the Convergence Executive Director, shadowing her in meetings with clients and stakeholders, and reviewing existing Convergence materials. These activities aimed to understand the baseline practice and values of Convergence both in theory and in practice. Within those activities there were opportunities for collaboration and will be explored in the discussion below. The following table shows the actual timeline of activities that were realized.

<b>PHASE 1 RESEARCH ACTIVITIES WITH TIMELINE</b>	
<b>Article Review &amp; Coding</b>	September - October 2021
<b>Observation through Conversation</b>	September 2021 - January 2022
<b>Observation through Collaboration</b>	November 2021
<b>Transcript Review &amp; Discussion</b>	December 2021 - January 2022

Figure 14. Research Activities with Timeline

Observations and interactions were tracked by documenting themes and outcomes of each instance. More detailed notes were kept on individual meeting notes pages so the summarized notes were added to track themes. The majority of interactions took place with Convergence's Executive Director, Mindy Faber due to the small size of the core team at Convergence. The main types of interaction were email and virtual meetings. Emails were only tracked if a key decision was made during the communication and did not include tracking for emails to plan logistics. The document below shows an example of this document while the full document can be viewed in Appendix C.

Date	Type of Comm.	Subject	Notes
9/1/21	Email	Initial outreach	<ul style="list-style-type: none"> <li>Receptive, asked for meeting</li> <li>Present: Mindy Faber and Margaret Conway</li> <li>Various youth development projects and some school-based (but not a lot)</li> <li>With one client, lots of focus on "youth in care" (foster care, residential tx, secure care)</li> <li>Would like more experience/training on interacting and speaking to this specific population</li> <li>Feeling a bit nervous</li> <li>Lots of work with Youth in Care mentors (workshops, focus groups, trainings, co-design)</li> <li>Mentors are employees of client</li> <li>Discussed "digital attilfer" - I will look up</li> <li>Interested in exploring what a partnership could look like</li> </ul>
9/8/21	Meeting	First meeting	<ul style="list-style-type: none"> <li>Present: Mindy Faber</li> <li>Possibility of meeting SpyHop (partner) but has to ask them first</li> <li>Discussed more what this could look like</li> <li>Still somewhat vague for everybody (including me)</li> <li>Mindy reports a strong relationship with SpyHop and that she has been working with them on evaluation and expanding their data collection and reporting tools.</li> <li>Did a series of workshops to co-design the reporting tools, but the use (reporting %) is not as high as they would like. Mainly 1 well-established mentor.</li> <li>Discussion about why this might be. (Busy, forget, don't want to, etc.)</li> <li>I heard Mindy speaking about her desire to focus on strengths despite challenge and I shared a resource with her about this from a child development perspective.</li> </ul>
10/1/21	Meeting	Follow-up and Planning 1	<ul style="list-style-type: none"> <li>Present: Mindy Faber and Adam Sherlock</li> <li>Discussed the Sending Messages program and Adam's view of the work</li> <li>Mindy and Adam clearly have ongoing relationship (professional)</li> <li>Mindy shows lots of active listening toward Adam. Very respectfully and mindful about his time.</li> <li>Adam is currently in a supervisory role but misses working with the students/youth</li> <li>Adam is interested in the TI project and OK with me being involved</li> </ul>
10/18/21	Meeting	Client intro	

Figure 15. Observation Data

Another method of observation and exploration was through analysis of Convergence's existing Medium publications. These publications provided a more natural, self-directed look into their practice. Using a platform such as Medium, Convergence is able to share details, thoughts, and takeaways about their work with clients and as a team. These articles provided me with more details to find patterns in Convergence's design approach. The below image shows a sample of the work and the entire document can be seen in Appendix B.

Theme	Frequency	Implications	Key Quotes	Connect to Workshop/Observation Themes
Engaging participation	26	<ul style="list-style-type: none"> <li>They are very intentional about how they engage with clients and stakeholders. (How they conduct activities)</li> <li>This is an organizational value</li> <li>I see the site as related to sharing that their work with others - open source materials that they create</li> </ul>	<ul style="list-style-type: none"> <li>"We are walking the walk of a CoP (community of practice), we are sourcing opinions, strategies, and approaches from the members themselves." (CoP Article)</li> <li>"At Convergence, we seek to create learning experiences that empower and motivate all people to be producers and participants, not just those who feel they have no choice but to speak up. We believe that participatory agency, or the sense that adding your voice to civic conversation (in whatever way you choose), will shape you and your community for the better. It is one of the most critical dispositions needed to navigate our current context, from politics to the workforce." (Designing for participatory agency)</li> <li>"The trust is, however, that good participatory evaluation work can be meaningful, engaging, and even, dare we say, fun. This is precisely what we at Convergence Design Lab want to do." (Mat lib)</li> <li>"In the end, this playful and participatory evaluation design process not only made us more accountable as evaluators, but it helped strengthen SpyHop's community of practice"</li> </ul>	<ul style="list-style-type: none"> <li>This value connects to empowerment, voice, and from the prototype</li> <li>I see this crossing over to their work in a somewhat indirect way. Since they can't directly reinvent the programs, they will have to teach TI inter-empowerment skills to mentors, so they can banner to the work.</li> </ul>
Personality/Qualities	15	<ul style="list-style-type: none"> <li>They are a new org so maybe this is something that they need to focus on most right now</li> <li>This may be related to why they are willing to work with me</li> <li>Putting words to some of their practices? (Assessing org identity?)</li> <li>- Some of these are hard to define/show - like authenticity</li> </ul>	<ul style="list-style-type: none"> <li>"For me, 'personality' is the organization's culture: its voice, its quirks and nuances. Personality is what endears them to their communities and affirms their good work." (Design+personality)</li> <li>"How do we ensure that our evaluation is authentic?" (Mat lib)</li> <li>"A commitment to CHANGE drives a design process through COLLECTIVE IMAGINATION." (new ways of learning)</li> <li>"When these connections, networks and collective mindsets take root, learning communities are empowered to overcome challenges and innovate new solutions for the present and future." (new ways of learning)</li> <li>"One of the things that I love about working with Convergence Design Lab is that we practice alignment all the time." (Pictures of success)</li> <li>"Convergence's Director of Learning, Margaret Conway, spent an admirable amount of time ensuring that the Mutual template would work seamlessly, and it did!" (Mat lib)</li> <li>"When we decided to launch Convergence Design Lab as our own non-run-for-profit independent research and design agency, we did so from a place of hope." (Hope Street)</li> </ul>	<ul style="list-style-type: none"> <li>This is challenging to show as well the principles because a lot of personality traits - as stated here - difficult to define and show</li> <li>I think there could be opportunity here to integrate trauma-informed skills and connect it back to Core and client values.</li> <li>Start from a strengths-based place with what they already doing and evaluate in a way that finds (1) the gaps in org practices and (2) what are the gaps there</li> <li>This could also include an organizational assessment that reflects on values and praxis (theory, values, a)</li> </ul>
Convergence as a team	8	<ul style="list-style-type: none"> <li>Even though this was a bit lower, this feels like a really important theme in the readings. Even though they didn't necessarily have a lot in terms of frequency on this one, there are articles (at least one) where this was the main focus. Or a highly mentioned secondary focus within an article</li> <li>It makes sense to me that they would highlight how they work as a team - engaging participation and personality/qualities really link back to this as well as they prioritize a good relationship in the 8 team.</li> </ul>		<ul style="list-style-type: none"> <li>The ongoing practice of reflexivity they do is really important and a huge part of TI design</li> <li>If only there were a way to evaluate this and have some metrics, but the closest current asset:</li> </ul>

Figure 16. Convergence Article Analysis

As seen in the document, there were four main themes that emerged from the documents: engaging participation, personality/qualities, Convergence as a team, and work with clients. I found these themes by reading ten articles written by four authors. While I read the articles, I took note of the topics within the articles and then named the four main themes based on these topics.

The first theme, engaging participation, means that Convergence uses participatory methods in their research and evaluation process. This is also a theme that is shared on their website as a main staple of working with Convergence and the way that their services are described. In a report about their Theory of Action MadLibs method of evaluation and research, Convergence wrote, "The truth is, however, that good participatory evaluation work can be meaningful, engaging, and even, dare we say, fun. This is precisely what we at Convergence Design Lab set out to do" (Faber 2020). Key to this statement in relation to the larger picture is the sense that the work of interviewing, gathering information, and evaluating programs can be participatory in a way that engages participants. It also stresses that participatory methods make the work better and evaluations richer.

The second theme was personality/qualities, which includes discussion of organizational traits and qualities. For Convergence, the qualities of an organization appear to be as important as the work. In one article they ask, "How do we ensure that our evaluation is authentic?" (Faber 2020) This question was raised in relation to Convergence's evaluation work with clients. Discussing how this can apply with clients, Convergence writes, "When these connections, networks and collective mindsets take root, learning communities are empowered to overcome challenges and innovate new solutions for the present and future." (2020) While some aspects of personality and organizational qualities are difficult to observe and document, it is central to Convergence's approach to the work that they understand that emotion and play are part of the work – not a bonus to it.

The third theme within the articles is Convergence as a team. This refers to the focus on Convergence Design Lab as its own entity that works within the universe of their clients and the education/learning system. It was noteworthy within the articles that Convergence takes pride in their internal organizational culture, highlighting the contributions of team members, writing about their foundational

values, and their regular practice of alignment. A member of the Convergence staff wrote, "One of the things that I love about working with Convergence Design Lab is that we practice alignment all the time." (Watson 2021) Convergence also writes extensively about their community of practice – both within their team and with their clients – which supports the alignment conversations described above.

The fourth theme is the importance of creating strong client relationships. Convergence "get[s] to look at data, reflect back what we see, measure outcomes, and support the messy work of sorting out organizational priorities" (Watson 2021). This theme is important to highlight because it brings focus to the crux of the work that Convergence does – client-based program evaluation and learning design. To this theme, one important quote states, "At Convergence, we think of participatory design as research as that good form - providing the exercises, processes, routines and practices that enable our partners to fully flex their muscles of hope and imagination." (2020) Although short and generalized, this quote encompasses the cumulative effect of the themes discussed here. Through strong relationships with their clients, Convergence is able to implement a process with their clients that is values-based, engaging, and informative so the information they glean is based in fact and so that they are able to build long-lasting professional relationships with their clients.

The reading and analysis of Convergence's public-facing communication was useful to this research in understanding the baseline practice that Convergence uses, but also resulted in finding alignment between the Trauma-Informed principles as laid out by SAMHSA as shown in Figure 17 below. This is a clear indication that confirms an assumption about Convergence: many designers in social impact spaces intuitively use trauma-informed practices in their work and these practices are often known by other terms. Through the work presented by Convergence, they are in tune with the social emotional needs of clients and other stakeholders. Contrary to what we may typically understand as social emotional needs, this means that Convergence intrinsically understands that participants in design research activities may provide more valuable information through playful, creative, and transparent methods. This, in turn, helps Convergence provide valuable insights to their clients.







<b>Convergence Article Themes &amp; Alignment with Trauma-Informed Principles</b>						
						
<i>Engaging Participation</i>	✓			✓	✓	
<i>Personality/Qualities</i>		✓		✓	✓	
<i>Convergence as a Team</i>	✓	✓	✓			
<i>Client Relationship</i>	✓	✓	✓	✓	✓	✓

Figure 17. Convergence Themes Aligned with Trauma-Informed Principles

Another major research activity during Phase 1 was observation through collaboration and shadowing. The overall purpose of this activity was to more deeply understand Convergence’s baseline practice. This began through conversations with Executive Director, Mindy Faber, for relationship-building and understanding purposes.

One major finding through these conversations and the rapport-building process with Convergence confirmed my above assumptions based on their writing, but with more nuance. Faber shared Convergence’s participatory methods as connected to their organizational values, highlighting that learner-centered design and program evaluation was their main focus. To this end, Faber reported that Convergence was looking for additional skill-building around engaging with stakeholders and to explore trauma-informed design as a possible addition to Convergence’s growth process in client and learner engagement.

One key observation through this phase was the strong relationship between Mindy Faber and their community partner. This is a long-held relationship that has been built for over 5 years – before Convergence Design Lab existed in its current form. Convergence now serves as a consultant for SpyHop’s evaluation process

and writes extensive reports on organizational functioning including strengths and recommendations. Faber was attuned to the professional and social emotional needs of the staff and was able to discuss the more difficult aspects of their jobs without hesitation and without any apparent pushback from the staff member. Faber also uses a strengths-based approach in approach and communication with Convergence clients.

The main observed challenge related to Faber's self-reported need for additional exposure to frontline work with youth in care. In this case, the partner is in a different state and much of the work happens virtually. Access has also been severely limited because of COVID. Additionally, Convergence must diplomatically manage their relationship with SpyHop and other related stakeholders to maintain a strong working relationship. To that end, Convergence takes a lot of care when contacting frontline workers in order to respect their time and privacy as well as to respect SpyHop's relationship with frontline workers for youth in care.

Part of the observation included collaborative interview preparation for a stakeholder interview. This was done with verbal permission from the client. For the purposes of this research, the primary goal was to observe Convergence's approach to stakeholder interviews, a common practice at Convergence. This interview was conducted with a frontline worker for youth in care. Through this process, we integrated concepts of trauma-informed interviewing with explicit coding for the six principles in the protocol.

This process provided observational and process insights about integrating trauma-informed principles. In observing Faber's engagement with the stakeholder, she was comfortable with the frontline worker as they were interviewed and had a calm and welcoming demeanor as she spoke. Faber clearly understood the SpyHop program under evaluation and intuitively integrated this understanding into the conversation. I observed the participant to be comfortable in the conversation and enthusiastic about the program.

The protocol coding process as presented below could be a useful activity for learning about trauma-informed principles. However, I observed that integration of the principles must be prefaced by more intensive conversations about theory



of trauma-informed approaches. While I had discussed the principles with Faber during our conversations throughout this research phase, there was not a formalized process of learning or sharing of resources to support learning. Engagement with the principles at this stage was primarily led by me as I attempted to use this as a hands-on way of learning about the principles. Therefore, I was not able to observe Faber’s understanding of the principles nor was there evidence to make strong conclusions about the usefulness of this process outside of introducing Faber to the principles in a more formal way. Figure 18 below shows a sample of the resulting protocol with coding as well as an inset of the relevant principles and implementation domains.

