

Ki Te Ao Mārama: Understanding trauma-informed approaches & pathways to healing | Workshop 1 | 11 March 2026

Session one: Understanding the essentials of a trauma-informed approach in Aotearoa | New Zealand | Questions and answers

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Question / discussion topic / theme	Response
What is the difference between trauma and “informed trauma”?	Trauma is the experience and effects of a traumatic event. Trauma-informed care is an approach where trauma is considered in all aspects of a person’s care, including mental health assessment and therapeutic approaches.
Holding space vs. controlling space	Holding space refers to giving people time and attention so that their story can unfold and be accepted rather than rushed through. Controlling space is part of all therapeutic work as it involves boundaries that help people feel safe but holding refers to creating a safe emotional space.
How relevant is it to identify the traumatic event	Most people can talk about the event but if someone cannot do so, it is important that they are not pushed into doing so. It is not necessary to know the details unless the tangata whai ora is doing exposure therapy. However, when a diagnosis is required, PTSD or CPTSD cannot be diagnosed unless an event is identified.
Is play therapy effective with child trauma?	The play talked about in the webinar is a way to help tamariki to communicate their thoughts and feelings. Play therapy does have evidence of effectiveness with child trauma however trauma-focused CBT is the gold standard. When children cannot communicate verbally about their trauma, play therapy is an invaluable approach.
Trauma and ADHD	This is a controversial issue as many people are concerned that tamariki are being diagnosed with ADHD and trauma may be missed. Some behaviours seen as hyperactive may be agitation relating to insecure attachment and trauma. However, there is also an overlap with tamariki with ADHD being more likely to have accidents and tamariki in foster care have high levels of both – how they interact is a matter for more research.
Advice for supporting rangatahi if you cannot offer ongoing sessions and they are not yet ready to talk about their trauma.	This is a difficult situation and happens often when services cannot meet rangatahi needs. Sources of support can include an empathic teacher, a school counsellor who can support the rangatahi emotionally if they are not ready to talk about the trauma and there are a lot of things that can help such as peer support, a mentor, equine therapy, sport and anything which gives a sense of accomplishment.

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How to close a time limited session safely	Often tangata whai ora need longer sessions, so leave time between sessions in case it is needed. Grounding and breathing exercises are useful and can help with dissociation when the person may not be fully present. The window of tolerance is also useful here as a guide to not opening up the trauma too much, although this is not always easy to do.
I work in a high-security refugee resettlement centre, where being the mental health agency often means clashing with the onsite security running lockdown trials, fire alarm practices, which are very triggering for a lot of our clients.	This is where the whole organisation using a trauma informed approach really matters. This requires all staff being on the same page to minimise further trauma. Pre-warning the clients onsite and offering emotional support is essential. If possible, run the trials/tests when the clients are not in the building.
Any suggestions to support people with severe mental illness from trauma who can't sustain tenancies and become homeless?	This is a very difficult situation as the person is often not in a situation to work through their traumatic experiences and there may be barriers such as drug and alcohol use. The traumatic stress may be preventing the very things you are trying to achieve. It is important to provide safety, stability, emotional support and empathy, and listen to whatever the tangata whai ora wishes to say about the trauma. Validation of their experiences is crucial.
How would you navigate trauma if the situation is still active and ongoing for a client?	When trauma is active and ongoing, you may need to take action to keep the tamariki safe. In some situations, this may involve speaking to the child's parent, if it is safe and appropriate to do so, or you may need to report abuse and neglect to Oranga Tamariki. It can be helpful to discuss this with someone knowledgeable so that a safe decision is made. Providing emotional support is crucial for the tamariki and whānau going through this process.
Appropriate responses to trauma disclosure in schools	When a tamariki discloses abuse to a teacher they have been chosen as a safe person and they need to listen without asking questions. Some clarifying questions may be needed such as identifying who did the action, when it occurred and if the perpetrator is still around. This informs next steps. Each school has a child abuse policy which should be followed, along with a team if available. Teachers can then provide emotional support.
In peer support, how do you refrain from using clinical language and questions? Especially when we are so used to hearing this ourselves.	This was discussed in the second workshop in this series; please refer to the Q&A document from the Understanding trauma through lived experience How systems can shape experience session for this information.