

Implementing a Four-Phased

# Trauma Informed Design Process

Promoting Physical Health,  
Mental Health, and Well-Being Through  
Trauma-Informed Design

Shopworks Architecture

University of Denver  
Center for Housing and  
Homelessness Research

Group14 Engineering



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# Introduction

## The Beginnings of our Trauma-Informed Design

**In 2015, a team of us (architects, social service professionals, and housing developers) were designing the first new homeless shelter built in Denver from the ground up in decades.**

This shelter would accompany 35 units of permanent supportive housing and 95 units of workforce housing. At that time, the shelter was implementing a best practice known as trauma-informed care (TIC) – one that is now expected of all organizations who walk alongside those experiencing homelessness. The practice of TIC acknowledges the impact of trauma on physical and mental health, particularly how it impacts brain development, and how services should be responsive to individuals who have adapted to particular experiences of trauma.

Our team conducted extensive research on the intersection of TIC and building design, thinking that surely others were designing spaces with trauma and healing mind. However, we could not find many resources to draw upon. Once our building was opened, our team committed to continuing our exploration of trauma-informed design (TID) and sharing our findings with the affordable

housing community, that we might assist others in designing TID spaces. Centering TIC best practices as our foundation, we carried out an initial study with residents and staff of three Permanent Supportive Housing (PSH) sites in Colorado. From the residents and staff, we learned which aspects of the built design were helpful, safe, community-building – and which aspects were not. Those findings led to the development of our TID framework, housed in our first white paper: ["Designing for Healing, Dignity, and Joy: Promoting Physical Health, Mental Health, and Well-Being Through Trauma-Informed Design."](#) We encourage you to read our first white paper before diving into this one, as it will provide helpful context for this work. Included on the next pages are an overview of our framework, and the summary of our main findings from that research.

In our first paper, the goal was to "shift our focus from housing people to healing people – and ultimately to promoting dignity and joy through a built environment in which all people can thrive." As practitioners who are committed to this work, we are excited to take the next step in our commitment to that ideal.



## Trauma-Informed Design Framework



In our first paper, the goal was to “shift our focus from housing people to healing people – and ultimately to promoting dignity and joy through a built environment in which all people can thrive.” As practitioners who are committed to this work, we are excited to take the next step in our commitment to that ideal.

See full publication at: [shopworksarc.com/tid](http://shopworksarc.com/tid)



**Dr. Nadine Burke  
Harris' Ted Talk**

# Core Values

**Informed by Pable's "six human qualities that most people desire for physical and mental health in the places they inhabit" ([designresourcesforhomelessness.org](http://designresourcesforhomelessness.org)) as well as our work with residents and practitioners in affordable housing, we have arrived at a set of core values that must be prioritized during the design process by all members of the housing team.**

**Hope, Dignity, and Self-Esteem**

We celebrate each individual's inherent worth, communicating positivity, emphasizing strengths, and maximizing potential.

**Connection and Community**

We create spaces that encourage camaraderie and collaboration—among residents as well as between residents and staff—and offer the opportunity to belong, helping residents to rebuild relationships built on trust.

**Joy, Beauty, and Meaning**

We honor culture and identity while creating spaces that spark and nurture imagination, hope, and aspiration.

**Peace of Mind**

We cultivate a comfortable, calm ambiance that supports relaxation, self-soothing, stress management, and coping through design details such as lighting, sound mitigation, natural elements, and access to nature.

**Empowerment and Personal Control**

We encourage individual agency, welcome self-expression, and offer choices for residents.

**Safety, Security, and Privacy**

We understand that residents' perceived safety is just as important as actual safety. We prioritize clear wayfinding, sight lines, and boundaries; minimize negative triggers; offer vantages of both prospect and refuge and paths of retreat; and recognize the role of program staff in creating a sense of safety and security.



