The BRIDGE Housing Corporation's Trauma Informed Community Building model is a research-based guide to using trauma-informed engagement practices and interventions to strengthen communities.

The Trauma Informed Community Building Model was developed by BRIDGE Housing Corporation and the Health Equity Institute at San Francisco State University. The research-based model was first described in the publication Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods, written by Emily Weinstein, Jessica Wolin, and Sharon Rose.

The model was then revised and updated in 2018 with the publication of Trauma Informed Community Building: The Evolution of a Community Engagement Model in a Trauma Impacted Neighborhood. For the revised version, BRIDGE Housing worked with Harder+Company Community Research and the consultant Emily Weinstein.

"The Trauma Informed Community Building (TICB) model was developed as a holistic approach to community engagement that recognizes the impacts of community trauma on residents' lives. The TICB model recognizes that community trauma hampers participation in traditional community building and limits the impacts of broader community development efforts. TICB is a proactive model that serves as a precursor to traditional community development: it assumes that communities require a set of common experiences and conditions to participate fully in community building and benefit from sustained community development. Specifically, TICB strategies help de-escalate chaos and stress, build social cohesion, and foster community resiliency, all of which create the foundation necessary to maintain community development efforts. The outcomes of TICB go beyond traditional community building; they support the long-term health and well-being of a community by influencing the institutions that can support community improvements and meet community needs into the future."

Trauma Informed Community Building: The Evolution of a Community Engagement Model in a Trauma Impacted Neighborhood, BRIDGE Housing

Since its initial release in 2014, Trauma Informed Community Building has become a widely referenced guide to utilizing trauma-informed interventions and practices in communities. While the Trauma Informed Community Building Model was developed primarily for use in the public-housing and low-income-housing sectors, the challenges and conditions it describes also adversely impact the
functioning of school communities and the education of children, and principles and strategies it outlines can be readily applied in education organizing and engagement contexts.

While the model is based on an extensive body of research literature, the authors of *Trauma Informed Community Building* (2014) describe how the model is grounded in the alternative community-building strategies and practices used by BRIDGE Housing:

“We present a model of Trauma Informed Community Building (TICB) that addresses the challenges trauma poses to traditional community building strategies. TICB strategies de-escalate chaos and stress, build social cohesion, and foster community resiliency over time. The TICB model is based on BRIDGE Housing Corporation’s experience doing community building work over the past five years in the Potrero Terrace and Annex public housing site in San Francisco. The work in Potrero is part of San Francisco’s HOPE SF initiative, a public-private partnership led by the San Francisco Mayor’s Office to rebuild some of the most distressed public housing in San Francisco. The TICB model effectively takes into account the real-life experiences of low-income and public housing residents.”

The updated version of *Trauma Informed Community Building* (2018) incorporates new resources and lessons learned from communities that have implemented the model:

“Over the years, as we have shared the model and have been challenged by our peers, two questions have persistently emerged—how do you know when TICB is working; how do you define success? In this white paper, we answer these questions by offering an evaluation framework that both assesses the need for and measures the impact of TICB. Additionally, we propose an updated model to more accurately reflect the strategies on the ground and share illustrations of TICB in action in Potrero Hill, San Francisco.”

The Trauma Informed Community Building Model

*Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods* defines community development as “a continuous process of identifying community needs and developing the assets to meet those needs.” The 2014 model describes three interrelated dimensions of trauma-informed community-building practice:

1. A set of trauma-related challenges that can undermine the effectiveness of more traditional approaches to building and strengthening communities.
2. Four foundational principles that can help local leaders, organizers, facilitators, and service
providers integrate trauma-informed practices into their community organizing, engagement, and development activities.

3. Strategies that can help reduce the negative effects of trauma on community-building work at the individual, interpersonal, community, and systems levels.

The updated 2018 version of the model made refinements to these categories and added a Community Assessment Framework that outlines a set of indicators for evaluating community strength and resilience.

**Challenges to Traditional Community-Building Models**

As the authors of *Trauma Informed Community Building* (2014) note, “Ongoing trauma can have lasting adverse effects that compromise an individual’s mental health and overall well-being. Moreover, trauma manifests at the family and community level by altering social networks and reducing community capacity to collectively identify and address its problems and plan for its future. Trauma can also undermine ‘readiness’ for individual and community change—the extent to which community is prepared and inclined to take collective action on an issue.” Consequently, the experience of prolonged trauma—at the individual, family, and community levels—can pose a variety of challenges to community-building work.
The Trauma Informed Community Building Model describes many of the trauma-related challenges that can compromise the effectiveness of traditional community-building strategies, including diminished levels of trust and social cohesion; an absence of stability, reliability, and consistency in the lives of residents; an inability to envision a more hopeful future or set long-term goals; internalized feelings of disempowerment or despair; and overwhelming amount of individual and community needs that require intensive support or significant resource investments. Source: *Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods*, BRIDGE Housing (2014)

