

An emerging checklist

Is your facility activating principles of **trauma-informed care** in its design?

There is a growing body of inquiry and discussion concerning new best practices policies and philosophical approaches of assisting persons in crisis. The last ten years have seen the rise of a less punitive and authoritative approach than before and now recognizes the importance of engendering trust, reinforcing the presence of safe conditions, and ensuring the inclusion of collaboration and empowerment within policies and engagement (Substance Abuse and Mental Health Services Administration, 2014). These ideas define a new movement called **trauma-informed care (TIC)** (Hopper, Bassuk & Olivet, 2010). By extension, **trauma-informed design** explores ideas for built environments that support the tenets of trauma-informed care (Homeless Children's, 2015).

Trauma-informed care's new 'soft' approach has support from a growing body of empirical research, especially as the TIC approach seeks to minimize stress and maintain or instill a sense of resident empowerment. For example, neurobiological research has established that overwhelming stress, trauma, and neglect particularly impact the parts of the brain that generate thought and memory, and often with long term effects, especially in children. (American Association of Children's, 2010). The presence of stress from physical environmental sources (especially environments where residents have little control over their surroundings) potentially contributes to a sense of helplessness (Burn, 1992). Conversely, trauma-informed care seeks to promote dignity, voice and choice (Substance Abuse and Mental Health Services Administration, 2014).

In short, this and similar literature suggests that it may be counterproductive to subject persons to a social, mental and physical environment that instills stress, and potentially distracts them from important recovery tasks at a time when they are already dealing with a significant crisis. The design of architectural space may have a role to play in residents' level of stress, which may in turn impede recovery.

A checklist tool

We have developed a preliminary checklist tool to help organizations that provide built environments for their residents/patients. This tool provides the opportunity to evaluate the building design's ability to **accommodate six core human needs** that have emerged from literature, as well as our own research. There is a need to apply trauma-informed care principles in buildings, and "a need to operationalize the principles of trauma-informed services, and to link these principles to quantitative, measurable changes that can be tracked and evaluated" (Hopper, Bassuk and Olivet, 2010, p. 94). This evaluative tool is currently in development, and we share it with you now so that you might provide comment leading to its further evolution.

"We need to operationalize the principles of trauma-informed services, and to link these principles to quantitative, measurable changes that can be tracked and evaluated."

- Hopper, Bassuk and Olivet (2010)

How to use this checklist

This checklist will provide you the chance to evaluate your current building through the lens of its ability to attend to fundamental human needs in your residents/patients/guests. It is suitable for any building that serves persons who are in physical or emotional crisis where day or overnight services are offered, such as homeless day centers, shelters, permanent supportive housing, in-patient or outpatient mental health services facilities.

With this checklist in hand, perform a walk-through of your building, observing the physical characteristics of the environment such as spatial layout, signage, lighting, and especially how the building supports the procedures that visitors experience. *Ideally, multiple features in a built environment should be present for each indicator.* Consider the extent and nature of evidence for each indicator, then choose a number between 1 (low) and 5 (high) that assesses how well the building performs on each measure in general.

While achieving all 5's is ideal, not all buildings will be strong in all categories. Be honest with your assessments.

Score of 1-5 (1 being low, 5 being high). Information in parentheses shows research sources the support the indicator (see reference list).

Measure and its indicators	An applied example of the indicator (there are many ways to apply the measure to a built environment)	Score (1-5)
Dignity and Self Esteem		
The environment provides flexibility in conforming to necessary rules ²²	People can go in and out each of the main entrance doors	
Individual identity is respected and acknowledged ²²	Beds have a place to write the occupants' name in addition to having a number on them.	
The environment's design neutralizes power differentials ¹	The space plan erases the need to post "staff only" signs in major hallways.	
The environment communicates positive messages ¹⁷	Art or other styles of positive messaging are present. Color palettes are optimistic.	
Objects and surfaces that invoke negative associations and memory triggers are avoided ¹⁷	Black metal furniture that evokes memories of prison are excluded from use	
Empowerment/Personal Control		
Visitors can alter the environment to suit their preferences ^{17 7}	Waiting room chairs vary in size and shape to suit different body types.	
Visitors can choose their preferred degree of social engagement	"Away" spaces, alcoves of seating next to large gathering spaces, let people engage to the degree that they wish.	
Excessive rules and policies leading to learned helplessness are avoided ⁷	Residents are permitted to choose from a selection of programs and meetings.	
Visitors have a say in built environment-related policies ¹⁷	Residents can post "Yes" or "No" signs next to their bedroom area to indicate they will accept visitors or not.	
Perceived surveillance by staff is minimized	Doors to private areas have locks, and/or staff have a policy of knocking and calling out to room occupants for x seconds before entering	