# The 3 C's of Designing for Health and Healing

From the core values that guide our trauma-informed design approach, we've operationalized three key concepts of trauma-informed design—the "3 C's"—to extend our work to the higher-level needs on Maslow's hierarchy and shift from providing housing to promoting healing:

# 1

## **Choice**

Emphasizes individual access, agency, and ownership; describes elements of personalization (e.g., color selection or furniture arrangement) and level of resident engagement with the space (e.g., choosing between relaxing in a community space or in one's own apartment)

# 2

## **Community**

Responds to the ways that residents may engage—with staff, other residents, and guests—through placement and design of programmatic spaces, office spaces, and public gathering spaces that facilitate relationship-building

# 3

## **Comfort**

Includes aspects such as the quality and variety of materials; sensory experiences of light, sound, and smell; and elements such as nature and artwork that bring calm or spark joy

Together, these core values and key concepts frame the intent of the trauma-informed design process and influence design decision-making across all building systems and features—from natural elements and access to nature, to safety and security, to circulation and wayfinding, to light and color, to flexibility and scale.





## The Response to Our Research

In June 2019, we finalized our first white paper. Our intention was to create something that might assist the affordable housing industry with tools on how best to implement TID on future developments. Our hope was that we might present to a few large groups and, more importantly, collaborate with and learn from one other. We were overwhelmed by the positive response to our findings.

Instead of a few conversations, as initially anticipated, in the last two years our team has trained over 1,400 people on our understanding of TID. We have dialogued with diverse voices and directly impacted over 30 housing developments. We have been profiled in the ULI Land Magazine, The Denver Real Estate Journal, and The Colorado Sun, among other publications. We facilitated TID research discussions with small housing groups across the country as well as led a national webinar with [Enterprise Community Partners \(found at \[shopworksarc.com/tid\]\(https://shopworksarc.com/tid\)\)](https://shopworksarc.com/tid). Our research team receives weekly requests to join conversations with architects, developers, non-profits, and academics from Rhode Island to California. Most excitingly, we have encountered many like-minded individuals who are exploring the concepts of TID and eager to create spaces that support the mental health and well-being of future occupants.

We have continued to evaluate TID processes on our own building projects. In the last two years, we have implemented the TID process on over 15 buildings and interviewed over 500 individuals (staff and residents) about how the built environment has, or has not, met their needs. Every one of those conversations with residents and staff - the true experts of this work - have generated new learning about what it means to heal, connect, and thrive.

Through all this work, we continue to receive a common request from the community asking for specific examples of what a trauma-informed design process looks like in practice. Our multidisciplinary team - comprised of researchers and academics in the fields of architecture, anthropology, and social work, an architect with over 30 years of design experience, an expert in biophilia and sustainability, and a former non-profit who managed a homeless shelter and built housing - continually iterates our methods and analysis to add depth, breadth, and rigor to our work. While we are constantly learning and refining our process, we want to share what we have and where we are now. This document aims to offer the affordable housing industry a starting point for carrying out a trauma-informed design process and to open the door to your input and experience.

**People continue to request deeper guidance on what a TID Process looks like. This pamphlet is our response to that request.**

# How To Use This Paper

## **The following pages contain an overview of how we implement TID in our development process.**

This is not a checklist but more about how the process can be impacted and improved when we seek to design with an understanding of trauma as a core value. Shopworks Architecture has refined this process by implementing a TID approach on over 15 of the affordable housing developments on which we have served as the architects and designers. We know the process will continue to evolve with feedback from the wider community and offer this initial version to assist others as they seek to implement TID.

We know firsthand that the capacity of teams who are developing affordable housing is always limited, as are the budgets for these developments. However, we believe that investment of time focused on TID on the front-end of projects can actually save time and money in the long run. When a team can align around a shared vision and values from the early design phases, decision-making becomes easier as the project progresses.

This paper begins with a summary of the “Four Phases of the TID Process.” These are the critical steps for ensuring that TID is implemented on each project from initial values-setting, to focus group research, to guidance on an iterative design process, to post-occupancy evaluation. Then, we feature two case studies that illustrate the TID process

carried out on developments that each serve a unique population. We created a detailed TID manual that follows the Four Phases of a TID Process (found at [shopworksarc.com/tid](http://shopworksarc.com/tid)), which can serve as a guide for teams adopting a TID approach and can be used as a partner to this paper. Alongside our initial white paper, the components of this document work together to introduce teams to trauma-informed design. As such, we encourage you to review this entire publication before engaging in a TID process on your building.