In *Trauma Informed Community Building* (2018), the authors provide an overview of seven interrelated challenges:

<table>
<thead>
<tr>
<th>CHALLENGES TO TRADITIONAL COMMUNITY BUILDING STRATEGIES</th>
<th>TRADITIONAL COMMUNITY BUILDING EXAMPLES</th>
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<tbody>
<tr>
<td><strong>Build Social Networks.</strong> A thriving community has a strong social fabric, woven together by the connections between people. Building social networks is an essential piece of strengthening a community.</td>
<td><strong>Build Social Networks:</strong> Bring people together for a community BBQ, party or potluck.</td>
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<td><strong>Engage residents in planning and vision setting.</strong> Community building efforts often turn to community members to envision solutions to community problems and determine community issues and priorities.</td>
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<td><strong>Leverage community capacity to solve collective problems.</strong> Existing community groups may be enlisted to address community issues or new groups may be created to tackle common concerns.</td>
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<td><strong>Collaborate with systems and organizations to improve social and community outcomes.</strong> As part of community building efforts, city agencies, local foundations and other institutions often seek out partnerships with community representatives and organizations to fund and implement programs and services that meet resident needs.</td>
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<td><strong>Lack of trust and social cohesion:</strong> Residents don’t want to hang out with each other so they either don’t show up or show up for the food and leave.</td>
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<td><strong>Lack of stability, reliability and consistency:</strong> Residents are tired of empty promises that don’t result in tangible changes or that exist for only a short time so they don’t participate in community building activities.</td>
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1. Breadth and Depth of Personal and Community Needs

Residents who live in trauma-affected neighborhoods deal with the instability and isolation of poverty on a daily basis. The stresses and demands they face in their daily lives impact their ability to engage in community-building activities because they face myriad challenges caused by poverty and institutionalized racism, including poor overall health, substance abuse, and other barriers.

Residents living in trauma-affected neighborhoods require a breadth and depth of resources and services to facilitate their participation in community-building efforts. The negative impacts on community-building activities might include community organizations that are unable to meet the needs of residents due to insufficient funding and lack of capacity, community organizations that are stretched thin and the quality of social services suffers, and high levels of substance abuse impairing the ability of community to participate fully in community-building activities and community interactions.

2. Historical Community Disinvestment

Many trauma-affected neighborhoods lack adequate resources and services due to structural racism and historical disinvestment in their communities. Often this disinvestment results in public systems that are of poor quality and dysfunctional, such as inadequate schools and inaccessible healthcare, transportation, and food options, further exacerbating the impact of community trauma. The negative impacts on community-building activities might include community organizations and other stakeholders being protective of their scarce resources and unwilling to work collaboratively, or residents failing to take advantage of resources because they have been exposed to dysfunctional service systems that have not met their needs.

3. Disempowerment and a Lack of Community Ownership

The experience of historical disinvestment, trauma, and concentrated poverty can result in disempowerment and diminish a community’s sense of ownership. Furthermore, residents may have had negative relationships and experiences with service providers or public agencies, and they may harbor resentment or feel disinterested in investing in their community. The negative impacts on community-building activities might include residents who are depressed or don’t want to leave their homes, who do not have the confidence or skills to serve in leadership roles, or who do not feel that their voices will be heard or that their opinions will make a difference.

4. Distrust and Disconnection
Community relationships and cohesion are critical to community building. Trauma often disrupts these connections and damages healthy and trusting relationships among community members. In communities with high rates of violence, residents harbor real or perceived safety concerns, and they may be hesitant about interacting with neighbors because of negative relationships or past drama. The negative impacts on community-building activities might include poorly attended community meetings and events, residents who won’t open their doors to those conducting outreach, or residents who are skeptical about a community-development process or who believe that it won’t happen.

5. Instability, Unreliability, and Inconsistency

When residents have faced years of disinvestment and negative experiences with agencies and institutions, they are more hesitant to rely on institutions and don’t believe that community-building efforts will result in tangible changes. They also don’t believe, based on their history with “false promises,” that the institutions leading change efforts will be there over time. The negative impacts on community-building activities might include residents expressing a desire to participate in community-building activities but then not showing up, residents not taking advantage of resources because they don’t believe the resources will be sustained over time, and residents exhibiting a wide range of trauma symptoms, such as an inability to focus or pay attention, short tempers and aggressiveness, or impaired decision-making abilities.