Security, Privacy and Personal Space		
Safe storage is present in sufficient quantities and is easy to access and use	Day-use or overnight storage for visitor's belongings is easy to use, access and controlled access by visitor	
Clear spatial boundaries are present and easy to detect ¹⁷	In the case of large facilities with general multi-function rooms, areas for staff and visitors are demarcated and intuitively clear to visitors	
The space is not mysterious or frightening and offers predictable cues/information for its use ¹⁷	Corridors are wide with clear sight lines. Lighting offers intuitive support to wayfinding.	
Sense of safety is present ¹⁷	Space planning permits vulnerable visitors to be shielded from scrutiny by others	
Visual privacy is present through positive sight lines or other visual barriers ^{28 7}	Congregate-room beds have privacy curtains	
The environment provides sound privacy ²⁸	Sound-sensitive areas such as confidential check-in areas, bathrooms, and case managers' offices have sound attenuation features.	
Visitors' personal space is respected in the environment's required activities	Chairs and sofas with arms permit visitors to claim space	
The environment does not promote a sense of crowding, either perceptually or physically ⁷	Dutch doors (with top halves that can open) free small bedrooms from a sense of claustrophobia	
Stress management/coping		
Visitors have the opportunity to retreat or withdraw to a place of perceived safety ^{1 22}	Private or semi-private spaces are available for visitors to use if crowds become uncomfortable	
Noise is not perceived at levels that affect behavior or perception	Acoustic wall or ceiling panels or other soft surfaces reduce reverberation in large spaces.	
The environment provides a sense of calm ambience ¹	Color, pattern, the volume of space, finishes and other characteristics combine to promote a sense of tranquility	
The environment provides perceptual and/or physical access to nature or natural elements ¹⁸	Windows to a garden or interior plants provide a sense of organic proximity	
Sense of Community		
The environment promotes a sense of camaraderie and collaboration ¹	Corridors and rooms are placed to encourage regular encounters, and communication opportunities such as message boards support outreach amongst users	
The space is conducive to forming and being a member of a group ²²	Furnishings that form clustered centers foster conversation	
Beauty and Meaning		
The space exudes a sense of 'homeyness' ²¹	Natural finishes, residential-style lighting, spatial details and other elements combine to evoke places of comfort	
The environment provides the ability to organize one's belongings/avoid chaos ^{1 3 5 24}	Sleeping spaces not only have adequate storage for belongings, but also allow residents to organize or categorize their possessions	
Total points earned of 130		/130

Scoring

104-130	The environment shows evidence of thorough attendance to all or most indicators
78-103	The environment attends well to many indicators
54-77	The environment may attend well to some indicators, moderately to most, or may ignore some indicators
30-53	The environment is deficient in multiple indicators
Below 30	The environment rarely attends to indicators and/or does so at a low level of thoroughness

It may also be informative to average the score across those indicators under a particular measure (dignity, empowerment, etc.) to determine if certain human needs are addressed more or less than others.