Over the last few years, it has been our honor to witness the incredible dedication, perseverance, and capability of the affordable housing community. We are excited to continue engaging with and learning from others exploring and advancing trauma-informed design, prioritizing the voices of those with lived experience who are the true experts in this work.



# Four Phases Of The TID Process

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The following is a summary of the Four Phases of a TID Process. Please visit the subsequent pages in the TID manual for a step-by-step process on how to implement each phase.

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Four Phases of the TID Process

# Phase 1

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## Setting the Stage for the Project

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# 01





# Phase 1

## Setting the Stage for the Project

The first step for any project is to ensure that the team (1) understands the priorities and goals of the development, who they anticipate will occupy the building, and the environmental/cultural context of the community of the building, and (2) understands and is committed to a trauma-informed design process.

Setting a unified vision will include clear priorities and goals for the development, the needs of the future occupants, and a conversation about the cultural and ecological context (that is, understanding the neighborhood surrounding the development and how to appropriately integrate the building into the landscape within which it is situated).

To establish a trauma-informed lens among everyone at the design table (owner/organization, developer, architect, construction company), it is critical that Phase 1 begin with education on trauma-informed care and trauma-informed design. It is vital that all Housing Development Team members have a basic understanding of how trauma impacts the human brain and individual experiences of spaces. The trauma impacts experienced by particular groups can be specific and distinct, which necessitates a tailored response by each building project. Trauma can also be a shared experience or event whether

historic, systemic, or natural. As detailed in the case studies on pages 36-63, different considerations were made when designing The Delores Project shelter, supportive housing for women and transgender individuals exiting homelessness, versus Providence at the Heights with Second Chance Center, serving individuals exiting incarceration. Promoting an understanding of trauma across the team garners support of the TID research process and will help the Housing Development Team make decisions through a TID lens.

**Phase 1 of this process entails two team meetings and is the only stage that requires homework, depending on the baseline understanding of trauma held by team members.**



Four Phases of the TID Process

# Phase 2

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# Pre-Occupancy Research – Prioritizing Lived Experience

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# Phase 2

## Pre-Occupancy Research – Prioritizing Lived Experience

In trauma-informed design, it is critical to avoid assumptions about those who will be living and working in a building. Those who have experienced trauma interact with the world, the people within it, and the built environment, in distinct ways that have aided their survival. Additionally, it is important to remember that individual trauma experiences, even when similar, are inherently unique, as are individual trauma responses and needs.

Phase 2 of a TID process is centered around research that prioritizes the voices of those with lived experience so we can ensure that those voices and experiences guide the design. Through many iterations of our research process, which has involved on-line surveys, paper surveys, focus groups, one-on-one interviews, and tours, we have identified a TID method that we believe is a good model for most buildings. We recommend that Phase 2 of the process include facilitating in-person (when possible) and separate focus groups with potential residents/clients, current residents, and front-line staff. Gathering groups of people who share a common experience can lead to deep learnings and helpful guidance for the development. Focus groups are often complimented by one-on-one interviews with those who could not attend the groups as well as walking tours

Through two years of trial and error, our team has honed a set of interview questions that live at the heart of the research. The questions draw from best practices in trauma-informed care – SAMHSA’s key principles, which provide a framework for identifying what is supporting individuals through trauma towards healing and stability – with attention to the experience of safety, connection, empowerment, and how past experiences impact current experiences of space.

With these questions, we seek to understand the experiences of those who will live and work in the building, ask what has been helpful to their healing, and identify design decisions that can be implemented based on their feedback. We are not simply asking individuals what they want or need. Instead, we focus on the underlying elements or characteristics that will support individuals healing from trauma and how to avoid triggers in the building. For example, we ask questions about safety – not just what is safe but what feels safe to the participant. We ask questions about community – what spaces in the building have aided in forming connections with both staff and fellow residents. And we ask questions about thriving – where are they currently experiencing hope or moments of joy. Taken as a set, the answers to these questions can offer incredible insight into the lived experiences of individuals and how they interact with the built design.



Lastly, when developing interview questions, it is important to consider specific spaces in the building (e.g. outdoor amenity space, laundry rooms, individual apartments) that you are designing so as to seek specific feedback on them. For example, are you designing an outdoor amenity space that you want to ensure that residents will utilize? Consider asking residents about activities they enjoy, such as gardening, relaxing in the shade, or playing horseshoes.