Interview Protocol and Script:  
Co-created and implemented with partner

**Interview Protocol**

[Space here for pre-interview welcome as the interviewee enters]

First and foremost we would like to thank you for speaking with us today - we know your days are very busy so we really appreciate your time. This should take around 45 minutes, but no more than an hour.

We want to take a couple minutes to introduce ourselves and talk about why we’re here today, but first we would like to ask your permission to record this interview. This will help us review the conversation more accurately as we move forward with the evaluation process. **You can ask us to stop recording at any time.** Do we have your permission to record?

Can you verbally state that you give consent to be recorded?

I am [redacted] and the Executive Director of [redacted]. We have been serving as [redacted]’s external evaluator since 2017 but I have been familiar with their work since 2006. My background is in [redacted]. While we have studied [redacted]’s core programs that take place at its facility, we have only just begun to study [redacted]. We are producing our biannual evaluation report that will include a section on [redacted]. This will come out in March. Some of what we discuss today may be included in this report. However, we will not identify you by name as we work to maintain confidentiality. Consistent with the ethics guidelines for confidentiality that researchers like us adhere to, we will not be directly sharing the transcript of this interview with anyone. I am really eager to learn from you.

I’m Sarah Miles from the University of Michigan. I am originally from Michigan, but I worked for almost 10 years as a social worker in New York City specializing in child and adolescent mental health. I am currently in the Master of Design program focusing on trauma-informed approaches to design and community-engaged projects. I have been working with [redacted] to connect my work at U-M, find ways to integrate trauma-informed approaches into design, and to support the work they are doing. Being with you and [redacted] in this interview is part of that work that I’m doing, but since the focus of my work is on the design process specifically I will not be quoting you or using your name in any of my work or written documents.

Before we tell you more about the purpose of the interview, do you have any questions about our background or anything else we just shared?

We want to quickly share the purpose of this research we are going. Then we want to ask questions about your background and role at [redacted]. After that we will explore into your perspectives and experiences regarding [redacted]. And finally we would like to hear your thoughts on the impact of the program and provide opportunity to share opportunities for improvement. Then we can wrap up. Hand over to Sarah... The purpose of this interview is to get to know you, understand more about your role at Decker Lake, and to talk to you about the impact of [redacted] program at [redacted]. [redacted] has asked us to evaluate the [redacted] program so it can grow and improve. As someone who has been working at [redacted], we really feel that you have important insights about the needs of the youth, the way that [redacted] operates, and the impact of [redacted].


You are also the expert on your own life, experiences, and thoughts so we want you to feel comfortable bringing all of that to this conversation. We want your honest answers because we know that talking to will give us valuable information about the work of [redacted]. Although [redacted] has asked us to evaluate their program, we are also committed to honest feedback and open conversation so we want to know what you really think.

- Program Evaluation Interview**  
*Environmental Prep and Protocol*
- Six Principles of a Trauma-Informed Approach:
1. Safety
  2. Trustworthiness & Transparency
  3. Peer Support
  4. Collaboration & Mutuality
  5. Empowerment, Voice, & Choice
  6. Cultural, Historical, & Gender Issues
- Source: SAMHSA 2014
- Implementation Domains:
- Evaluation
  - Progress Monitoring & Quality Assessment
- Source: SAMHSA 2014


- Interview Tone and approach:
- Strengths-based
  - Transparency
  - Honest discovery
  - Reflective and responsive

 **Sarah Miles**  
4:27 PM Nov 15

Safety

 **Sarah Miles**  
4:25 PM Nov 15

Trustworthiness & Transparency

 **Sarah Miles**  
4:26 PM Nov 15

Empowerment, Voice, & Choice

 **Sarah Miles**  
4:26 PM Nov 15

Empowerment, Voice, & Choice

 **Sarah Miles**  
4:27 PM Nov 15

Collaboration & Mutuality

Figure 18. Interview Protocol with Trauma-Informed Coding

The final activity in this phase was a review of two focus group transcripts followed by discussion with Faber about the contents. The context of these focus groups is also within the youth in care program that Convergence has been working with to evaluate. The focus groups were conducted by SpyHop employees with permission to work directly with youth in secure care facilities. This was not possible for Convergence staff due to sensitivity of access to direct interactions with the youth as well as restrictions from COVID-19 so the SpyHop employees were trained by Convergence in how to conduct a focus group. The youth were adolescents and teenagers and there were 5-7 participants in each group.

This process was not a formal qualitative analysis of the transcript with coding, but rather a review of the transcripts and discussion with Faber about the themes and approaches we heard. For this research, the transcript review was useful for understanding Convergence's process more clearly. In this case, Convergence trained service providers to conduct the focus group due to lack of access. This is part of an ongoing effort on the part of Convergence to use a human- and youth-centered approach in their work. An approach like this comes with some risks and challenges – primarily that Convergence is not able to control the content and direct the conversation toward information that will go in the evaluation. While the workers that conducted the focus groups had a more naturalized conversation with the youth, they did not necessarily have evaluation in mind during the conversation. At the same time, this more naturalized way of conducting focus groups helped Convergence make discoveries they may not have considered without this activity.

## Phase 2 - Planning & Intervention

The primary activity during Phase 2 was a series of workshops with Convergence staff. There were three goals of these workshops: to provide professional development to the Convergence team about trauma-informed approaches, to discuss the connection between trauma-informed principles and design, and to obtain feedback and information from the Convergence team about the process and feasibility. These workshops were all conducted remotely and recorded in February and March 2022 and data was collected by coding the transcripts and through observation. The workshop topics were based on the cumulative knowledge of

previous work. For the first workshop, the topic was chosen based on a request from Convergence, but the second and third topics were based on outcomes from the previous discussion.

## Workshop 1

The first workshop took place on February 2nd, 2022 and was scheduled for an hour. Convergence’s Executive Director, Mindy Faber, requested that the workshop be centered around building knowledge around trauma-informed concepts. However, the request centered on having interactive and discussion-based activities to more deeply understand the concepts and how they apply to Convergence’s work. Due to the short timeframe within which to complete the workshop, a pre-session information document was created to summarize foundational information and create a common foundation of knowledge for the staff. The document can be viewed in Appendix A.

In order to build on the knowledge from the pre-session information document, I created a mural board (below) to elicit feedback, input, and conversation from Convergence staff. The goal of the workshop was for to understand how Convergence staff perceived and understood the concepts, what they needed more information about, and how they envisioned future use of the concepts. A portion of the workshop was also spent getting to know the participants as not everyone had met or spoke extensively. The interactive portions of the board asked participants to assign qualities to the principles and then rank them by priority for each individual staff member and the planning portion of the board was planned to create next steps. Next steps were not completed due to time limits.

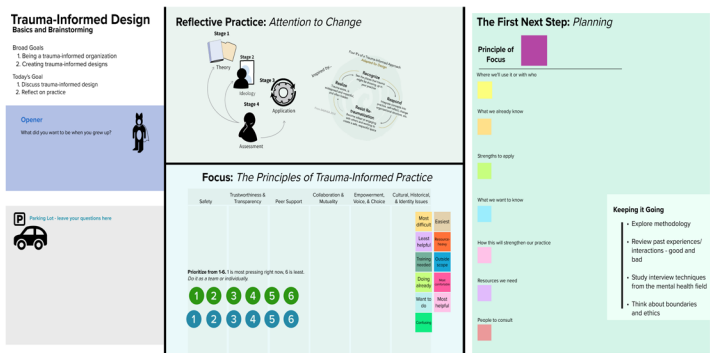


Figure 19. Mural Board for Workshop 1

The following image displays the finished mural board from the interactive portion of the workshop.

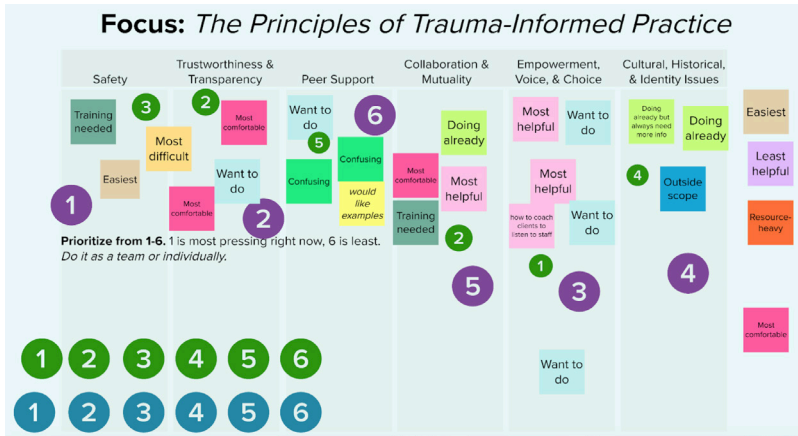


Figure 20. Finished Mural Board for Workshop 1

This finished board displays insightful results that, given with the fuller context of Convergence, provided a direction for next steps. First, Convergence showed an interest and level of comfort with three particular principles: trustworthiness and transparency, collaboration and mutuality, and empowerment, voice, and choice. They focused on these principles by indicating that they were already comfortable working within these, but that they were also the ones that they wanted to focus on more. Convergence staff were generally in agreement about these principles that aligned with their practice. Second, Convergence staff also had common answers to which principles were not priority at this point. Peer support and cultural, historical and identity issues were not listed as priority next steps for them. It should be noted that staff were not asked to rank principles by importance, but by their immediate understanding and applicability. Given observations as written above and data from transcripts, I do not interpret the low ranking of these principles as a lack of care about the topics themselves. Finally, Convergence were mostly confused about the principle of peer support and expressed a high level of uncertainty about the meaning of the term and connection to their work.

The transcripts from the workshops were also reviewed and coded for themes: role of consultants, unclear activity instructions, organizational strengths, developing



their values and hold that stance with the client. However, this was only theoretical and not the suggestion that Convergence take that route.

The theme related to consultancy is a key finding for the work of trauma-informed design as this has not been – to my knowledge – discussed widely in previously established work. Many designers engage community-based programming and groups through the consultancy lens. While designers frequently engage directly with the community of impact for a program, their inroad will often be as consultants. This is notable because it presents a logistical and ethical problem for consultants; they want to create impact and have strong ethical guidelines, but the survival of their professional endeavor may depend on continued relationships with clients that may not share the same values. To this end, Workshop 1 led Convergence to wonder where the line between ethical boundaries and completed work may lie.

Another key finding in this workshop was that scenarios are useful to connect the principles and skills they were learning to the work of a designer. Convergence staff wanted a step-by-step walkthrough of a scenario with how the principles would apply at each step. While this is possibly a somewhat obvious pedagogical approach, this has also not been done widely with trauma-informed design or other frameworks within design. While case studies are used for learning problem-solving and to teach methodologies, a process for integrating these into regular practice does not exist for trauma-informed design. To that end, Convergence and I planned for a second workshop to address how a case study or scenario may be used to strengthen praxis in trauma-informed design.

## Workshop 2

The second workshop in the series occurred on February 15th, 2022, two weeks after the first workshop. Based on the results from the first workshop – discussed above – the topic of the second workshop was the review of a case study with step-by-step alignment with trauma-informed principles. In order to deliver the second workshop and encourage integrative design practices, I created a set of tools to conduct case reviews for design scenarios.

Case reviews are used widely in social work and other fields to assist frontline

workers in case work and/or treatment. They are typically conducted within an interdisciplinary team that could include social workers, therapists, teachers, psychiatrists/psychologists, medical doctors, nurses, speech therapists, physical therapists, and so on. In a social work model, the primary caseworker will present the information about the case, provide recent updates, and ask for specific recommendations about the approach they should use. This is done with appropriate client notice and within HIPAA laws. In the end, the caseworker should have additional ideas, information, or insights about how to proceed with the case for stronger outcomes.

With this in mind, I created guidelines and templates to be used in the second workshop that would replicate a case review model. These tools can be reviewed in Appendix E. In order to provide an example of how to use the tools, an external scenario was used to fill out the templates. The tool included trauma-informed concepts with the goal of relating these directly to the case study. Instructions were also documented to assist in approaching the conversation with Convergence. Before the second workshop, Convergence opted to walk through the example scenario rather than prepare one from their own experiences. These materials were sent to Convergence staff two days before the workshop. After the workshop, the transcript was reviewed and coded. The image below shows emerging and continuing themes with quotes from the transcript.

In practice, the case review process provided valuable results about how this integrative approach may work in design. Although Convergence opted to use an external case study for the review process, it became clear that it was difficult to relate to the example case and did not allow Convergence more insight into a trauma-informed approach. Therefore, we adjusted during the workshop to focus on a Convergence-specific situation. This adjustment was difficult in that it did not allow for fidelity with the use of the tool because that requires preparation before the meeting. Nevertheless, Convergence staff reported that they still found the process useful. There was also feedback that presenting an example case was not helpful for Convergence staff because they felt it was distracting.

The barriers to the tools were likely to have resulted from various key issues. First, Convergence had a particularly high workload during the preparation for this workshop and could therefore have opted for an example for that reason. This is important to note because it signifies that the design process has cycles in which designers may not be able to engage in deeper reflexive team practice at all times. Therefore, it would have been helpful for this research to have created a journey map or calendar of the yearly cycles within Convergence's practice. This would have helped contextualize the preparation for this work.

Another barrier to utilizing this example in a productive way is that there are very few case examples publicly available that closely mirror the work being done at Convergence. The issues discussed during the first workshop created a very specific set of circumstances: design processes and methods, learning design, client-based, and involving inter-organizational differences between stakeholders. In looking for an example case study, I sourced from "Design for Social Innovation: Case Studies from Around the World," edited by Mariana Amatullo, Bryan Boyer, Jennifer May, and Andrew Shea (YEAR). This book contains a variety of case studies from various communities and design projects sorted by theme. Through this publication I was able to find a case study called, "Kuja Kuja: Establishing better feedback loops between refugees and humanitarian organizations," that had many similar aspects of the Convergence issues. In this case, there is a design-focused consultancy working in a refugee community to establish communication channels. However, the learning design aspect was missing from this case and I had to editorialize in some points of the case review because the information available did not contain vital details.