6. Residents Being Treated as Service Consumers Not Partners

Residents don’t trust that institutions will meet their needs because they are not involved in defining their priorities or informing the institutions that serve them, and historically never have been. Many residents don’t seek help from systems or institutions because of their experiences, and they don’t see the institutions as adaptable or accommodating to their needs. The negative impacts on community-building activities might include community-based institutions failing to consider the conditions of trauma when they design and implement programs, and residents not taking advantage of services because their needs, concerns, or priorities are not reflected in the program design.

7. Difficulty Envisioning the Future and Positive Change

Residents are often overwhelmed by the realities of their day-to-day lives, and they cannot imagine how things could be different or trust that change will happen. Research shows that the everyday concerns of surviving poverty create such a mental burden that there is little cognitive capacity left to plan and excel in other aspects of life. The negative impacts on community-building activities might include residents not showing up to participate in a community-development planning process, residents having difficulty generating new ideas or proposed solutions, and residents not believing that programs will have a meaningful impact or that their circumstances could change.
The Trauma Informed Community Building Principles

“A program or intervention is trauma informed when it has an understanding of the ongoing impact of trauma on community members’ lives, and when all aspects of its response aim to appropriately address their specific needs and avoid re-traumatization,” according to *Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods* (2014).

Yet the authors also note that trauma-informed models do not have to “treat trauma directly” with therapeutic or clinical approaches. By creating welcoming environments, acknowledging past trauma and special needs, or treating residents with respect and dignity, for example, local leaders, organizers, facilitators, and service providers can establish conditions for more effective trauma-informed organizing, engagement, and community-building work.

To this end, the Trauma Informed Community Building model outlines a set of four foundational principles, which are “not specific procedures but instead a set of values that influence all of the work.” The four principles as described in the original version of the model:

**1. Do No Harm**

Be aware of past and current trauma and promote activities, programs, and services that avoid re-traumatizing individuals and the community. TICB recognizes mental-health triggers in the community and consciously creates environments that de-escalate stress and provide opportunities for mental-health support. It is also important to acknowledge that traumatized communities face ongoing insecurities around the sustainability of programs, services, and institutional relationships. Therefore TICB only engages in activities when financial sustainability and organizational structure are guaranteed for multiple years and is not only focused on short-term activities.

**2. Acceptance**

Meet residents where they are, accept the realities of the community conditions, and set expectations accordingly. TICB recognizes that residents in trauma-affected communities cope in a variety of ways and participate in activities for a variety of reasons. All members of the community are welcome to participate and TICB makes every effort to adapt activities to the realities of violence, mental-health conditions, substance abuse, and other trauma-related issues. In accord with understanding community readiness, TICB sets goals that allow residents to grow, but does not push them past their capacity or understanding of an issue. By accepting all community members where they are in their
lives, TICB can set realistic expectations and goals for the long-term outcomes and community improvements.

3. Community Empowerment

Recognize the importance of self-determination to encourage community investment and that everyone can play a supportive role. Inclusiveness is core to community development in trauma-affected neighborhoods, where generations have been marginalized from development processes and excluded from reaping the benefits. Community empowerment theory explains the importance of equitable participation and accountability among stakeholders to build community perception of ownership over change. The process of empowerment begins at any stage of readiness to ensure community members feel control over the change that they are experiencing. Peer support in particular promotes a sense of hope and control, and validates individuals’ actions as having meaning and value, which is necessary for visioning for the future and actualization of plans.

4. Reflective Process

Take a sustained approach over multiple generations to improve outcomes in a trauma-impacted community. TICB engages in an ongoing reflective practice that responds to new developments and knowledge, and is constantly adjusting to meet the needs of the community and the overall vision for the neighborhood. It prioritizes working towards distinct community-building outcomes, such as increased social cohesion, resilience, and collective vision of change. Though its objectives should not be subsumed by larger community-development goals, TICB provides a foundation for coordinated community development and the delivery of programs and services. TICB activities carry on throughout all the development phases. Once awareness of trauma is raised, TICB continues to incorporate the voice of residents into the planning of physical development and program and service design so that they address the root causes of trauma.

Trauma Informed Community Building Strategies

According to the authors, the Trauma Informed Community Building model “does not prescribe a set of activities, but rather a set of intentional strategies that address the challenges that trauma poses to traditional community building efforts,” and that also recognize “the impacts of sustained stress and trauma in all aspects of neighborhood well-being.”