Once focus groups and one-on-one interviews have taken place, members of the Housing Development Team will need to analyze the data. This involves (1) identifying key findings about current/future spaces; (2) linking those findings to specific TID values illustrated in the “Trauma-Informed Design Framework” found on page 5; and (3) identifying specific design responses for each key finding.

A few examples of what that might look like are outlined below:

**Key Finding:** Staff and residents shared that the hallways feel claustrophobic, and the flow of the building leaves residents feeling “confused.” The hallways are so narrow that they require you to brush against the walls as you’re passing by another person. Additionally, staff noted that residents can take some time to acclimate to the building, often getting lost in the first few weeks of moving in.

**TID Value:** Safety

**Design Response:** The design of the next building should account for wider hallways with clear sightlines and wayfinding.

**Key Finding:** Residents shared that the laundry room is confined and dark. They feel unnerved by the single point of entry and exit, lack of windows, and tight quarters. However, they express a desire to stay and watch their clothes for fear of someone stealing them.

**TID Value:** Peace of mind

**Design Response:** Consider making the laundry room a multi-purpose space, providing comfortable seating, a television, or even fitness equipment, so residents can accompany their laundry in a dignified environment.

**Key Finding:** The ability to care for and enjoy the companionship of a pet can be critical for healing. Many people refuse to exit homelessness without their pets who are sometimes their closest relationship.

**TID Value:** Connection

**Design Response:** It is critical that buildings be designed in a pet-friendly manner, welcoming different types of animals and providing dedicated space for animals to “do their business” and play in ways that are safe for animals and other residents.

**Key Finding:** Resident connections with staff are critical, and often the most meaningful moments happen in casual interac-

tions. Residents like being able to talk to a familiar face at the front desk or stop by the staff office for a quick conversation.

**TID Value:** Connection

**Design Response:** It is important that there are opportunities for staff to be present in spaces where they can connect casually with residents at times that are not formally scheduled, such as case management meetings exclusively. Include spaces where staff can sit with a laptop and gently engage with residents or where group conversations can casually happen in the presence of staff.





Four Phases of the TID Process

# Phase 3

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# Design/Collaborate /Refine

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**We appreciate that each design team will manage design in their own way, and, as such, our recommendations should be adapted to each team's unique approach and strengths.**

# Phase 3



## Design/Collaborate/Refine

Now that the Housing Development Team has identified the population being served, the goals of the development, and specific design ideas for the project, design can begin. This will be a months-long process managing competing priorities, taking creative chances, and continuing to refine ideas until you have a space that meets the agreed upon values and is intentionally designed with trauma-informed considerations in mind.

Identifying assumptions and biases will be critical as the Housing Development Team meets each week throughout the design process. Ideally, an individual with lived experience will sit on the Housing Development Team and is at the design table every week (and compensated for doing so). However, if that is not feasible, it will be critical that those who were interviewed in Phase 2 be consulted at least 2-3 times throughout the design process to offer their feedback on design iterations. The accompanying TID manual provides step-by-step guidance on what that might look like on a project.

It is critical for this collaboration to take place early enough within the design process for feedback to have an impact on the design of the building without impacting the overall timeline of the project. At Shopworks we have found that the focus group research findings and values identified have a deep and meaningful impact in the Schematic Design Process. Then, these consultation sessions are most helpful halfway through

the next stage of the process (Design Development). This is far enough into the design process that there are concrete enough plans to provide thoughts on, while still being early enough that feedback from the group can shift design concepts.

An illustration of the critical need to seek consistent feedback from those with lived experience: When we were designing The Delores Project shelter (see Case Study 1), we heard from shelter guests that they wanted the staff office to be near the dorms. So, we designed the staff office across the hall from the entrances to the two separate dorms. However, when we presented this design to the Guest Advisory Committee at the shelter, we were told it didn't meet their needs. Instead of being across the hall, they wanted the staff office located within the dorm with windows facing into the dorm, so staff could have full view of the entire sleeping area. We were trying to offer the guests some privacy; however, having staff in close proximity meant safety to them. It was early enough in the design to shift those walls and make it work – however, if we had simply listened to their initial feedback without confirming how it was interpreted in the final design, the dorm would not have felt as safe to the guests as it does now.