In the end, I found important insights about the process of a design case review. First, Convergence preferred an agency-specific approach, but was not able to provide one possibly due to time constraints. Second, it is difficult to provide a detail-rich case review on the spot so preparation is necessary. Third, the ability to perform more in-depth activities of reflexive practice may depend on the designer's work cycle so less intensive options would be helpful. Finally, the integration of concepts specific to trauma-informed design practice is helpful for the learning process, but may be distracting in regular practice and may depend on the level to





practices. Role of the designer and role of the consultant are distinct from each other in their scope and target. Role of the designer relates to how and why a designer might adopt a trauma-informed approach to practice. This is a broader look at designers across contexts while the theme related to the role of the consultant is specific to designers who work in a consultant capacity. Design framing refers to the process of making connections between pre-existing terms within design and terms from other fields. Finally, the purpose of intentional trauma-informed design practice refers to the process of designers specifically adopting trauma-informed approaches rather than a more general or broad understanding of them.

This workshop revealed more insight into how Convergence views their role as consultants – particularly with the leadership of client organizations. The first additional insight here was the internalization by Convergence staff that applying a trauma-informed lens to typical face-to-face interactions with clients is different than applying this to the outputs of the work. In other words, Convergence saw that they would apply a trauma-informed approach through their internal practice-building and interactions with clients and as a way to encourage work outputs that aligned with those values. They saw these as related, but not necessarily the same skill.

Another insight in the discussion related to the expectations of the client organization that a consultant be a neutral party that shares advice and recommendations about the organization. This is important in various ways. First, they continue to question whether it is the role of the consultant to encourage values-based solutions which the client may not have previously considered. Convergence works specifically with clients who have a social and/or educational mission so it is likely that these organizations have existing values and work approaches that guide them. Convergence wonders where their adoption of a trauma-informed approach would fit within that and whether it is appropriate to encourage with the clients at all. The staff at Convergence generally agree that they do not always have the agency within their partnerships to do this and that they would potentially face pushback if they were to encourage a new values-based approach.

Convergence shared instances from their work where various stakeholders with a client organization may discuss and perceive organizational culture and youth

services in different ways. One of the tasks that Convergence staff takes on in their consultant relationships is to essentially listen and informally mediate between the stakeholders. For instance, where the director of a program may view an issue from one point of view, the workers that deliver services may have a different and opposing perspective. One staff member shared, "They see you as their kind of paid consultant to be on their side, to, you know, to give them advice... and to be that kind of, you know, neutral person, you know. And then at the same time, I'm very cognizant and aware of the dangers of getting pulled into that situation." As this was a workshop focused on case studies, we transitioned from the pre-planned agenda to use this example as a way to integrate some of the trauma-informed principles. We discussed organizational culture and potential reasons for why leadership and frontline staff may have very different reactions to the same issue. For their part, Convergence is extremely responsive and aware of the issues of frontline workers so this was not a stretch within their practice.

The first additional theme discussed here is the role of the designer. As previously described, this theme refers to the overall role of the designer within social impact work and a trauma-informed approach specifically. This workshop contained the first explicit discussion about the specific role of the designer as a nonclinical expert in the design process who uses a supportive and holistic lens in their approach. We discussed this theme in connection with the 'end user' (or learner in this case) and in connection to face-to-face interactions with clients.

Since trauma is commonly used in a more clinical sense and because trauma-informed approaches as a term began with mental health and social services settings, Convergence designers acknowledged that they do not have the expertise in treating symptoms of trauma. However, they saw the connection between a more supportive, ethical, and holistic lens as important to social impact work with anyone, but especially people at a high risk for trauma exposure, their communities, and the frontline workers with which they engage. Additionally, they recognized that though there are parallels between design research in social impact and therapy, they should not and did not want to be expected to solve the complex emotional problems facing individuals in these settings.

The second additional insight from Workshop 2 was about framing trauma-in-

formed concepts within the specific context of the designer’s work. Through this workshop I was able to connect more terms from Convergence’s context than I was able to have done previously. Although some connection to practice-specific terms occurred during the observation phase (Phase 1), this workshop provided a more explicit 1:1 connection between the terms that Convergence prefers to use and the terms they heard throughout the process of learning about trauma-informed concepts. It should be noted that these terms are not a perfect alignment and meaning may vary depending on the context or specificities of an interaction. However, understanding even broad connections between terms is useful in contextualizing a trauma-informed approach for designers and in finding where the approach may fit in a practice environment. The table below shows a sample of these connections that were made during Workshop 2.

<b>PHASE 2: DESIGN FRAMING RESULTS</b>		
Based on information from Workshop 2 about Convergence Design Lab’s preferred phrasing, the following table is a visual representation of trauma-informed terms connected to Convergence’s preferences.		
Peer support	→	Community of practice
Trauma-Informed Design	→	Participatory design
Empowerment, Voice, & Choice	→	Participatory agency
Trauma-Informed Lens	→	Adaptive lens

Figure 23. Interpretation of terms for design

A secondary finding from the conversation about terms was that Convergence staff still struggle with the use of the term ‘trauma’. They reported that for them this term was still too clinical and individualistic. This conversation was vital to understanding the integration of trauma-informed approaches to design because it shows where to guide future iterations of a theoretical understanding about the approach itself. Referring back to the stages approach to adopting new practice presented in the literature review, this means that the first Stage – Theory – must be adapted with the team’s specific pre-existing perceptions of what trauma means. In other words, had I understood that Convergence viewed the term trauma as an individually-focused term I would have spent more energy providing

context and resources that showed a more collective-based frame of the term and approach.

Finally, Workshop 2 contained a deeper discussion about the purpose of adopting an intentional approach to trauma-informed design rather than a more theoretical one. A more intentional approach would mean that a designer uses trauma-informed principles as a guide for some – or all – of their practice and engagement strategies. A theoretical approach would be one in which the designer learns about the theory of trauma-informed design to adjust design mindset, but do not necessarily change their practices as a result. This theme was one in which challenges were still very present. Convergence is still back and forth between the first and second stages of integration (Theory and Ideology as discussed in the literature review) and moving into the Application stage (Stage 3). Therefore, the praxis elements discussed here are still in process and they still report uncertainty about what this could mean for them. In some ways, Convergence is grappling with whether they would like to change their practice in response to their learnings or not or if they would like to maintain a more theoretical stance of adoption.

### Workshop 3

Based on the expressed need for additional context and connection to Convergence-specific topics, the third workshop was a discussion around resources that everyone reviewed prior to the session. These resources were specifically related to trauma-informed approaches in education, a field that has been integrating trauma-informed approaches for much longer than design and a field that Convergence staff understand deeply.

Based on the request from Convergence and my lived experience in trauma-informed education spaces, I chose the following resources for Convergence staff to review:

- Video - A School's Journey Toward Trauma Sensitivity <https://www.youtube.com/watch?v=yvXrmi5kbi0>. This video follows and interviews teachers and administrators at a school that fully embraced a trauma-informed (which they call trauma-sensitive) approach.

- Guide - Helping Traumatized Children Learn: Creating and Advocating for Trauma-Sensitive Schools from the Trauma and Learning Policy Initiative. The Preface and Executive Summary downloaded from this link. The Preface and Executive Summary from the second volume of a guide that supports schools in becoming trauma-informed from a building-wide scope.
- Article - Understanding Trauma-Informed Education from Edutopia. Accessed at this link. A testimonial and advice from a principal that has been acknowledged for their implementation of trauma-informed principles in their school.

The agenda of this session was straightforward as we had a general discussion about Convergence Staff thoughts on trauma-informed education and whether they were able to make more connections to how this relates to design. Overall, this appeared to be a very helpful tool of understanding for Convergence staff. The flexibility of the conversation as a guided discussion helped address some of the more confusing points of a trauma-informed approach in nonclinical settings. The positive feedback and demonstrated understanding resulting from this workshop is an indication that it would have been helpful earlier in the process. In a sense, this workshop was a return to Stage 1 (Theory) or Stage 2 (Ideology) as a knowledge-building activity. However, this result is not surprising nor is the need to return to an earlier stage during the process of integrating trauma-informed concepts into practice. The earlier discussion about the multistage process of integrating trauma-informed approaches into design predicted that the model would be fluid and that designers would go between stages at any given point.

Figure 24 below displays themes coded from the workshop transcript with relevant quotes.

## Workshop 3 - Topic-Specific Discussion

<b>Design framing</b>	<b>Positive Youth Development</b>	<b>Community-first</b>	Safe and supportive learning environments (Integrity, Safety, emotional, identity)	Participatory agency. Voice in systems you're a part of. Cultivating within the learning.	Community having "Digital Third Spaces". Best Challenge and using digital spaces for learning and teaching.	<b>Principles of gaming</b>
<b>Integrative skills</b>	Discord. Using youth platforms to encourage ownership.	Youth-led pedagogy to cultivate youth leadership	Connecting the principles back to the learner. What's happening with the learner?	<b>Trauma as a term</b>	Trauma-sensitive vs trauma-informed. Sensitive says more	Moving the term in meaning and in understanding from psychological to social framing.
<b>Purpose of intentional TIDP</b>	Positioning ourselves as experts in learning design with trauma-informed as part of it	<b>Scenarios as a practice-building tool</b>	Revisit the principles and find more examples as part of our COMMUNITY OF PRACTICE.			
<b>Macro/Organizational</b>	Systems-based thinking. Seeing the forest through the trees.	<b>Role of consultants</b>	In consulting, [potential of] stepping back and helping clients see the larger picture. An innovative learning model isn't enough even within resource-constrained settings.			

Figure 24. Coded themes for workshop 2

This workshop's final results provided vital insights into the work of trauma-informed design. First, a designer or studio may ultimately have to decide whether a conscious and intentional adoption of this approach aligns with their capacity, motivation, and need. With remaining doubt about the integration of these terms, it is possible that Convergence may decide that they will take a more theoretical route of adoption as discussed above. At the time of writing this document, there is no indication that Convergence regrets their involvement in the project or that they feel time spent learning about this approach was a waste of time. That being said, there is no indication that Convergence will decide to maintain a long-term commitment to this approach either.

Second, designers who are knowledgeable and experienced in trauma-informed approaches must continue to explore the conversation around terminology. The nonclinical and popular understandings of trauma remain a barrier to a fully integrated praxis. In all three workshops, Convergence showed understanding of the terms and were open to expanding their previous conceptions of what trauma was or what it meant to be trauma-informed. However, there was remaining doubt about the term. Based on the cumulative conversations and workshops, I believe that the hesitation here is based on Convergence's uncertainty about how to be trauma-informed and whether they feel prepared to convey this messaging to clients and other external stakeholders. This is further complicated by the fact that

there is currently no way of assessing progress of adopting a trauma-informed approach and no governing entity to support designers in the process or to hold them accountable.

Finally, there was more discussion about framing concepts within design and in the context of Convergence’s work focus. The table below shows an expanded list of terms that were discovered during this workshop.

<b>PHASE 2: DESIGN FRAMING RESULTS (EXPANDED)</b>		
<b>Based on information from Workshops 2 and 3 about Convergence Design Lab’s preferred phrasing, the following table is a visual representation of trauma-informed terms connected to Convergence’s preferences.</b>		
Peer support	→	Community of practice
Trauma-Informed Design	→	Participatory design
Empowerment, voice, & choice	→	Participatory agency
Trauma-Informed lens	→	Adaptive lens
Strengths-based	→	Positive youth development
Person-centered	→	Community-first
Trauma-informed lens	→	Safe & supportive learning

Figure 25. Design framing results (expanded)

In summary, Phase 2 in this research had two purposes. First, I aimed to test the implementation of trauma-informed design praxis tools and to receive feedback about the feasibility of this approach in design. Second, Convergence participated in the activities in order to learn more about a trauma-informed approach to design and whether it was something they could embrace as a group. This phase provided a wealth of information about how a trauma-informed approach is both understood by designers and about whether it is possible within a design context.

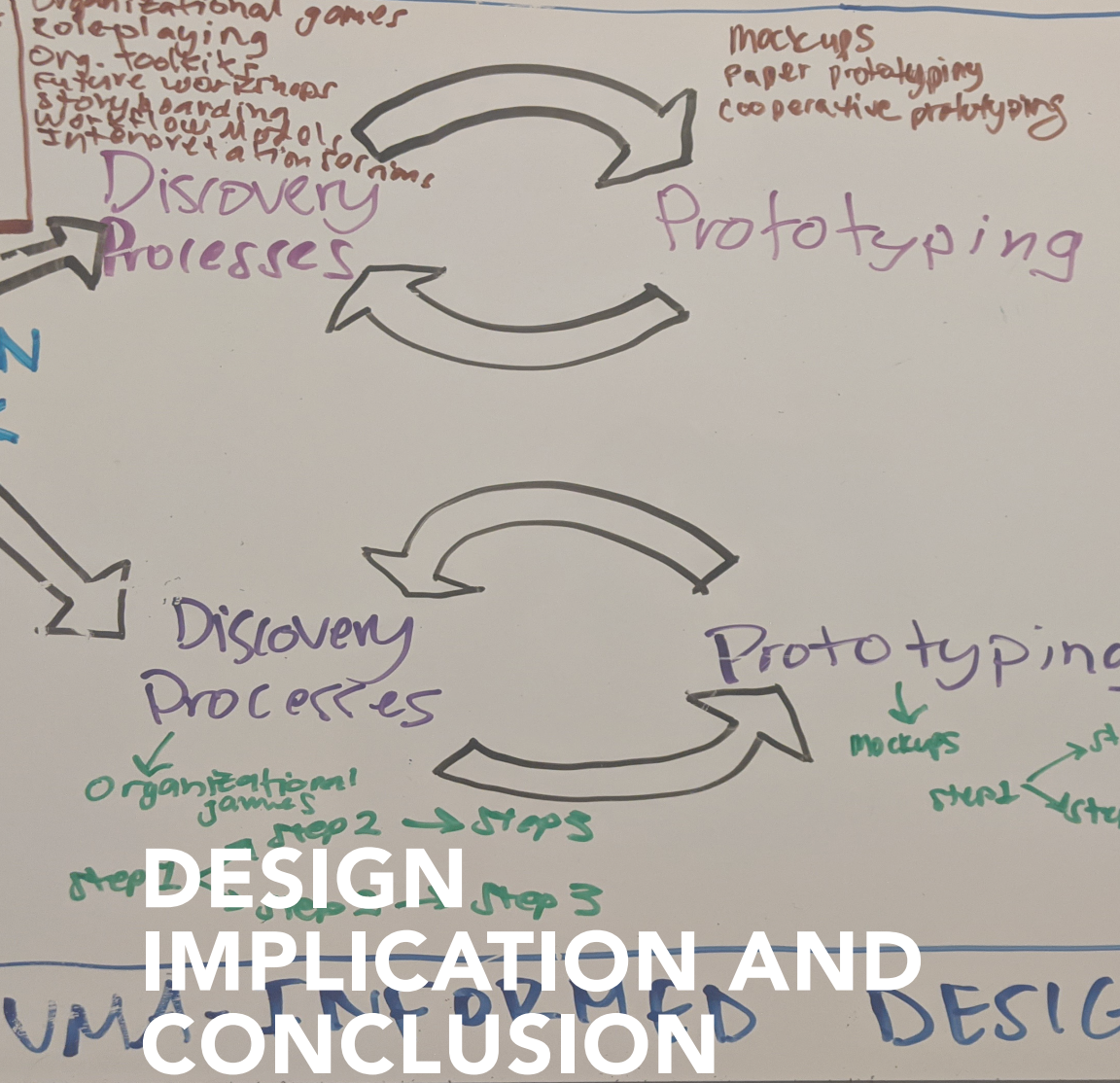
### Phase 3 - Reflection & Assessment

The context of the research presented here was such that it required ongoing assessment and reflection in order to have responsive and useful activities for my



partners at Convergence Design Lab. Because of this, Phase 3 was not a distinct phase within the research process. Rather, it was an ever-present part of the processes and activities within Phase 2. As discussed extensively above, the workshop series was designed to be responsive to the outcomes of the previous work in order to create fluidity and learning for the designers. I reviewed and analyzed the data from the observation phase to create materials and activities for Workshop 1, I then used the cumulative understanding of Convergence's needs to create the agenda and tools for Workshop 2, and attempted to fill gaps in learning for Workshop 3. As I implemented the research process outlined in Methodologies and Methods, it became apparent that the third phase was occurring alongside the others.