The strategies described in Trauma Informed Community Building are based on the Social-Ecological Model, a framework that represents the complex and dynamic relationship between individuals and
The Trauma Informed Community Building Model does not outline a set of prescribed activities, but instead describes foundational principles and strategies that can be adapted to meet the specific needs and challenges in a given community. Source: Trauma Informed Community Building: The Evolution of a Community Engagement Model in a Trauma Impacted Neighborhood, BRIDGE Housing (2018)
The Trauma Informed Community Building model described the following strategies:

**Individual Strategies**

- Express understanding and acceptance of individual experiences and circumstances, even if they pose challenges to or complicate community-building activities.
- Have multiple intentional interactions with individuals and families to engage them in a community-building process, and ensure that these interactions are genuine and focused on building relationships and trust.
- Provide incentives and tangible rewards, whether it’s a compliment or a gift card, to help residents feel a stronger sense of accomplishment or self-efficacy.
- Set realistic expectations and don’t overpromise so that residents will not feel disillusioned or re-traumatized if their commitment to a process fails to produce promised results or benefits.
- Meet residents where they are, eliminate barriers to participation, and make activities open, inclusive, accessible, and unintimidating.
- Provide opportunities for joy, physical activity, and fun.
- Provide residents with opportunities to experience self-determination and a sense of accomplishment.

**Interpersonal Strategies**

- Create environments that are welcoming, safe, and accepting so that residents can have positive experiences with community-building organizers and their fellow community members.
- Provide opportunities for residents to share personal feelings, experiences, and stories in a supportive, nonjudgmental context.
- Model healthy and respectful behaviors to help establish new norms and expectations for community interactions.
- Promote peer-to-peer strategies that build social capital and cohesion, and that position residents to play important roles in the community-building process, including social connectors, information providers, grassroots organizers, group facilitators, or cross-cultural liaisons, allies, and advocates.
- Integrate relaxation, mindfulness, and gratitude exercises into programs.
- Help residents learn conflict-management skills and build a stronger sense of mutual accountability and interdependence toward one another.

**Community Strategies**
Create visible and accessible opportunities for participation that allow residents to be involved in decision-making and to experience the tangible benefits or results of positive community change.

Ensure that communication is frequent, consistent, and dependable to build awareness of community-building opportunities and outcomes.

Cultivate community leaders by building the knowledge, skills, and leadership capacities of residents, and by creating formal and informal leadership opportunities for residents.

Create opportunities for relationship-building among residents from different income levels and cultural backgrounds.

Expand programs incrementally and build on past successes to instill ownership and cultivate a long-term commitment to sustaining community-building programs.

**Systems Strategies**

- Ensure that community-building work reflects the needs, concerns, priorities, and perspectives of residents, and elevate community voices throughout the process.
- Increase the knowledge, skill, and capacity of local leaders, organizers, facilitators, and service providers to recognize trauma and utilize trauma-informed practices.
- Communicate honestly and transparently, and invite community feedback even if it’s critical.
- Develop and implement a long-term vision and community-wide strategy for addressing trauma, rebuilding relationships, and advancing justice, equity, healing, and health in the community.
- Establish a high-capacity institution that can coordinate partners and work toward a long-term vision and goals.
- Build strategic partnerships with trauma-informed partners, service providers, and funders; clearly define partnership roles, responsibilities, and expectations; and hold partners accountable to results.
- Provide opportunities and support for outside organizations to engage residents in authentic ways.
The Trauma Informed Community Building theory of change illustrates “how the short-term impacts of the Trauma Informed Community Building principles and strategies provide the fertilizer to grow a healthy community development tree, including the delivery of programs and services, traditional community building, and quality affordable housing.” Source: Trauma Informed Community Building: The Evolution of a Community Engagement Model in a Trauma Impacted Neighborhood, BRIDGE Housing (2018)
Community Assessment Framework

In Trauma Informed Community Building: The Evolution of a Community Engagement Model in a Trauma Impacted Neighborhood (2018), the authors provide a Community Assessment Framework that can be used by community leaders, organizers, and facilitators to help determine whether trauma-informed strategies are working. The authors note that the evaluation framework is “intended as a guide rather than a standardized battery” and that it should be considered a work in progress.

The framework describes several “indicators of community strength” that are based on “understanding the conditions of trauma and reversing the conditions that pose the greatest challenges to traditional community building,” along with a set of companion questions that evaluators can use during interviews with residents who have participated in trauma-informed community-building activities.

Acknowledgments

Organizing Engagement thanks the BRIDGE Housing Corporation for reviewing this introduction and for permission to republish excerpts and images from Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods (2014) and Trauma Informed Community Building: The Evolution of a Community Engagement Model in a Trauma Impacted Neighborhood (2018).

References


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