Four Phases of the TID Process

# Phase 4

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# Post-Occupancy Research

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**Four Phases of TID  
Design, Phase 04**



# Phase 4

## Post-Occupancy Study

The final stage of a trauma-informed process is to perform post-occupancy evaluations 12-18 months after the building opens. The main goals of this research are to learn what design features are proving to be helpful or harmful to residents and staff and to learn lessons that might inform the design of future buildings. Post-occupancy focus groups should seek to interview current residents of the building, program staff who work in the building, and property management.

Sample questions are included in the manual and are derived from the same TIC foundation that informed the pre-occupancy questions. However, post-occupancy questions should build upon and inquire about items that came out of the initial project research (Phase 2), the intent of the design team, and design elements that are specific to the building. For example, did you design the outdoor amenity space based on the interests or needs expressed by those who participated in the initial research? If so, ask specific questions about how residents and staff are experiencing those elements, such as a communal garden.

Once post-occupancy focus groups and one-on-one interviews have taken place, the research team will need to identify the findings of those discussions. This involves identifying (1) aspects of the building design that are helpful or healing (e.g., where are individuals experiencing community and connection? where do they feel the most safe or calm?) and (2) spaces that are not helpful and potentially hinder healing (e.g., what spaces feel unsafe or overwhelming? what spaces trigger the individuals?). The results should inform TID recommendations for future buildings.

**The final step of Phase 4 is to share your research findings with others in the affordable housing network. A first step can be reaching out to our TID Research Team found at [www.shopworksarc.com/tid](http://www.shopworksarc.com/tid) or looking for other local practitioners designing similar housing. There is a deep hunger and excitement within the housing industry for TID work. The more we can share our learnings with one another, the better each and every building we design can be.**





## Four Phases of the TID Process

# Conclusion

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The goal of the trauma-informed design process is to ensure that the building allows all people who will exist within it to not just have their needs met but to heal and thrive on their paths towards stability. This process requires an investment of time and resources, no doubt. However, building with a trauma-informed lens is critical to ensure that those who will experience the building are moving through spaces that are responsive to their needs and attending to basic principles of mental health maintenance and well-being. As a [Kaiser Permanente and CDC ACE Study](#) showed, a majority of Americans have some experience of a major childhood trauma. As such, the more we can utilize a trauma-informed design process in the design of EVERY building, not just for those moving into affordable housing, the higher chance we all have at experiencing buildings that promote dignity, healing, and joy!

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# Case Studies

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## Case Study 1

# The Delores Apartments

**Arroyo Village is the first ever project of its kind in Colorado to encompass a continuum of care for people experiencing homelessness, which includes everything from a homeless shelter to workforce housing.**

The Delores Project is a homeless shelter that opened its doors in 2000. The organization was challenged by a lack of suitable housing for individuals to transition into from the shelter, so, in 2015, it began exploring the option of building housing to meet the needs of their guests. On the same city block, Rocky Mountain Communities, who operated 27 affordable housing apartments, was looking at redevelopment to increase density on their site.

To maximize their ability to respond to local housing needs, the organizations joined together to create Arroyo Village, encompassing a continuum of housing and shelter options for the community. The new development is comprised of a 60-bed homeless shelter (The Delores Shelter), 35 one-bedroom apartment units of permanent supportive housing at 0-30% AMI (The Delores Apartments), and 95 one-, two-, and three-bedroom workforce apartment units at 30-50% AMI.

The Delores Project oversaw services in the shelter and the 35 supportive housing apartments.

**A key signifier in housing affordability is AMI which is used to determine what level of affordability the project will have. The level of affordability informs rules around the development, as well as what sources of local, state, and federal funding they can access. Visit <https://tinyurl.com/ymwxxa> for more information.**

Arroyo Village received Low Income Housing Tax Credits in 2016, started construction in 2017, and opened its doors in 2019. The building was set up so that Rocky Mountain Community was the Property Manager of the entire building and provided programs and services in the 95 workforce housing apartments.