References

1. American Association of Children's Residential Centers (2010). Redefining residential: trauma-informed care in residential treatment. Retrieved from www.aacrc.dc.org.
2. Banyard, V., & Graham-Bermann, S. (1998, July). Surviving Poverty: Stress and Coping in the Lives of Housed and Homeless Mothers. *American Journal of Orthopsychiatry*, 68(3), 479-489.
3. Baum, A., & Davis, G. (1976). Spatial and social aspects of crowding perception. *Environment and Behavior*, 8, 527-544.
4. Baum, A., Gatchel, R., Aiello, J., & Thompson, D. (1981). Cognitive mediation of environmental stress. In J. (. Harvey, *Cognition, social behavior, and the environment* (pp. 513-534). Hillsdale, NJ: Erlbaum.
5. Bitner, M. J. (1990). Evaluating service encounters: The effects of physical surroundings and employee responses. *The Journal of Marketing*, 69-82.
6. Bubloz, M. & Sontag, S. (1993). Human Ecology Theory. In *Sourcebook of Family Theories and Methods: A Contextual Approach*. P.G. Boss, W.J. Dohert, R. LaRossa, W.R. Schumm, and S.K. Steinmetz, ed. New York: Plenum Press, p. 419-450.
7. Burn, S. (1992). Loss of Control, Attributions, and Helplessness in the Homeless. *Journal of Applied Social Psychology*, 22(15), 1161-1174.
8. Comerio, M. C. (1987). Design and empowerment: 20 years of community architecture. *Built Environment* (1978-), 15-28.
9. Cross, J. E. (2001). What is sense of place? In Archives of the Twelfth Headwaters Conference. Gunnison, CO: Western State Colorado University. Found at http://western.edu/sites/default/files/documents/cross_headwatersXII.pdf
10. Duttweiler, P. (1984). The Internal Control Index: A Newly Developed Measure of Locus of Control. *Educational and Psychological Measurement*, 44, 209-221.
11. Epel, E., Bandura, A., & Zimbardo, P. (1999). Escaping homelessness: The influences of self-efficacy and time perspective on coping with homelessness. *Journal of Applied Social Psychology*, 29(3), 575-596.
12. Elias, J.E., & Inui, T.S. (1993). When a house is not a home: Exploring the meaning of shelter among chronically homeless older men. *The Gerontologist*, 33(3) 396-402.
13. Evans, G., Schroeder, A., & Lepore, S. (1996). The Role of Interior Design Elements in Human Responses to Crowding. *Journal of Personality and Social Psychology*, 70(1), 41-46.
14. Finley, S. & Barton, S.C. (2003). The power of space: constructing a dialog of resistance, transformation, and homelessness. *Qualitative Studies in Education* 16(4), 483-487.
15. Goering, P., Durbin, J., Trainor, J., & Paduchak, D. (1990). Developing housing for the homeless. *Psychosocial Rehabilitation Journal*, 13(4), 33-42.
16. Guthrie, K. A., & O'Donnell, C. (n.d.). Trauma-informed care: Building environments that lead homeless veterans toward recovery. Parts I & II. PowerPoint presentation.
17. Hopper, E., Bassuk, E. and Olivet, J. (2010). Shelter from the storm: trauma-informed care in homelessness services settings. *The Open Health Services and Policy Journal* 3, 80-100.

18. International Well Building Institute (2015). WELL Building Standards version 1. Retrieved from <https://www.wellcertified.com/>
19. Kim-Godwin, Y. S., Clarke, P. N., & Barton, L. (2001). A model for the delivery of culturally competent community care. *Journal of Advanced Nursing*, 35(6), 918-925.
20. Lepore, S., Evans, G., & Schneider, M. (1991). Dynamic role of social support in the link between chronic stress and psychological distress. *Journal of Personality and Social Psychology*, 61, 899-909.
21. McCracken, G. (1989). "Homeyness": A cultural Account of One Constellation of Consumer Goods and Meanings. In E. Hirschman, *Interpretive Consumer Research* (pp. 168-183). Provo UT: Association for Consumer Research.
22. Miller, A. and Keys, C. (2001). Understanding dignity in the lives of homeless persons. *American Journal of Community Psychology*, Vol. 29, No. 2, 331-354.
23. National Center on Domestic Violence, Trauma & Mental Health (2011). Tips for creating a welcoming environment. Creating trauma-informed services: Tipsheet Series. Retrieved from www.nationalcenterdvtramamh.org.
24. Neale, J., & Stevenson, C. (2013). A qualitative exploration of the spatial needs of homeless drug users living in hostels and night shelters. *Social Policy and Society*, 122(4), 533-546.
25. Newell, P. (1995). Perspectives on Privacy. *Journal of Environmental Psychology*(15), 87-104.
26. Orth, U. R., & Wirtz, J. (2014). Consumer processing of interior service environments: The interplay among visual complexity, processing fluency, and attractiveness. *Journal of Service Research* 17(3), 269-309.
27. Seligman, M. (1975). *Helplessness*. San Francisco: Freeman.
28. Sikorska-Simmons, E. (2001). Development of an instrument to measure resident satisfaction with assisted living. *Journal of Applied Gerontology*, 20(1), 57-73.
29. Stewart-Pollack, J. & Menconi, R. (2005). *Designing for privacy and related needs*. New York: Fairchild.



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We value your thoughts and suggestions for this emerging tool. Please feel free to contact us to discuss its application or improvement!