Still, there are important takeaways from this process to guide future designers in trauma-informed design praxis adoption. First, if the terminology of trauma-informed approaches is unfamiliar to the design, they will need to be intentional about their learning process and continuously reflect on whether emerging terms align with their practice. As it stands both anecdotally and in the context of this case study, the integrative terms related to trauma-informed design have not settled into the consciousness of most designers. This may require designers to reflect on whether they want to continue with the process. Second, since reflection and assessment of their learning and adoption happens continuously throughout the process it is almost certain that they will move fluidly between stages of learning and adoption. The process of adopting a new practice approach will not be linear, especially considering that trauma-informed design is an emerging form of practice. Finally, there are currently few case studies that directly reflect the adoption of trauma-informed design praxis so designers hoping to adopt the approach will be providing valuable insights for their peers.



### Implications for Design Practice

The design research described here examined the potential for a trauma-informed approach to design practice that could go beyond theory and into action. This focus on praxis could support a clear bridge between mental health fields and social impact design. No one field can solve any of our wicked problems in isolation and finding common ground through an action-oriented, ethical, and inclusive approach could support these efforts. Through this case study with Convergence Design Lab, this research is a beginning of putting theory into action. However,

there are some important implications for design and future work.

First, trauma-informed practices are feasible in design, but there is still room for growth in defining terms and envisioning the role of design. Integration of the term trauma-informed in design is still in its early stages and the understanding of trauma as a term comes largely from other fields. Based on observations of this conversation in design and the present case study, there is enough evidence to show that the term remains polarizing in design.

As discussed in this document, trauma is a highly stigmatized term because it is seen as clinical and anxiety-provoking to many outside of mental health. From this work it appears that designers feel unprepared to declare themselves as trauma-informed because they do not have the clinical perspective and do not yet see the approach as a feasible or appropriate practice in design. There are also implications of historical and generational abuse by clinical and state entities that may create resistance in community-based design spaces. However, even within clinical settings trauma-informed practices are not seen as solely driven by clinical practitioners. Many professionals in administration, security, and support services are also encouraged to adopt trauma-informed approaches to their work in order to create an all around supportive environment for staff and clients. Therefore, design as a field is fully capable of embracing trauma-informed approaches – especially for designers that work in social impact settings.

Second, designers who choose social impact want to create change and approaches like trauma-informed design practice can help organize, start discussions, or acknowledge strengths. As expected, it is my belief that designers who choose to work in social impact spaces have true intentions of creating positive change. I also believe that many of them already possess the skills to engage in a trauma-informed manner – whether innately, through training, or from lived experience. As designers, moving toward intentional approaches to ethical engagement could pose a challenge because these social theories are not commonly taught in design education. Understanding the strengths of designers and people who want to do good is a vital place to start in making change in the field.

Because social designers often already use approaches such as trauma-informed

design practice in their work, an intentional and concrete pathway to practice could serve as a way to organize and have important organizational conversations about practice values and strengths. While the ultimate goal of adopting new approaches is to improve the way we practice, the act of reflecting on existing practices, pointing out strengths to build on, and areas for growth is an important part of the process. Starting the pathway to trauma-informed practice could direct the conversations and reflection toward a more intentional approach to overall practice before even integrating new skills and knowledge. This process could also help practitioners decide whether this is an approach they want to pursue.

Third, trauma-informed practices are a good fit for design, but multidisciplinary is key. Designers in social impact are well-poised to integrate trauma-informed learnings into their practice, but it must be informed by other disciplines. There are many ways to address the wicked problems we face as a society and various disciplines are working to find appropriate solutions. Each of these disciplines teaches its practitioners specific skills that help them better do their work. Designers apply innovative approaches to research and problem-solving that help distinguish them from other practitioners and are perfectly poised to lead the task of using an integrative approach to the work of addressing wicked problems.

The integrative approach is not altogether new to design as engineering, architecture, interior design, and other disciplines have long collaborated on projects whether they had commercial or social aims. This allowed projects to be completed using the skills that each discipline allows. The use of skills from other disciplines stands true with the introduction of skills specific to mental health practitioners, advocacy, activists, and others that have important skills of engagement cultivated over time. Therefore, as designers expand their reach within social impact it is vital that they collaborate with and learn from fields with these specific skills.

Finally, with lack of practice examples, we need to collaborate and share strategies because designers of all training backgrounds are using trauma-informed design. One major challenge in the present work was to provide design partners with examples on how other designers have integrated trauma-informed principles into their everyday practice. This contrasts with an important finding here that case ex-

amples help designers more clearly understand how to become trauma-informed. Therefore, we must create mechanisms in which trauma-informed designers can share their experiences with others.

Although the conversation around becoming a trauma-informed designer is relatively new, it is likely that there are clear examples of how designers are trauma-informed in their work and how they are moving more intentionally into this space. As a collaborative and practice-oriented field, it is vital that designers share this work in an effort to create more examples for designers that want to learn more. In this emerging conversation, sharing these examples is useful to provide examples of best practice, discuss the challenges or doubts, and allow others to learn from missteps.

In the end, social designers have decisions they must make in the process of becoming trauma-informed. First, they should attempt to reflect on their personal and professional values within their practice. Before making significant changes to their practice, it would be useful for designers to think about what their practice values are and whether an approach like trauma-informed practice is appropriate for them. This is precisely the second important decision. Designers should continue to interrogate whether they feel this approach is right for them at all. If they decide to use trauma-informed practices, they should also decide how much change they will make. Will they stop at theory or move entirely through all four stages? I believe this is a personal decision and holds no moral weight on their work. Becoming trauma-informed also requires ongoing reflexive practice so designers should make decisions regarding how intensively this reflexivity will happen. Finally, designers must decide the nature of their multidisciplinary approach. Does multidisciplinary integration of trauma-informed practices require a full time staff member? Could this work be done on a contract basis or during ongoing training?

None of these decisions should carry a heavy weight on the sense of morality a designer feels about their work. As stated, the assumption is that social designers intend to make positive change with their work. The fact remains that we must – as a field – hold each other accountable and find our own benchmarks for creating processes that do not extract financial or emotional labor from participants in our work.

## Future Work

My attention and time in this work will go beyond the creation of this document. In the next phase of this work, I am creating a website of tools as used in this case study. I hope that the sharing of these resources will contribute to the collection of work being developed in trauma-informed design and in social impact design overall. In collaboration with web designer Jack Kornet, I will share the practice guide that I developed as well as lessons learned and future of the work.

I also hope that this website will support the development of a more connected multidisciplinary network of practitioners from design, mental health, medicine, architecture, engineering, community organizing, advocacy, etc. that are working toward similar goals. This should reflect the racial, ethnic, socioeconomic, gender, and identity diversity that we see out in the world.

In addition to the next steps currently being developed, I believe this work can be further developed into something that can be more easily translated into design work. First, I hope to contribute to the development of clearer benchmarks for becoming trauma-informed and that these benchmarks are driven by interdisciplinary teams. I believe that as this work continues and the network of trauma-informed designers develops, there will be more case studies that can be shared and used in skills development. I also hope that the field of design further explores a process of praxis for other approaches such as design justice.

In the long term, I believe that trauma-informed design practice is part of the larger movement of design into social impact work. As design moves further into this space, I believe that the field must reflect on its past and create clearer systems of accountability and support for practitioners. We also must continue to break down the boundaries between research and practice in design; a challenge in many services-oriented fields. Particularly in the case of social designers, it will become necessary to educate new designers on skills of human engagement and support of participant wellbeing as part of design education. While this should not change the role of the designer, it will give the designer move tools to have impact that matches their intent and to create strong and sustainable solutions to wicked problems.

## Conclusion

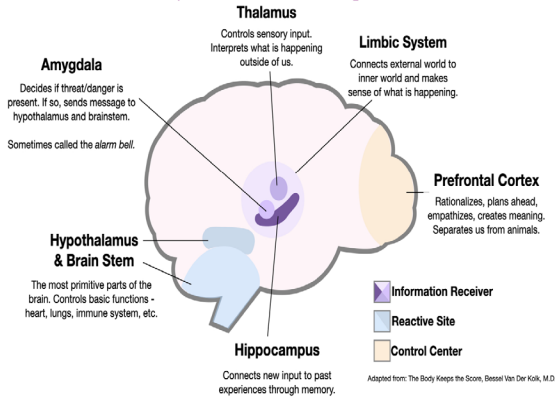
Designers have a unique toolbox of skills that allows us to address many of the wicked problems facing our world today in an innovative, creative, and human-centered way. The designers that want to devote their professional lives to this work have the ability to make great change in the world. However, changing the aims of design to address the wicked problems requires that the practitioners receive the necessary skills to support people who have been harmed by our systems and to maintain their own wellbeing in the process. Trauma-informed design is one approach that – while newly emerging in the field of design – has the potential to give designers some of these necessary skills. Drawing from social sciences and mental health fields as well as community-based practices, trauma-informed approaches have been shown to work well in nonclinical settings outside of design. By understanding the impact of trauma on our society and using skills to engage more mindfully, we can unlock strengths in relationships that we may not have seen before. Though drawing from knowledge of trauma symptoms treatment, trauma-informed approaches understand that all people – whether they call it trauma or not – are impacted by their past experiences and bring them into every space they walk into.

# Appendix A (page 1 of 4)

## Trauma-Informed Design: The Basics

### Trauma & The Brain

When we can't always control how we respond



The brain tells us how to respond to any given experience.

Information about that experience is stored in the brain and informs future responses.

We reflect on experiences and make sense of them, which helps us understand the world.

When information comes in, our brain guides the response and tells us when something is a threat

If there is a threat, our brain steps into keep us safe.

When a situation causes chronic stress or overwhelms our ability to cope, our brain might store that memory and set off alarm bells without us even realizing we feel threatened.

When designers investigate human experiences, we run the risk of reminding them of painful or adverse experiences - usually unintentionally as a consequence of the conversations we have. That's why it is vital we understand what is happening, how to minimize harmful impact, and how to support the with which people we work.

### What is TRAUMA-INFORMED and what does it mean for designers?

- Integrated into design from **social sciences** - particularly mental health and substance abuse treatment.
- Principles, guidelines, and assumptions were created by social science fields and derived from what is known to **support people who have experienced traumatic or adverse events**.
- These concepts **inform the approach of a practitioner** and are not a method of practice on their own. For example, a human-centered designer may use a trauma-informed approach.
- In other words, trauma-informed approaches are not currently methodologies in and of themselves. Therefore, **we infuse our work with trauma-informed practices, review existing methodologies, and adopt new ones as appropriate**.
- Trauma-informed approaches in design guide practitioners in strengthening their engagement with others, consider ethics in their relationships with co-creators and communities, and continually reflect on their intended vs actual impact.
- **Designers can adopt concrete skills and knowledge to become trauma-informed.**

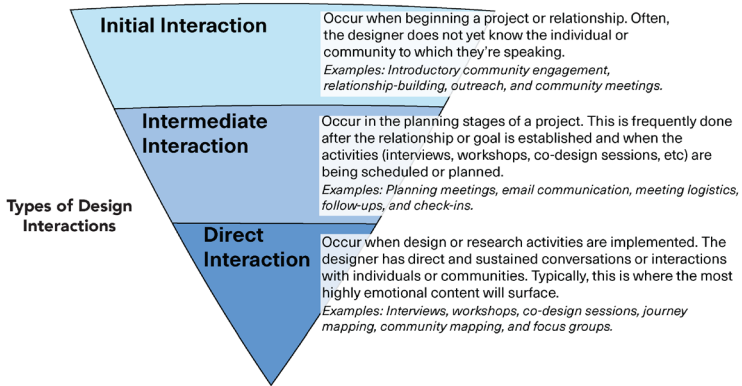
Sarah Miles, 2022



# Appendix A (page 2 of 4)

## Impact on Engagement

### Framing Responses and Reactions



How Adverse Experience Can Manifest in Design Interactions		
INITIAL	INTERMEDIATE	DIRECT
<ul style="list-style-type: none"> <li>• Distrust in outsiders</li> <li>• Skepticism of change</li> <li>• Sense of hopelessness</li> <li>• Lack of access to resources</li> <li>• Difficulty engaging or organizing</li> </ul>	<ul style="list-style-type: none"> <li>• Slow to respond to communication</li> <li>• Resistance to change</li> <li>• Withdrawing from partnership</li> <li>• Unsure about committing/partnering</li> <li>• Discomfort with transparency</li> <li>• Disorganization</li> <li>• Conflict amongst staff</li> <li>• Apparent staff burnout</li> <li>• Not following through on multiple action items</li> </ul>	<ul style="list-style-type: none"> <li>• Emotion that appears disproportionate to the context</li> <li>• Arguing, confronting, or yelling</li> <li>• Crying or tearing up</li> <li>• Leaving or walking out</li> <li>• Staying silent</li> <li>• Urge to share more personal details or traumatic experiences</li> <li>• Apathy</li> <li>• Tone of voice that you perceive as: angry, sad, avoidant, frustrated, frantic</li> <li>• Body language that you perceive as: withdrawn, closed, uncomfortable, confrontational</li> </ul>

# Appendix A (page 3 of 4)

## Trauma and Design

### Interpreting Terms and Concepts

#### Interdisciplinary Interpretation of Trauma Concepts

##### From Mental Health Fields

Source: SAMHSA, 2015

The following concepts represent research and practice done in the mental health and substance abuse fields. They broadly represent the ways in which these fields have used and implemented trauma-informed approaches.

