

NCRM resource for trainers



Safety first: being trauma sensitive when delivering training

No trainer/educator sets out to cause upset or distress to participants on the course, nor is there an intention to exacerbate trauma, trauma being the sustained effects on functioning and wellbeing of harmful experience(s). Moreover, generally participants do not experience re-traumatisation from participation in trauma-related research or training. Yet it remains a risk if the trainer is inexperienced or has not considered potential risks; trauma-informed pedagogy is less well understood than trauma-informed care or even research.

Experiencing trauma is more prevalent than we may realise, and we need to be informed. This means understanding the role trauma may have played in our participants' lives and planning accordingly as we are mindful of how this could be triggered or exacerbated through our training in terms both of methods of teaching, as well as the content.

This resource gives some basic steers to care-full, ethical practice so that we are aware of what to do if teaching makes participants distressed, as well as how we can modify our teaching to ensure that we are trauma informed. It also provides signposts to additional resources to learn more.

The resource was created NCRM's pedagogy lead, Professor Melanie Nind, in November 2024.

A: Nature of the training

Is your training concerned with data but not people?

If yes there should be little risk, but see C regarding examples, and remember that sustained engagement with difficult data can lead to vicarious trauma or harm to wellbeing.

Does your training pertain to or involve embodied practices or use of arts-based/co-productive/creative methods?

If yes, there is potential here to risk distress of course participants. Be aware of what you are asking participants to do, as well as the kinds of examples that you are using.

If the focus of your training is methods for sensitive arenas such as child poverty, mental health or violence, have you considered safe ways to address this?

You might want participants to experience methods working with their bodies or past experiences, but there are ways to practice these methods while focusing on a less emotionally charged part of the work such as research design.

Is your training in person or online? Have you prepared adequately to build trust in whichever scenario?

You should build in times when the intensity is reduced and to allow for breaks as needed.

B: Content and pedagogic approach outline

Is the material shared with potential course participants about the course accurate and detailed enough to allow people to know whether it is a safe and wise choice for them?

Consider warning people that the course will involve talking about sensitive topics, whole body exercises, using the senses etc. Participants will then be able to make an informed judgement about the course.

Have you thought about course participation in terms of necessary informed consent?

Just like research participants, course participants need to know what they are signing up for.

C: Training examples/exercises

Have you given careful consideration to the potential of the training examples/ exercises/ slides to be upsetting?

You may need to weigh up whether content is safe and appropriate or excessively risky. Remember topics that are everyday to you can trigger an emotional response based on past experience for others. Also think about whether these examples are necessary to teach what you are teaching, ask yourself what purpose they serve.

Is there a less emotional/ sensitive example/ exercise you can use instead of focusing on suicide datasets or childbirth experiences for example?

If so, minimising risk is straightforward.

If you need to focus on a sensitive topic in your training, do you need to ask course participants to share?

If not, don't; that will help reduce risks associated with revoicing events or use of triggering vocabulary.

D: Knowledge of the people involved

If you are employing co-facilitators, do you know enough about them to trust them to be sensitive to risks in this context?

Make sure you plan the ethics and care involved in the training with them. Make sure they are aware of the potential issues around course design and use of examples and exercises.

If you are engaging course participants as co-facilitators for a section of the training, have you prepared them appropriately and created a safe environment?

Remember that not all trainers and course participants are familiar with the ethics standards we expect.

E: Giving people choices

If you want to include training exercises that risk causing distress, have you thought about how you will make these optional?

Try to provide a viable set of options or an alternative exercise that does not require exposing people as having had bad experiences.

If you decide you need to include content that could be upsetting, have you considered the timing of this?

It is good to make sure you have established some rapport with participants, that you have created a safe space, and that this is not the first or last thing you do with them.

Have you included a range of ways to help course participants with emotional regulation, such as skipping questions, pausing, or switching mode of communication?

Do find ways to check how they are doing in terms of emotion as well as understanding.

Have you prepared referral material?

Just as you would in a research project, it might be useful to have links to local/national support organisations or trauma-informed care resources available as needed if your training is in an area where this could be appropriate.

Does your training enable course participants to hold on to their power, choices and boundaries?

It should.

Additional resources

ACE Hub Wales. 2022. ['Trauma-informed': Identifying Key Language and Terminology through a Review of the Literature](#)

Carello, J., & Butler, L.D. 2015. [Practicing what we teach: Trauma-informed educational practice](#). *Journal of Teaching in Social Work* 35(3), 262–278.

Isobel, S. 2021. [Trauma-informed qualitative research: Some methodological and practical considerations](#). *International Journal of Mental Health Nursing* 30, 1456-1469.

Goodwin, J., & Tiderington, E. 2020. [Building trauma-informed research competencies in social work education](#). *Social Work Education* 41(2), 143–156.

Harper, G.W., & Neubauer, L.C. 2020. [Teaching during a pandemic: A model for trauma-informed education and administration](#). *Pedagogy in Health Promotion* 7(1), 14-24.

Pichon, L. C., Teti, M., & Brown, L. L. 2022. [Triggers or prompts? When methods resurface unsafe memories and the value of trauma-informed photovoice research practices](#). *International Journal of Qualitative Methods* 21.

Roesch-Marsh, A., Critchley, A., and Tongue, S., (2023) [Poetry for Wellbeing Toolkit](#). Scottish Poetry Library.

Voith, L.A., Hamler, T., Francis, M.W., Lee, H., & Korsch-Williams, A. 2020. [Using a trauma-informed, socially just research framework with marginalized populations: Practices and barriers to implementation](#). *Social Work Research* 44(3)169–181.

<https://www.gov.uk/government/publications/trauma-informed-practice-learning-from-experience/trauma-informed-practice-learning-from-experience-of-violence-reduction-unit-delivery-2021-to-2023-accessible>