The Delores Project oversaw services in the shelter and the 35 supportive housing apartments.

For the sake of brevity, this case study will focus on the Delores Apartments and the Delores Shelter. However, it is important to understand this as part of a larger development encompassing an entire city block and reflecting a partnership between the two non-profits: Rocky Mountain Communities and The Delores Project. The organizations were committed to developing a variety of housing to meet the diverse needs in their neighborhood.







## Phase 1

The Delores Project's design team was led by their Executive Director, Terrell Curtis, and Deputy Director, Laura Rossbert. Rocky Mountain Community's involvement was led by their CEO, Dick Taft. The partnership hired BlueLine Development, Shopworks Architecture, and BeauxSimone Consulting to complete their Housing Development Team.



The Arroyo Village Housing Development's Team first entry into Trauma-Informed Design (TID), happened somewhat by accident. In 2016 [The Delores Project implemented Trauma-Informed Care](#) (TIC) in the shelter and brought in Raul Almazar from the Substance Abuse and Mental Health Services Administration (SAMHSA) to train staff and board members of the organization. Because it was during the design process of Arroyo Village, Shopworks Architecture was also invited to attend. That day-long training drastically shifted the mindsets of the designers as well as the very design of the building. Learning about TIC compelled the Housing Development Team to rethink the priorities of the development and focus on how the building's design could support the mental health of shelter guests, residents, and staff.



Building on their TID learning, the Housing Development Team visited the Mental Health Center of Denver, who were in the final construction phases of Sanderson Apartments, their first permanent supportive housing building that utilized trauma-informed design. The Mental Health Center of Denver provided feedback on the design of Arroyo Village and shed light on best practices. That conversation led our team to shrink the unit size in supportive housing, in turn reducing the size of the entire building, while also increasing the size of the public hallways.

in the original shelter building was a shared workspace that was also available to shelter guests. Lastly, The Delores Project's entire mission was based on hospitality, as seen in their referring to those they walk alongside as "guests." As such, creating an environment that felt welcoming and home-like was critical for upholding the values of the organization.





**Learning about trauma-informed care compelled the Housing Development Team to rethink the priorities of the development and focus on how the building's design could support the mental health of shelter guests, residents, and staff.**



## Phase 2

This was our team's first foray into trauma-informed design, and we had not yet crafted our more formal research approach. Instead of performing dedicated TID interviews, which we now observe as a best-practice for TID, the team relied on the expertise of a number of groups to inform the identification of values. The Housing Development Team relied on more informal feedback from: guests at The Delores Shelter, Delores staff – especially those who worked in the shelter, as well as experts at partner organizations like JoAnn Toney from the Mental Health Center of Denver.

The staff of the homeless shelter at

Delores, some of whom had lived experiences of homelessness, offered critical suggestions about the design of the shelter and their hopes for the upcoming development. Additionally, throughout the design process, decisions were brought to the Guest Advisory Committee (GAC) of the Delores Project Shelter. The GAC is a group of individuals who are current guests of the shelter and come together on a monthly basis to provide leadership at the shelter – offering feedback on everything from property management concerns to the services and programs offered by the shelter. At least twice during the design of the new shelter, guests were invited to provide feedback on the design, and their input shifted key aspects of the shelter in significant ways. This feedback

helped inform the shelter design as well as the design of the supportive housing apartments.

With feedback from Delores staff and the Guest Advisory Committee, the design team identified a number of project values, which were centered around the experience of individuals who would be occupying the shelter and supportive housing. Safety was the highest priority, especially because The Delores Project's guests were women and transgender individuals. Ensuring that spaces felt safe and were not triggering to those populations was of critical importance. Additionally, staff required dedicated space to manage their vicarious trauma, given that the only place staff could decompress in the original shelter building was a shared workspace that was also available to shelter guests. Lastly, The Delores Project's entire mission was based on hospitality, as evidenced in their reference to those they walk alongside as "guests." As such, creating an environment that felt welcoming and home-like was critical for upholding the values of the organization.