###### Principles of a Trauma-Informed Approach

Six principles derived from addressing the needs of people exposed to adverse events.

Safety  
Trustworthiness & Transparency  
Peer Support  
Collaboration & Mutuality  
Empowerment, Voice, & Choice  
Cultural, Historical, & Identity Issues

###### Implementation Domains

Ten areas of practice in which a trauma-informed approach is applied.

Governance & Leadership  
Policy  
Physical Environment  
Engagement & Involvement  
Cross-Sector Collaboration  
Screening, Assessment, & Treatment Services  
Training & Workforce Development  
Progress Monitoring & Quality Assurance  
Financing  
Evaluation

##### Proposed Adaptation for Design

The following concepts adapted for design represent how designers may view or understand mental health concepts within their professional context. Due to the nature of the work, some of the terms needed additional adaptation. These are in bold below.

###### Trauma-Informed Values for Ethical Engagement

Six values that guide a designer's approach to community engagement.

Safety  
Trustworthiness & Transparency  
Peer Support  
Collaboration & Mutuality  
Empowerment, Voice, & Choice  
Cultural, Historical, & Identity Issues

###### Implementation Domains

Ten areas of influence for design projects and research.

Governance & Leadership  
**Approach to Research & Design Activities**  
Physical Environment  
**Community Engagement & Involvement**  
**Interdisciplinary Approach**  
**Implementation of Research & Design Activities**  
Training & Workforce Development  
Progress Monitoring & Quality Assurance  
Financing  
Evaluation

##### Examples of how to assess practice through these concepts

Scenario: Conducting a focus group to evaluate program impact

**Safety** - create a welcoming space where possible through visuals, greetings, refreshments. Ensure exits are clearly marked. Set up chairs and tables with safety and health in mind. If remote, be sure your facial expressions reflect the tone of the moment and maintain calm.

**Trustworthiness & Transparency** - tell participants/partners about any and all goals or additional benefits to you (financial, academic, professional, etc.), provide notice of changes in logistics, deliverables, or timelines as soon as you can, inform participants who will see or use their work, provide a timeline of your involvement or length of relationship.

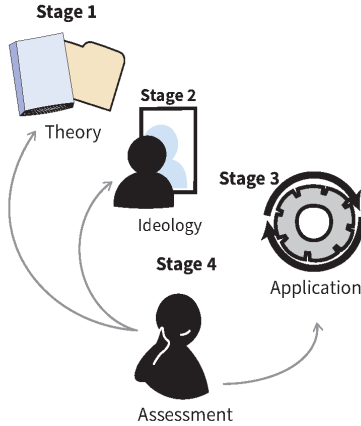
**Cultural, Historical, & Identity Issues** - reflect on your own power, privilege and bias, examine your intent and view of the community you are working with (how do you view your place there?), explore how your intent or presence may be perceived by the community you work with.

Sarah Miles, 2022

# Appendix A (page 4 of 4)

## Becoming Trauma-Informed

### A Basic Roadmap



### Stages of Practice Integration

#### Stage 1 Theory

Increase knowledge, baseline understanding of trauma concepts, and understand the role of a designer.

#### Stage 2 Ideology

The designer looks at their practice, reflect on bias and power, and look for areas of growth.

#### Stage 3 Application

Dependent on the designer and their practice. They may re-imagine engagement, edit methodologies and methods, observe and reflect on engagement style, or others.

#### Stage 4 Assessment

Asses how effective the changes were, make needed adjustments, and return to a previous stage to learn or reflect more on practice.

## Resources for More Information

### For Deeper Reading and Connection to Expertise

#### Books

*The Body Keeps the Score*  
Bessel van der Kolk

*My Grandmother's Hands*  
Resmaa Menakem

*You Are Your Best Thing*  
Tarana Burke

*Trauma Stewardship*  
Connie Burk and Laura van Dermoot Lipsky

*Holding Change*  
adrienne maree brown

*Emotional Design*  
Don Norman

*Pedagogy of the Oppressed*  
Paulo Friere

*Teaching to Transgress*  
bell hooks

#### Articles

*Social Design and Neocolonialism*  
Cinnamon L. Janzer & Lauren S. Weinstein

*Upon Opening the Black Box and Finding It Full: Exploring the Ethics in Design Practices*  
Marc Steen

*A "Social Model" of Design: Issues of Practice and Research*  
Victor Margolin and Sylvia Margolin

*White Supremacy Culture – Still Here*  
Tema Okun

*Practicing Without a License: Design Research as Psychotherapy*  
Tad Hirsch

#### Online

[Trauma-informed practice and design](#)

Kelly Ann McKercher

[Trauma-Informed Design Panel](#)  
Rachael Dietkus and Sarah Fathallah

[Social Workers Who Design](#)  
Rachael Dietkus

[White Supremacy Culture](#)  
Tema Okun

[De-colonizing Design Reader](#)  
Ramon Tejada

[Healing Justice Is How We Can Sustain Black Lives](#)  
Prentiss Hemphill

# Appendix B (page 1 of 1)

Theme	Frequency	Implications	Key Quotes	Connect to Workshop/Observation Themes
Engaging participation	26	<ul style="list-style-type: none"> <li>- They are very intentional about how they engage with clients and stakeholders. (How they conduct activities)</li> <li>- This is an organizational value</li> <li>- I see this also as related to sharing out their work with others - open source materials that they create</li> </ul>	<p>"If we are walking the walk of a CoP (community of practice), we are sourcing opinions, strategies, and approaches from the members themselves." (CoP article)</p> <p>"At Convergence, we seek to create learning experiences that empower and motivate all people to be producers and participants, not just those who feel they have no choice but to speak up. We believe that participatory agency, or the sense that adding your voice to civic conversation (in whatever way you choose), will shape you and your community for the better, is one of the most critical dispositions needed to navigate our current context, from politics to the workforce." (Designing for participatory agency)</p> <p>"the trust is, however, that good participatory evaluation work can be meaningful, engaging, and even, dare we say, fun. This is precisely what we at Convergence Design Lab set out to do." (Mad Libs)</p> <p>"In the end, this playful and participatory evaluation design process not only made us more accountable as evaluators, but it helped strengthen SpyHop's community of practice</p>	<p>- This value connects to empowerment, voice, and choice from the principles</p> <p>- I see this crossing over to their work in a somewhat indirect way. Since they can't directly interview the youth in the programs, they will have to teach TI interview/engagement skills to mentors - this may be a barrier to the work.</p>
Personality/Qualities	15	<ul style="list-style-type: none"> <li>- They are a new org so maybe this is something that they need to focus on so much right now.</li> <li>- This may be related to why they are willing to work with me. Putting words to some of their practices? Exploring org identity?</li> <li>- Some of these are hard to define/show - like authenticity</li> </ul>	<p>"For me, 'personality' is the organization's culture: its voice; its quirks and nuances. Personality is what endears them to their communities and applies their good work." (Design+personality)</p> <p>"How do we ensure that our evaluation is authentic?" (Mad Libs)</p> <p>"A commitment to CHANGE drives a design process through COLLECTIVE IMAGINATION." (new ways of learning)</p> <p>"When these connections, networks and collective mindsets take root, learning communities are empowered to overcome challenges and innovate new solutions for the present and future." (new ways of learning)</p>	<ul style="list-style-type: none"> <li>- This is challenging to show as well the principles because a lot of personality traits - as stated here - are difficult to define and show.</li> <li>- I think there could be opportunity here to integrate trauma-informed skills and connect it back to Convergence and client values.</li> <li>- Start from a strengths-based place with what they are already doing and evaluate in a way that finds: (1) what the gaps in org practice are and (2) what are the steps to get there.</li> <li>- This could also include an organizational assessment that reflects on values and praxis (theory, values, action)</li> </ul>
Convergence as a team	8	<ul style="list-style-type: none"> <li>- Even though this was a lot lower, this feels like a really important theme in the readings. Even though they didn't necessarily have a lot in terms of frequency on this one, there are articles (at least one) where this was the main focus. Or a highly mentioned secondary focus within an article.</li> <li>- It makes sense to me that they would highlight how they work as a team - engaging participation and personality/qualities really link back to this as well as they prioritize a good relationship in the team.</li> </ul>	<p>"One of the things that I love about working with Convergence Design Lab is that we practice alignment all the time." (Pictures of success)</p> <p>"Convergence's Director of Learning, Margaret Conway, spent an admirable amount of time ensuring that the Mural template would work flawlessly, and it did." (Mad Libs)</p> <p>"When we decided to launch Convergence Design Lab as our own woman-run independent research and design agency, we did so from a place of hope." (Hope-Strong)</p> <p>"We get to look at data, reflect back what we see, measure outcomes, and support the messy work of sorting out organizational priorities." (Pictures of success)</p>	<ul style="list-style-type: none"> <li>- The ongoing practice of reflexivity they do is really important and a huge part of TI design I think</li> <li>- If only there were a way to evaluate this and have benchmarks, but this doesn't currently exist.</li> </ul>
Client relationship	17	<ul style="list-style-type: none"> <li>- I wasn't expecting this to come up so much, but it makes sense</li> <li>- Convergence works with clients (rather than direct-to-community) and are trying to communicate their style of work and how they engage clients.</li> <li>- Wanting to encourage and model participation and other values with their partners</li> </ul>	<p>"the Creative and positive-thinking Spy Hop teaching artists needed no cajoling of hand-holding. They quickly populated the Mural board with digital post-its under pre-defined headings such as Mindsets, Process, Practices, Equipment." (mad Libs)</p> <p>"Even as external researchers, Convergence Design Lab starts its process by engaging youth and practitioners as co-investigators in discovery." (new ways of learning)</p> <p>"At Convergence, we think of participatory design as research as that good form - providing the exercises, processes, routines and practices that enable our partners to fully flex their muscles of hope and imagination." (hope-strong)</p>	<ul style="list-style-type: none"> <li>- There is opportunity here to cross over skills and values-based client work from participatory agency to trauma-informed design practice</li> <li>- This is an ongoing challenge - how to work with clients in values-based activities or encourage more values-based assessments (praxis) of the work</li> <li>- Looking more broadly, I think they already do integrate values into the client work with the participatory processes they use so it would be interesting to find the crossover.</li> </ul>

# Appendix C (page 1 of 2)

Date	Type of Comm.	Subject	Notes
9/1/21	Email	Initial outreach	<p>Receptive, asked for meeting</p> <ul style="list-style-type: none"> <li>- Present: Mindy Faber and Margaret Conway</li> <li>- Various youth development projects and some school-based (but not a lot)</li> <li>- With one client, lots of focus on "youth in care" (foster care, residential tx, secure care)</li> <li>- Would like more experience/training on interacting and speaking to this specific population</li> <li>- Feeling a bit nervous</li> <li>- Lots of work with Youth in Care mentors (workshops, focus groups, trainings, co-design)</li> <li>- Mentors are employees of client</li> <li>- Discussed "digital attitud" - I will look up</li> <li>- Interested in exploring what a partnership could look like</li> </ul>
9/8/21	Meeting	First meeting	<ul style="list-style-type: none"> <li>- Present: Mindy Faber</li> <li>- Possibility of meeting SpyHop (partner) but has to ask them first</li> <li>- Discussed more what this could look like</li> <li>- Still somewhat vague for everybody (including me)</li> <li>- Mindy reports a strong relationship with SpyHop and that she has been working with them on evaluation and expanding their data collection and reporting tools</li> <li>- Did a series of workshops to co-design the reporting tools, but the use (reporting %) is not as high as they would like. Mainly 1 well-established mentor.</li> <li>- Discussion about why this might be. (Busy, forget, don't want to, etc.)</li> <li>- I heard Mindy speaking about her desire to focus on strengths despite challenge and I shared a resource with her about this from a child development perspective.</li> </ul>
10/1/21	Meeting	Follow-up and Planning 1	<ul style="list-style-type: none"> <li>- Present: Mindy Faber and Adam Sherlock</li> <li>- Discussed the Sending Messages program and Adam's view of the work</li> <li>- Mindy and Adam clearly have ongoing relationship (professional)</li> <li>- Mindy shows lots of active listening toward Adam. Very respectfully and mindful about his time.</li> <li>- Adam is currently in a supervisory role but misses working with the students/youth</li> <li>- Adam is interested in the TI project and OK with me being involved</li> </ul>
10/18/21	Meeting	Client intro	<ul style="list-style-type: none"> <li>- Present: Mindy Faber</li> <li>- Discussed what the interview will be like and who it will be with</li> <li>- We will co-write protocol and questions where I will attempt to infuse TI approaches</li> <li>- Mindy is very open to where TI approaches can fit in, but is still somewhat unclear</li> <li>- Despite being unclear, she is open to whatever it means.</li> <li>- I also shared didactic materials with her, but Mindy reported that she may not really have time to look at it currently and would need additional context for what is on the pages. Materials included various reflective tools.</li> <li>- Mindy and I worked asynchronously after we met to create protocol and interview questions</li> <li>- Convergence's approach to this appears flexible so that they can be responsive to the interviewee input and line of conversation.</li> </ul>
11/11/21	Meeting	Interview planning	<ul style="list-style-type: none"> <li>- Present: Mindy</li> <li>- Interviewee emailed me to say that he was running late and would be on 10 minutes late</li> <li>- Mindy and I decided to get back on when he was ready to meet</li> <li>- 30 minutes later we met with interviewee briefly who said that he could only meet for 15 minutes</li> <li>- I observed Mindy tell him that this was not enough time and asked to reschedule for a day that we could meet for a full hour. Interviewee agreed. Mindy did a really great job balancing the fact that the interviewee is volunteering time, but that we need the information from him. Even though Mindy doesn't really know him, she seemed to approach this with a calm and laid-back affect.</li> <li>- I noticed that Mindy seemed nervous/anxious about rescheduling</li> <li>- Mindy shared thoughts that he may not have realized that he wouldn't be able to meet and that his schedule is very hectic with multiple tasks at the same time. I shared my process of preparing for stakeholder interviews/meetings which was the stakeholder map with social ecology mapping, but since it was via email Mindy didn't really respond. I think this document needs additional context and discussion.</li> </ul>
11/17/21	Meeting/Email	Interview reschedule	<ul style="list-style-type: none"> <li>- Present: Mindy, stakeholder</li> <li>- Transcript on Trint for full notes</li> <li>- Observations:</li> <li>- Mindy is very calm and steady talking to the interviewee</li> <li>- The interviewee was comfortable in the space and open to speaking to us about Sending Messages</li> <li>- Mindy is a very active listener</li> </ul>
11/19/21	Meeting	Stakeholder interview	<ul style="list-style-type: none"> <li>- Mindy attempted to contact a frontline stakeholder (counselor) that worked with Youth in care and the sending messages program, but the stakeholder declined to be interviewed.</li> <li>- There was no explanation given about why they did not wish to participate</li> <li>- I followed up with questions about whether we could explore with them about why they declined, but this was not further explored.</li> <li>- I noticed that Mindy at times feels compelled (or restricted maybe?) by the client (SpyHop leadership). I wonder if she feels worried about rocking the boat between stakeholders. In other words, if Mindy were to push the stakeholder on why they did not agree to an interview, would there be an issue for SpyHop in delivering the Sending Messages program?</li> </ul>
11/29/21	Email	Stakeholder resistance	
12/3/21	Email	Share focus group 1	<ul style="list-style-type: none"> <li>- Mindy connected me to the transcript of a focus group done by a mentor with a group of youth.</li> </ul>
			<ul style="list-style-type: none"> <li>- Present: Mindy</li> <li>- Discussion on focus group transcript - The mentor was hesitant to push the student or ask more. Mindy felt that the mentor did not allow the students to fully explain feelings/emotion-related answers and changed the subject too quickly. I agree and I shared that I thought he may have seemed nervous in these moments. I wondered whether the mentor had seemed resistant to this focus group or about evaluating the students' experience.</li> <li>- Mindy shared that she felt she had learned to think about things differently from speaking to me in general.</li> </ul>
1/3/22	Meeting	Follow-up and Planning 2	
1/4/22	Email	Share focus group 2	<ul style="list-style-type: none"> <li>- Mindy connected me to the transcript of a focus group done by a mentor with a group of youth.</li> </ul>

