

Trauma-Informed NRM Referrals

First Responder Conference



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What does it mean to be *trauma-informed*?

- *Demystifying trauma* and understanding how it may present & impact upon the people
- Best *guidelines* on how to work with survivors of trafficking (or any other individual)
- Could be applied in *any environment* and with *any individual*
- *Respect, acknowledgement & compassion*

Why should we be trauma-informed when making NRM referrals?

- Increase the *confidence* of survivors and minimise the risks of causing distress and re-traumatisation
- Impart a consistent sense of **calm, security** and **safety**
- Establish and maintain a **mutual relationship of trust** with survivors in any working context or environment
- **Help professionals** to remain safe and well in the course of their work, avoiding secondary traumatisation and professional 'burnout'

Providing an end-to-end trauma-informed NRM referral experience will be a function of:

- What we do *before* processing a referral
- What we do *during* the referral process
- What we do *after* the referral process/interview

Trauma-informed working before you process a referral

- Informed *consent*
- Read other *documents* available
- *Engage* with professionals
- Use safe, trauma-informed and accessible *space*
- Book an *interpreter*
- *Legal* advice

Trauma-informed working during the referral process

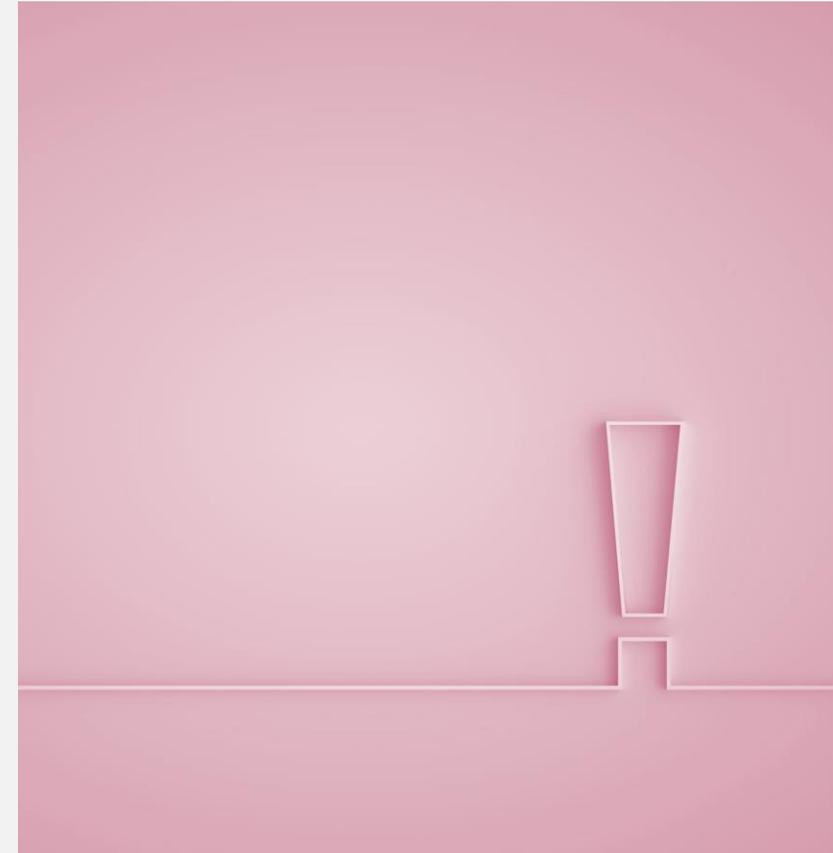
- Build a relationship of *trust*
- Check the preferred *name(s)*
- Clearly state *confidentiality, impartiality* and *duty*
- Get informed *consent* (be clear about what NRM is)
- *Explain* the roles & process
- Allow *time* & offer *breaks*
- *Empathise* & *recognise* feelings (and ground, if necessary)
- Use open or closed *questions*
- Do not make *assumptions*
- Consider *current safety* & circumstances

Trauma-informed working after the referral process/interview

- *Read back* the referral
- Consider any *imminent risks* (homelessness, risk of re-trafficking etc.)
- Explain the *next steps*
- *Debrief* with the interpreter, other professionals
- Follow *safeguarding* procedure
- Clinical *supervision*

Important to remember

- Many survivors experience psychological distress as a result of traumatic experiences. There is *no uniform presentation*.
- *Feelings of shame & humiliation* could affect the outcome of any assessment/appointment.
- *Avoidance* of speaking about traumatic events (due to fear of PTSD symptoms) is frequent.
- If survivors' *initial impression* is positive, they will be far more likely to engage.
- The *concepts* of 'trafficking', 'exploitation' and 'slavery' can be confusing or have little meaning for some survivors.





THE TRAUMA-INFORMED CODE OF CONDUCT

For all Professionals working with Survivors of
Human Trafficking and Slavery

By Rachel Witkin and Dr Katy Robjant



Useful resource

Thank you!