# Appendix C (page 2 of 2)

			<ul style="list-style-type: none"> <li>- Present: Mindy</li> <li>- We discussed the second focus group, which was conducted by the most experienced mentor at Spyhop.</li> <li>- We both felt that it was apparent that this mentor was more experienced at engaging with students</li> <li>- The students spoke about their mentor a lot. their mentor was the person that conducted the first focus group what mindy sent me.</li> <li>- The students connected well with him</li> <li>- Mindy shared thoughts about a student that spoke a lot during the session and wished that the mentor had facilitated the other students in speaking a little more.</li> <li>- This session was a lot more personal and Mindy thought some of the students may have treated it as a regular session or even a group therapy-type opportunity</li> </ul>
1/13/22	Meeting	Follow-up and Planning 3	
2/2/22	Meeting	Workshop 1	Notes in Mural and transcript
2/15/22	Meeting	Workshop 2	Notes in Mural and transcript
3/7/22	Meeting	Workshop 3	Notes in Mural and transcript
<b>Themes/Thoughts</b>			
Mindy appreciates insights on how to interpret behavior even though she has intuitive and useful observations on it			
I wonder how to explore setting and moving boundaries in a client/designer relationship. This was an early theme and also came out during the workshops (see mural)			
Mindy (as a representative of Convergence) displays and reports a lot of space where she is intuitively trauma informed			
There is still some lack of clarity where TIDP fits in and where the discussions are going. This was particularly challenging because Convergence works with clients rather than directly with the "end user". I think this needs more research as TIDP goes forward			
I feel that we really only went through Stages and 1 and 2 in any depth - although we tested some tools for Stage 3 (application)			

# Appendix D (page 1 of 4)

Title	Source Type	Review	Citation
East New York supportive housing to feature 'trauma-informed design.'	Journal	Uses the term "trauma-informed design" to talk about physical space and community programming. Doesn't provide a definition, but discusses a focus on serving populations recently released from prison and providing community services.	'East New York supportive housing to feature 'trauma-informed design.' Real Estate Weekly, vol. 43, no. 14, 29 Jan. 2020, p. B4. OneOffice Business Intelligence.com/real-estate/46530723/18621-america64-118364id-b4991c3. Accessed 9 Feb. 2021.
Healing Justice Report - The Astoria Foundation	Website	A useful website that defines healing justice and talks in detail about the framework. It has a good description of the origins and why it is useful for people who have been marginalized from traditional Western treatments. Also has a helpful list of resources. The caveat is that it is not clear whether it is written by the people who would make most use of it and mentions funders frequently.	'Healing Justice Report - The Astoria Foundation.' 2021. Astoriafoundation.Org. <a href="http://www.astoriafoundation.org/resources/healingjustice/">http://www.astoriafoundation.org/resources/healingjustice/</a> [?]=news&news
Why Am I Always Being Researched?	Publication	A publication by 'Beyond Change' that presents case studies from the perspective of over-researched communities in Chicago. This is not specifically about design, but a useful perspective about community development that is not compressive or collaborative across organizations.	'Why Am I Always Being Researched?' 2018. Beyond Chicago.
Postcolonizing Resiliable Design: Its Practice Respectful, Reciprocal, and Relational Co-designing with Indigenous People	Journal		Alarino, Yoko, Penny Hagen, and Dena Whangaa-SchöLum. 'Postcolonizing resilient design to practice respectful, reciprocal, and relational co-designing with indigenous people.' <i>Design and Culture</i> (2019).
Co-Design Process Cheat Sheet	Publication		Auckland Co-Design Lab. 2018. Co-Design Process Cheat Sheet. Image. <a href="https://www.aucklandco-designlab.nz/resources/summary/tables-for-change-2018/cheat-sheet/rows/tables49/349a">https://www.aucklandco-designlab.nz/resources/summary/tables-for-change-2018/cheat-sheet/rows/tables49/349a</a> .
Universal Design for Underserved Populations: Person-Centered, Recovery-Oriented and Trauma-Informed	Journal	'Trauma-informed design focus. The first document I've seen that discusses ID as "universal design." Very comprehensive article. The principles of TIC include understanding trauma and its impact; promoting safety; ensuring cultural competence; establishing trusting relationships; supporting service-user choice, control, and autonomy; sharing power and governance; integrating care; acknowledging that healing occurs in the context of respectful relationships; promoting recovery; and addressing secondary traumatization and promoting self-care.	Basak, Ulrike L., Rachel E. Latta, Robert Sember, Sheela Raja, and Molly Richard. 2017. "Universal Design for Underserved Populations: Person-Centered, Recovery-Oriented and Trauma-Informed." <i>Journal of Health Care for the Poor and Underserved</i> 28 (3). Johns Hopkins University Press: 496-544. doi:10.1333/hpu.2017.0087.
socio-technical systems. From design methods to systems engineering		Lots of discussion about multi-disciplinary work and applying researching themes to process. No definitions, BUT - could be a good source material for definition of trauma-informed design practice. This article provided a lot of information about making design methods digestible for on-design settings and how design is useful to drive new processes.	Basler, Gordon, and Ian Sommerville. 2011. "Socio-Technical Systems: From Design Methods to Systems Engineering." <i>Interacting with Computers</i> 23 (R-4-7). doi:10.1016/j.intcom.2010.07.003.
Trauma Informed Care: A Commentary and Critique	Journal	Using child maltreatment as an example, this article is very strong on describing how TIC is not only for people who are known to have experienced trauma. It offers detailed definitions and commentary about them. Quote - "The aforementioned SAMHSA definition is primarily about awareness but as well describes what are considered basic principles related to trauma. However, these principles are essentially principles of good care and not specific to trauma care per se. For example, safety, trustworthiness, collaboration and mutual respect, empowerment, voice, and choice should characterize all systems-level responses. Or, to take a common example for how being trauma informed has a value at the individual level, it is often recommended that instead of chastising children with problems as intentionally misbehaving, it is important to consider that the behaviors may be adaptive or understandable responses to adversity or other historical influences. Again, this "good care" and should not be reserved only for those children who may have been affected by trauma."	Refrink, Lucy, and David J. Kolko. 2016. "Trauma Informed Care: A Commentary and Critique." <i>Child Maltreatment</i> . Sage Publications Inc. doi:10.1177/1077559516643785.
The Promise of Co-Design for Public Policy	Journal		Burkhardt, Emma. "The promise of co-design for public policy." <i>Australian Journal of Public Administration</i> 57, no. 4 (2018): 229-243.
Historical Trauma Among Indigenous Peoples of the Americas: Concepts, Research, and Clinical Considerations	Journal	A clinical article, but talks about engaging with communities around this definition of historical trauma. Definition includes historical, collective, indigenous definition. "Historical trauma (HT) is defined as cumulative emotional and psychological wounding across generations, including the lifespan, which emanates from massive group trauma. The historical trauma response (HTR) has been conceptualized as a combination of features associated with a reaction to massive group trauma. Historical unresolved grief, a component of this response, is the profound unsettled bewilderment resulting from cumulative devastating losses, compounded by the prohibition and rejection of Indigenous burial practices and ceremonies."	Brewer Heart, Maria Yellow Horse Josephine Chas, Jennifer Elkins, and Deborah B. Altschul. "Historical trauma among indigenous peoples of the Americas: Concepts, research, and clinical considerations." <i>Journal of psychosomatic studies</i> 43, no. 4 (2016): 282-290.
Women Finding the Way: American Indian Women Leading Intervention Research in Native Communities	Journal	Focuses on intervention and healing by indigenous women clinicians, leaders, and researchers. This is relevant because it shows the healing of "two" approaches to trauma-informed care and acknowledges the work being done in communities that is culturally responsive, intuitive, and grounded in trauma-informed research.	Brewer Heart, Maria Yellow Horse Josephine Chas, Jennifer Elkins, Jennifer Martin, Jennifer S. Nanas, and Jennifer J. Hoss. 2016. "Women Finding the Way: American Indian Women Leading Intervention Research in Native Communities." <i>American Indian and Alaska Native Mental Health Research</i> 23 (3). University Press of Colorado: 24-47. doi:10.1080/0898.2303.2016.24.
The Return to the Sacred Path: Healing the Historical Trauma and Historical Unresolved Grief Response among the Lakota Through a Psychoeducational Group Intervention	Journal	Research about clinical group interventions with Lakota people to see its effectiveness. The study concluded that the group treatment being studied was effective, it was impactful, that it was done in a culturally responsive and relevant way within the context of those receiving treatment. For the study it was also useful that the group received psychoeducation about historical trauma and its impact on communities.	Brewer Heart, Maria Yellow Horse. 1998. "The Return to the Sacred Path: Healing the Historical Trauma and Historical Unresolved Grief Response among the Lakota through a Psychoeducational Group Intervention." <i>Smith College Studies in Social Work</i> 68 (3): 389-393. doi:10.1008/0037319809397532.
Oyave Playak: Rebuilding the Lakota Nation through Addressing Historical Trauma among Lakota Parents, Generations in design methodology	Journal	Discusses the impact of historical trauma on Lakota parents and how it affects their parenting - how the trauma impacts them and their children as well as recognizing its actions. This article is relevant because it highlights the ways that trauma is a cycle and impacts ongoing generations if there is no healing. It also focuses on traditional protective factors, which is important in bringing in more intuitive and culturally relevant models of healing.	Brewer Heart, Maria Yellow Horse. 2008. "Oyave Playak: Rebuilding the Lakota Nation through Addressing Historical Trauma among Lakota Parents." <i>Journal of Human Behavior in the Social Environment</i> 2 (1-2): 103-26. doi:10.1002/hbs2.02101_018.
Holding Change: The Way of Emergent Strategy Facilitation and Mediation	Book	This book uses a black feminist lens to provide guidance on facilitation and mediation - specifically around race. It is relevant because it supports the reader in navigating difficult situations within group settings and helps remind the reader how to address conflict or discomfort. It is very strong in learning group facilitation in a holistic way from the perspective of black feminism. Additionally, there is a high likelihood that there will be tension in community engaged work so this is a vital and concrete skill that designers can cultivate.	Broadbent, John. "Generations in design methodology." <i>The design journal</i> 6, no. 1 (2009): 2-13.
Trauma Provider Knowledge, Views, and Practices of Trauma-Informed Care	Journal	This article focuses on TIC in clinical settings and assesses the provider readiness to incorporate TIC into their practice. The article generally states that providers in the study were aware of and willing to incorporate TIC, but needed additional training that fit within their hectic schedules and work culture. This is relevant for a few reasons: 1) TIC practices do not already exist in many design practices so it will have to be introduced; 2) when TIC practices are introduced in a new setting (design) it should be done in a way that fits within the existing culture.	Bram, Adrienne M. 2021. <i>Holding Change: The Way Of Emergent Strategy Facilitation and Mediation</i> . Chicago, CA: AK Press.
The cultural context of trauma recovery: Considering the posttraumatic stress disorder practice guideline and intersectionality	Journal		Brace, Maria M., Nancy Kasam-Adams, Mary Rogers, Kaen M. Anderson, Kristin Pngtin, Stays, and Theresa S. Richmond. 2018. "Trauma Providers' Knowledge, Views, and Practice of Trauma-Informed Care." <i>Journal of Trauma Nursing</i> 23 (2). Lippincott Williams and Wilkins 13-38. doi:10.1097/JTN.0000000000000336.
You Are Your Best Thing: Turning experience into theory: The affirmation model as a tool for critical Praxis	Journal		Bryan-Davis, Therna. "The cultural context of trauma recovery: Considering the posttraumatic stress disorder practice guideline and intersectionality." <i>Psychotherapy</i> 46, no. 3 (2009): 400.
The Pacts of Product Design in Collaboration with Engineering	Book (Ebook)	A book of essays by black writers and edited by 'Isana Burke and Brene Brown. This is relevant because it provides a qualitative storytelling aspect to the research here.	Burke, Isana, and Brene Brown. 2021. <i>You Are Your Best Thing: Vulnerability, Shame Resilience, And The Back Experience</i> . New York City: Penguin Random House.
			Cameron, Colin. "Turning experience into theory: The affirmation model as a tool for critical Praxis." <i>Social Work and Social Sciences Review</i> 17, no. 3 (2014): 108-121.
			Chang, Wayne C. <i>The Praxis of Product Design in Collaboration with Engineering</i> . Springer International Publishing, 2019.

# Appendix D (page 2 of 4)

Title	Source Type	Review	Citation
Co-Design And Evaluation Prompt Cards	Publication		Co-Design And Evaluation Prompt Cards, 2020. Autodesk Co-Design Lab and Research Evaluation. Design and Research. <a href="https://www.autodesk.com/learn/resources/summaries/cards-for-creating-design-and-evaluation-prompt-cards">https://www.autodesk.com/learn/resources/summaries/cards-for-creating-design-and-evaluation-prompt-cards</a> .
User-Centered Design Considered Harmful (with apologies to Edgard Degas, Nikolaus Wirth, and Don Norman)	Journal		Dearden, Andy, Michael L. Best, Susan Bray, Ann Light, John Thomas, Celeste Buchhalter, Danis Gerstein, Shanks Krihanan, and Nitya Sambasivan. "User-Centered Design Considered Harmful." (2020).
DSM-V	Book	Very clinical and not appropriate for non-clinical settings but it is important to include because of the DSM's well-reaching and well-known impact on mental health treatment.	Diagnostic and statistical manual of mental disorders DSM-5. Arlington, VA: American Psychiatric Association.
Interview with Rachel DeFus	Interview	Talking about Rachel's work and how it relates.	DeFus, Rachel. 2021. "Trauma-informed design and social work." Interview by Saah Mies. Virtual Interview.
Increasing Trauma-Informed Awareness and Practice in Higher Education	Journal	Short article about trauma-informed care in education. Not very specific about the definition. A trauma-informed higher education institution can provide a safe, supportive, respectful environment where students are empowered and share leadership. Students provided with a trauma-informed environment will feel connected and supported, and this connection has shown to positively impact academic success. Not about design.	Makusen, Thomas. "Disentangling 'the social' in social design's engagement with the public realm." <i>CoDesign</i> 15, no. 3 (2017): 407-474.
Trauma-Informed Design: Healing and Recovery in Second-Stage Housing	Journal	This article is useful from a physical space perspective because it includes additional information about trauma and understanding terms. "Trauma-informed care seeks to create a service experience that understands the effects of trauma on a person and ensures 'every interaction is consistent with the recovery process and reduces the possibility of retraumatization'" (Blatt, et al., 2009, p. 462). A trauma-informed environment is one that is sensitive to the needs of trauma survivors and is informed by the recovery process. This environment strives to be empowering, supportive and prevent retraumatization.	Doughy, Kristen. 2020. "Increasing Trauma-Informed Awareness and Practice in Higher Education." <i>Journal of Continuing Education in the Health Professions</i> 40 (3). Lippincott Williams and Wilkins: 64-68. doi:10.1097/CJH.0000000000000279.
Trauma-Informed Design: Healing and Recovery in Second-Stage Housing	Journal	Implementation of a trauma-informed program. This is a really great article, but it is more based on clinical principles. Still really good information about why trauma-informed practices are helpful. Trauma-informed services are those in which service delivery is influenced by an understanding of the impact of interpersonal violence and victimization on an individual's life and development. To provide trauma-informed services, all staff of an organization, from the receptionist to the direct care workers to the board of directors, must understand how violence impacts the lives of the people being served, so that every interaction is consistent with the recovery process and reduces the possibility of retraumatization. The take-away of this understanding about the impact of trauma on women's lives is, as the title of this article suggests, the equivalent of denying the existence and significance of trauma in women's lives.	Duddege, Naomi. 2010. "Trauma-Informed Design: Healing and Recovery in Second-Stage Housing." <i>Drafting a Practice</i> . Submitted to the Faculty of Graduate Studies of The University of Manitoba in Partial Fulfillment of the Requirements of the Degree of MASTER OF INTERIOR DESIGN.
TRAUMA-INFORMED OR TRAUMA-DETECTED: PRINCIPLES AND IMPLEMENTATION OF TRAUMA-INFORMED SERVICES FOR WOMEN	Journal	Uses the term "trauma-informed design" to talk about physical space in the housing community and other important services. TID is... Apartments include many features designed to convey a safe and community-oriented living environment for a population that has experienced significant trauma. Relatively brief article and not focused much on the process of design.	Elliott, Denise E., Paula Blajac, Roger O. Falout, Laura S. Markoff, and Beth Gower-Ross. 2003. "Trauma-Informed or Trauma-Detected: Principles and Implementation of Trauma-Informed Services for Women." <i>Journal of Community Psychology</i> . Wiley-Int: doi:10.1002/cop.10063.
New Denver housing community takes trauma-informed design to next level.	Journal		Enos, Gary. 2017. "New Denver Housing Community Takes Trauma-Informed Design to Next Level." <i>Mental Health Weekly</i> 7 (33). Wiley: 1-7. doi:10.1002/mhw.3180.
Abolish the Cop Inside Your (Designer's) Head	Article		Fahakiah, Sarah, and AD Sean Lewis. "Abolish the Cop Inside Your (Designer's) Head."
Rethinking design education for the 21st century: Theoretical, methodological, and ethical discussion			Finkel, Alain. "Rethinking design education for the 21st century: Theoretical, methodological, and ethical discussion." <i>Design Issues</i> 37, no. 1 (2008): 3-17.
Pedagogy of the Oppressed	Book	Paulo Freire's essential text about galvanizing marginalized people around education and reclaiming their rights to think and be free. This is important for this project because it helps the reader to understand how to bring communities together around certain issues. The challenge is in implementing the ideas here when there is an intrinsic power dynamic between designer and 'community' member.	Freire, Paulo. "Pedagogy of the oppressed (revised)." <i>New York: Continuum</i> (1994).
On Paulo Freire's philosophy of peace and the foundations of liberation education	Journal		Gass, Ronald David. "On Paulo Freire's philosophy of peace and the foundations of liberation education." <i>Educational Researcher</i> 30, no. 2 (2001): 15-25.
Trauma-Sensitive Schools Training Package	Publication	This is a free open source curriculum on how to engage with students in K-12 schools in a trauma-sensitive way. This is relevant because schools are a major setting in which trauma-informed practices are currently being implemented.	Gaumnig, K. and E. Chagnon. 2018. "Trauma-Sensitive Schools Training Package." <i>Presentations, Washington, DC: National Center for Safe Supportive Learning and Environments, 2018.</i>
Lifting Off the Ground to Retain Ancestral Places, Transformative Learning and Social Design Experiments	Journal		Guñeev, Kira D., and Shirin Mossaoui. "Lifting off the ground to return: Ancestral places, transformative learning, and social design experiments." <i>Journal of Teacher Education</i> 61, no. 1-2 (2010): 100-117.
Designing Trauma-Informed Addiction Services	Journal	About TID intervention in substance use treatment. Focus on changing focus away from dominant male intervention perspective to women. Could be a good source to focus on marginalized groups when designing systems. However, kind of an old clinical document. Not a clear definition, but a good statement from the abstract: "There has been growing acknowledgment among scholars, practitioners and policy-makers that gender-informed thinking should feed into policy but must be implemented holistically if gains are to be made in reducing trauma, saving lives, ensuring emotional wellbeing and promoting desistance from crime."	Harris, M., and R. D. Falout. 2001. "Designing Trauma-Informed Addictions Services." <i>New Directions for Mental Health Services</i> , no. 89: 57-73. doi:10.1002/yd.233008807.
Trauma-Informed Design (website)	Website	TID definition about physical space. Trauma-informed Design (TID) is a new concept that has not yet achieved a unified definition. We define it as a design process for the built environment based on trauma informed care principles. All decisions about the physical environment must be filtered through the overlapping lenses of psychology, neuroscience, physiology, and cultural factors. The intent is to create uniquely-designed spaces where all users feel a sense of safety (both risk and personal), respect, connection and community, comfort, dignity and joy. Each TID environment should aim to specifically meet the unique needs of the intended users, recognizing that some helpful and healing design elements may look different for different populations.	Harris, PhD, J. Davis, and Janet Roché. 2015. "Trauma Informed Design." <a href="https://traumainformeddesign.org/">https://traumainformeddesign.org/</a> .
Using a trauma-informed policy approach to create a resilient urban food system	Journal	Elements of trauma-informed policy and some downsides in the setting. This article connects policy creation to methods of designing policy. Mentions a lot about human impact of using community input. Also importantly, "The authors argue for moving beyond broad notions of trauma as universal experience [to] address its specific sociopolitical and economic roots as well as its disproportionate impacts among marginalized populations." The framework applies the principles of trauma-informed practice—a model of service provision used across a variety of health and social services settings to address consequences of trauma, facilitate healing and prevent re-traumatization (33)—to the policy formulation process (32).	Hecht, Annie A., Erin Behl, Sarah Buzzugang, and Roni A. Neff. 2018. "Using a Trauma-Informed Policy Approach to Create a Resilient Urban Food System." <i>Public Health Nutrition</i> 21 (10). Cambridge University Press: 1841-70. doi:10.1017/S1446788718000098.
Healing Justice Is How We Can Sustain Black Lives	Website	This is a HuffPost article about Healing Justice and how it supports Black healing. It is relevant because Healing Justice supports recovery from trauma and living more full lives from especially BIPOC and queer perspective. This is important because when talking about trauma we must understand that not everyone feels comfortable in mainstream treatment.	Hempfling, Penrice. 2017. "Healing Justice Is How We Can Sustain Black Lives." <a href="https://www.huffpost.com/entry/healing-justice_1389784846403284787616">https://www.huffpost.com/entry/healing-justice_1389784846403284787616</a> .
Trauma-informed work (Interview)	Interview	Discussing how to translate trauma concepts for non-clinical settings - or in settings that are not built around it.	Henry, Yvonne. 2021. "Trauma-informed work." Interview by Saah Mies. Virtual Interview.
Design For Social Innovation Impact Evaluation Study	Report		Hill, Regina, and Lauren Vaughan. 2018. "Design For Social Innovation Impact Evaluation Study." RMIT School of Design. <a href="https://www.design.rmit.edu.au/projects/17-evaluating-design-for-social-innovation-impact-evaluation-study-rmit-5mm1-b8e69d9a.pdf">https://www.design.rmit.edu.au/projects/17-evaluating-design-for-social-innovation-impact-evaluation-study-rmit-5mm1-b8e69d9a.pdf</a> .



# Appendix D (page 3 of 4)

Title	Source Type	Review	Citation
Practicing Without a License: Design Research as Psychotherapy	Journal	This article posits that social impact designers are often in spaces where their interaction with participants/collaborators mimics psychotherapy. According to the article, while this is not intrinsically bad designers must be aware of this impact and collaborate with therapeutic health field to support the wellbeing of the population they hope to work with. This is relevant because this research is founded on the fact that social designers are in positions of power and are extracting emotional information/data from others.	Hirsch, T. "Practicing Without a License: Design Research as Psychotherapy." <i>Proceedings of the 2020 CHI Conference on Human Factors in Computing Systems</i> (2020).
Empathic design research: a phenomenological study on young people experiencing participatory design for social inclusion	Journal		Ho, Henry, Kwok-Kuang, Jin, Ma, and Yanki Lee. "Empathic design research: a phenomenological study on young people experiencing participatory design for social inclusion." <i>Cobdesign</i> 7, no. 2 (2018): 95-106.
Co-design, tools and approaches	Presentation	Baseline of co-design concepts.	Holmsted, Stefan. 2017. "Co-design, tools and approaches." Presentation, Linköping University, April 2017.
Theory as liberatory practice	Journal		Hooks, Bell. "Theory as liberatory practice." <i>Yale J.L. &amp; Feminism</i> 4 (1998): 1.
Teaching to Transgress	Book	bell hooks book around how to reclaim education. This is relevant for its focus on popular education and focus on community.	hooks, bell. <i>Teaching to transgress</i> . Routledge, 2014.
Social Design and Neocolonialism: Designing 'Healthy' Prisons for Women	Journal		Jarvis, Cinnamon, L., and Lauren S. Wemmers. "Social design and neocolonialism." <i>Design and Culture</i> 6, no. 3 (2014): 327-343.
Incorporating Trauma-Informed Care and Practice (ICP) into Prison Planning and Design	Journal	Looks at 71 approaches as both a aim and an outcome. Will support 71 approaches as a start to fresh and alternative approaches. I am arguing that it is a process, lens, and outcome. Not just one of them at any given time. The only issue is that I feel this article - from my scan - does not address the perception of women in prison as a population worthy of additional resources than the bare minimum. This is a significant barrier to overcome.	Jenkins, Veronic, Helen Jarobar, Serena Wright, and Gillian Brindlow. 2019. "Designing Healthy Prisons for Women: Incorporating Trauma-Informed Care and Practice (ICP) into Prison Planning and Design." <i>International Journal of Environmental Research and Public Health</i> 16 (20). MDPI, DOI: 10.3390/ijerph16203818.
Bridging Realms: Towards Ethnographically Informed Methods to Identify Religious and Artistic Practices in Different Settings	Journal	This is a non-trivial, but research approach to community engagement. This was included to discuss the ways in which researchers engage with communities in different settings.	Lewin-Williams, J. David, and Johannes HM Louw. "Bridging realms: towards ethnographically informed methods to identify religious and artistic practices in different settings." <i>Time and Mind</i> 2, no. 2 (2010): 105-119.
DECOLONIZING TRAUMA WORK: Indigenous Stories and Strategies (Linklater, Renee)	Book	Focus on trauma in indigenous communities. Some really strong and helpful discussions of trauma, trauma responses, and culturally specific interventions. Also really like the short and broad definition. I would just like it to more inclusive of collective or intergenerational trauma. In this book, trauma refers to a person's reaction or response to an injury.	Linklater, Renee. <i>Decolonizing trauma work: Indigenous stories and strategies</i> . Fernwood Publishing, 2014.
Design Is Storytelling	Book	Different ways that design can tell stories. Takes the reader through the hero's journey and highlights ways that design can tell us these stories.	Lupton, Ellen. 2011. <i>Design Is Storytelling</i> . New York, NY: Cooper Hewitt, Smithsonian Design Museum.
A Social Model of Social Work: A Reflexive Account of Praxis Intervention with the Advices of Attapattu	Journal		Madhu, P. "Towards a Praxis Model of Social Work: A reflexive account of Praxis Intervention with the Advices of Attapattu." <i>Nakama Gender University, Kottayam</i> (2005).
A 'Social Model' of Design: Issues of Practice and Research	Journal		Margolin, Victor, and Silvia Margolin. "A 'social model' of design: Issues of practice and research." <i>Design Issues</i> 16, no. 4 (2000): 24-30.
Design for the 21st Century? Introduction	Presentation	Presentation on how design is moving into social impact realm.	Marshall, John. 2021. "Design for the 21st Century? Introduction." Presentation, Ann Arbor, MI (Virtual), January 2021.
Praxis in Paulo Freire's Emancipatory Politics	Journal		Meyer, Peter. "Praxis in Paulo Freire's Emancipatory Politics." <i>International Critical Thought</i> 10, no. 3 (2020): 454-72.
Evidence for Social Innovation	Presentation		McKegg, Kate, Dr Penny Hagen, and Chris Cranstone. 2019. "Evidence For Social Innovation." Presentation, Melbourne, Australia, 2019.
Responding to the needs of youth who are homeless: Calling for politicized trauma-informed intervention	Journal	Expands the definition of trauma beyond the individual, which is the goal of my working definition of TID. Specific context with youth who are homeless, but useful for defining. Also important that they emphasize that 11 practices can be applied by non-specialists (mental health). Trauma-Informed Care is a strength-based framework that is grounded in an understanding of and responsiveness to the impact of trauma that empowers physical, psychological and emotional safety for both providers and survivors and that creates opportunities for survivors to rebuild a sense of control and empowerment. Sourced from Hipper 2010	McKenzie-Mohr, Suzanne, John Coates, and Heather McLeod. 2012. "Responding to the Needs of Youth Who Are Homeless: Calling for Politicized Trauma-Informed Intervention." <i>Children and Youth Services Review</i> 34 (8). DOI: 10.1016/j.childyouth.2010.07.008.
Beyond Story Notes	Book	This is a website of resources by the writer of Beyond Story Notes. Trauma-informed design practice - broader look at what it means in co-design. Becoming trauma-informed is about recognizing the prevalence and impact of trauma on people's minds, bodies and spirits. It is about supporting healing, intentionally and systemically. We put trauma-awareness and healing into practice in co-design through environments where people can feel safe enough, visible and validated. In trauma-informed practice, we focus on different layers. In small circles, we focus on healing relationships and positive interactions. In larger circles, we focus on growing trauma-informed organizations, movements and communities. Bigger yet, we work towards transforming broader systems of oppression. While co-design is not therapy, it should aim to be safe enough for people to learn and share together.	McKenzie-Mohr, Suzanne, John Coates, and Heather McLeod. 2012. "Responding to the Needs of Youth Who Are Homeless: Calling for Politicized Trauma-Informed Intervention." <i>Children and Youth Services Review</i> 34 (8). DOI: 10.1016/j.childyouth.2010.07.008.
Trauma-Informed Design (Research)	Website		McKenzie-Mohr, Suzanne, John Coates, and Heather McLeod. 2012. "Responding to the Needs of Youth Who Are Homeless: Calling for Politicized Trauma-Informed Intervention." <i>Children and Youth Services Review</i> 34 (8). DOI: 10.1016/j.childyouth.2010.07.008.
My Grandmother's Hands	Book	Racialized trauma. Useful in the discussion of the many ways that black and white people are impacted by racism - white people by their actions and black people by the actions of others. This also focuses heavily on police violence, having sections that speak directly to police officers. This is a very broad summary of a very comprehensive book on racialized trauma. Does not provide a single definition of trauma, but centers on the ways in which racism and racial violence harm black people in the US - physical and emotionally.	McKegg, Kate, Dr Penny Hagen, and Chris Cranstone. 2019. "Evidence For Social Innovation." Presentation, Melbourne, Australia, 2019.
A randomized controlled trial of a trauma-informed school prevention program for urban youth: Rationale, design, and methods	Journal	Not much new information in this one, but talks about the approach that what is good for people who have been traumatized is good for everyone. Don't provide a definition, but provide an in-depth look at a 11 example and mental health-based intervention practice in schools. They describe 11 interventions as a universal approach that should not necessarily be used only for students that have been screened to have trauma by.	Melancon, Resmaa. 2017. <i>My Grandmother's Hands: Racialized Trauma and the Pathway to Healing Our Hearts and Bodies</i> . Las Vegas, NV: Central Recovery Press.
Key Ingredients for Successful Trauma-Informed Care Implementation	Publication	This is a more clinical article about how to implement trauma-informed care in clinical settings. It presents specific points on how to bring these practices into your work without changing anything major about the practice. This is relevant because it helps the reader contextualize the process on implementing 11 practices into their own work. This book discusses why people have an emotional reaction to certain designs. This is relevant because it is a bridge for designers to understand the emotional reactions that people may have to their work - whether or not it is a product.	Meredith, Tamara, Laura K. Clay, Erica Siringu, Darius Tandon, Rashelle Muz, Kristin Minar, David Salavay, Elizabeth A. Stuart, and Nick Ialongo. 2020. "A Randomized Controlled Trial of a Trauma-Informed School Prevention Program for Urban Youth: Rationale, Design, and Methods." <i>Contemporary Clinical Trials</i> 90 (March). Elsevier Inc. doi:10.1016/j.cct.2019.101895.
Emotional Design: White Supremacy Culture - Still Here	Book		Menshikov, Christopher and Alexandra Mau. 2016. "Key Ingredients for Successful Trauma-Informed Care Implementation." Center for Health Care Strategies Issue Brief.
The transformational Indigenous praxis model: Stages for developing critical consciousness in Indigenous education.	Publication		Norman, Donald A. 2007. <i>Emotional Design</i> . New York: Basic Books.
Revisiting Herbert Simon's Science of design	Journal		Okun, Temia. "White Supremacy Culture - Still Here." 2021. <a href="https://www.wildfirejournal.com/2021/">https://www.wildfirejournal.com/2021/</a>
A Framework for Systemic Design	Journal		Pleowawaty, Cornel D., Anna Lees, and Hyung Clark-Shin. "The transformational Indigenous praxis model: Stages for developing critical consciousness in Indigenous education." <i>Wicaco Sa Review</i> 33, no. 1 (2018): 38-69.
			Hupzeta, Darin J. "Revisiting Herbert Simon's Science of Design?" <i>Design Issues</i> 31, no. 2 (2015): 29-40.
			Ryan, Alex. "A framework for systemic design." <i>FORSKUNGSINFORMATIONSDIENSTEN FÖR DESIGN OCH DESIGNTEKNIK</i> 7, no. 4 (2014).

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Title	Source Type	Review	Citation
SAHMSA concept of trauma and guidance for a trauma-informed approach	Publication	Defines trauma as "an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being." This is a widely-used definition.	SAHMSA. "SAHMSA" concept of trauma and guidance for a trauma-informed approach. (2014).
Trauma and Violence (SAMHSA)	Publication	Short publication from SAMHSA about the connection of violence to trauma. Relevant because it talks about the prevalence and the concept that behaviors are connected to trauma.	SAHMSA. "Trauma And Violence". 2021. Samhsa.Gov. <a href="https://www.samhsa.gov/trauma-violence">https://www.samhsa.gov/trauma-violence</a> .
An evolving map of design practice and design research.	Publication		Sanders, Liz. "An evolving map of design practice and design research." <i>Intersections</i> 15, no. 6 (2008): 15-17.
The methodology of participatory design			Spinuzzi, Clay. "The methodology of participatory design." <i>Technical Communication</i> 52, no. 2 (2005): 163-174.
The Methodology of Participatory Design	Journal	Specific examples on participatory design in social impact settings.	Spinuzzi, Clay. 2005. "The Methodology of Participatory Design." <i>Technical Communication</i> 52 (2): 163-174.
Upon opening the black box and finding it full. Exploring the ethics in design practices			Steen, Marc. "Upon opening the black box and finding it full: Exploring the ethics in design practices." <i>Science, Technology, &amp; Human Values</i> 40, no. 3 (2015): 389-420.
Rooms of their own: Trauma-informed design improves children's space at People Serving People	Journal	Uses the term "trauma-informed design" for physical space. This article is useful in its explanation of trauma and trauma-informed because it doesn't necessarily see everyone as traumatized. Hees, TID is "Realizing that the trauma exists, recognizing that people are affected by their trauma, responding in ways that are calming and don't create more trauma, and actively working to create a safe space where the trauma is understood and not exacerbated". However, this is more of an outcome rather than a process of TID.	Stenner, Andy. 2017. "Rooms of Their Own: Trauma-Informed Design Improves Children's Space at People Serving People (Hees/TID)". <a href="https://www.mmgps.com/mental-health/education/2017/03/rooms-of-their-own-trauma-informed-design-improves-childrens-space-pep">https://www.mmgps.com/mental-health/education/2017/03/rooms-of-their-own-trauma-informed-design-improves-childrens-space-pep</a> .
Co-Design Meets Evaluation: Creating Convergence For Social Innovation And Social Impact	Presentation	P Praxis is Praxis is action that comes from continuous and creative deliberation and dialogue about doing the right thing in a particular situation to effect human flourishing.	Stone, Geoff, and Dr Penny Pagen. 2018. Co-Design Meets Evaluation: Creating Convergence For Social Innovation And Social Impact. Presentation, Auckland, New Zealand., 2018.
Praxis Framework - Design Evaluation for Social Impact	Publication		Stone, Geoff. 2021. Praxis Petal, Image, Ripple Research, Design, and Evaluation. Accessed November 9. <a href="https://www.auckland.ac.nz/resources-samhsa/integrating-co-design-and-evaluative-practice">https://www.auckland.ac.nz/resources-samhsa/integrating-co-design-and-evaluative-practice</a> .
Defining trauma in complex care management: Safety-net providers' perspectives on structural vulnerability and time	Journal	Highlights the importance of a collective emphasis on trauma/trauma-informed. Helps to define more precisely. This is a highly clinical document and includes screening in the definition of "It is a case which I will not do. This moves away from the sense that "It can't be done by non-specialists. Trauma informed care" - "an organizational change process centered on principles intended to promote healing and reduce the risk of re-traumatization for vulnerable individuals."	Thompson-Laxdal, Ariana, Irene H. Yen, Mark D. Fleming, Meredith Van Natta, Sara Rubin, Janet K. Shim, and Nancy J. Burke. 2017. "Defining 'Trauma-In' Complex Care Management: Safety-Net Providers' Perspectives On Structural Vulnerability And Time." <i>Social Science &amp; Medicine</i> 186: 104-112. doi:10.1016/j.socscimed.2017.06.013.
The Body Keeps the Score	Book	More clinical view of trauma - famous book about trauma. Biological response and how the brain works.	Van Der Kolk, M.D., Bessel. 2015. <i>The Body Keeps The Score</i> . New York, NY: Penguin Books.
Trauma Stewardship	Book	This is about holding/healing the trauma of others, which will be important to discuss from the perspective of supporting social impact designers. Has info about individual, organizational, systemic. Important concept for anyone working in trauma-informed approaches and/or using the term. This may also be useful in talking about the great responsibility of working with people who are sharing their stories of trauma. Does not provide a single definition of trauma, but centers on what it means to hold other people's stories and emotions and how that can cause trauma symptoms in carers.	Van Derroot Ludy, Laura and Paul, Corina. <i>Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others</i> . Oakland, CA: Berrett-Koehler Publishers, Inc.
What Happened to You?	Book	General book about trauma and how it functions. Similar in some ways to <i>The Body Keeps the Score</i> .	Wintley, Orlan, and Bruce D. Perry. <i>What Happened to You? Conversations on Trauma, Resilience, and Healing</i> . Flatiron Books, 2021.

# Appendix E (page 1 of 3)

*Trauma-Informed Design Practice*  
**Case Review**

**Presenter Summary**

*To be filled out and shared prior to meeting by the presenter*

**Designer**

**Partner(s)**

**Project**

**Timeline**

**Project type**

Client-based

Community-based

Research

Other: \_\_\_\_\_

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**Project/Case Summary - to be shared with team prior to review meeting**

Background

Recent Developments

Successes

Issues, Interventions, and Outcomes

Questions for Team

# Appendix E (page 2 of 3)

*Trauma-Informed Design Practice* | **Case Review**

**Presenter Guide and Notes**  
*For the presenter to track feedback and input during the meeting*

**Input from Team**  
*(notes from meeting)*

**Proposed Next Steps**  
*(based on team discussion)*

Reflect on your use of the 6 Principles of a Trauma-Informed Approach in your project so far. Fill in the table to reflect on your practice. Examples can include points like strengths in your practice of these principles, places where you think adverse experiences impacted a client's/participant's behavior, and examples of where you think you are strongest or in the most need of growth. **Not every principle will be covered here.**

Safety	Trustworthiness & Transparency	Peer Support
Collaboration & Mutuality	Empowerment, Voice, & Choice	Cultural, Historical, & Identity Issues

# Appendix E (page 3 of 3)

## Trauma-Informed Design Practice Case Review

## Team Guide and Notes

*For teammates to make notes before and during meeting.  
Share with presenter after notes are complete.*

Provide the presenter with feedback about the **6 Principles of a Trauma-Informed Approach**.

Feedback includes, but is not limited to: where they were strong, where there is an opportunity for reflection, input about how you think they can focus on one or more principles, and resources to for more support.

**Not every principal will be covered here.**

Safety	Trustworthiness & Transparency	Peer Support
Collaboration & Mutuality	Empowerment, Voice, & Choice	Cultural, Historical, & Identity Issues

**General Feedback for Presenter**  
*(notes from meeting)*

**Ideas for Presenter Next Steps**

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