Specific TID design decisions that were made on The Delores Project shelter and apartments include the following:

#### **The Delores Shelter:**

- Upon entry to the shelter, guests encounter a living room space with wood tones, rocking chairs, and a television. We wanted guests who entered to feel a sense of home, rather than an institutional space.
- For the first time in the organization's history, a break room was created for staff. The room was designed to feel cozy with a kitchenette and dedicated cubbies for each staff person. Because there is only one main office for overnight shelter staff, they share desks; it was important that space was created for staff to store their belongings between shifts.
- The bathrooms were designed to be welcoming to all people, recognizing that bathrooms can be highly triggering, particularly for transgender Delores guests. The spaces were designed with ample lighting, seating areas, and enough space to allow people to move around without coming into contact with one other.
- Bearing in mind the principles of biophilia, the study of how nature helps us heal, and an understanding that shelter guests often felt safer outside, the shelter entry provided easy access to a large courtyard with suitable shade and fencing that instilled a sense of privacy and security.







- Art was an important design element in the shelter. A dedicated space in the shelter hallways was designed for guests to display their own artwork. Additionally, artwork was intentionally displayed on concrete walls to inspire a sense of calm and delight throughout the shelter.

### **The Delores Apartments:**

- It was critical for residents in supportive housing to feel safe. In the unit design, we created a break in the wall between the living room and bedroom to provide visibility throughout the space. Wherever the resident was in the unit, they could see into the other rooms to ensure that no one else was there.
- Transparency and openness were identified values, and the team invested in large windows overlooking the courtyards and street.
- Safety in the apartment common areas was crucial, which was reflected in the wide hallways we designed in the apartment areas.
- Artwork and a home-like environment was key to the TID of the supportive

housing area. A large, colorful piece of artwork was installed at the entrance of the Delores Apartments, setting a warm, welcoming tone as well as providing a privacy screen for the mail area.

- Significant thought went into the design of the lobby-area for the apartments, creating space where staff and residents could casually interact with comfortable seating and beautiful artwork. Additionally, the entrance was designed with safety in mind, creating clear sightlines between the staff at the welcome desk and residents and guests buzzing into the apartments.



## Phase 3

Prioritizing the voices of those with lived experience was critical in the design process. Shopworks Architecture presented the design plans for the shelter at two all-staff meetings at The Delores Project, during which feedback was collected from the entire staff. Additionally, the design was presented to the Guest Advisory Committee, who provided extensive feedback. After each of these meetings, major and minor changes were made to the design of the building.

For example, in the original shelter, the staff office was located across the hallway from the two dorm rooms. In one of our first design iterations, the staff office was positioned across a small hallway from the dorms, providing guests with easier access to staff. However, the Guest Advisory Committee unanimously pushed back on that design, preferring that the staff office be located within the dorms with windows from the staff area viewing directly into the dorms. When asked, guests defined that this is what safety felt like for them - "if I know that staff will be watching over me, I will be able to close my eyes and sleep at night." The Housing Development Team identified a critical take-away from this discussion: it does not only matter that it is safe but that it feels safe to the end user.

**It not only matters that a space IS safe, but it is critical the space FEELS safe to the end user.**





Other features resulting from feedback from shelter guests, residents, and staff include the following:

- An ice machine was installed in the dining room, so guests could always have access to ice, which they named as important on hot Denver summer days.
- All shelter guests were provided a locker where they could set their own code and safely store their belongings.
- Each shelter bed was designed with its own outlet, light, and shelf to store small belongings, which was especially helpful for guests on the top bunk.
- Each shelter guest was given access to a hook in the communal bathroom where they could store their towel without getting other belongings wet.
- A computer area was included in the living room of the shelter, given a need emphasized by guests for access to technology that would allow them to apply for jobs and handle other matters.
- An outdoor patio was designed for staff to have dedicated space away from shelter guests and residents and one that promoted biophilic properties.

## Phase 4

In summer 2019, the Research Team carried out a post-occupancy study of Arroyo Village, which began with a resident-led tour and focus groups with residents and staff of the PSH portion of the building. As the first intentional TID project carried out by Shopworks Architecture, findings from data collected at Arroyo Village, as well as two additional PSH sites, were foundational to the development of the Research Team's initial framework of trauma-informed design (see Page 5). Of note, interviews with residents in PSH illuminated the fact that, while individual experiences may fall along a broad spectrum – for example, one person may prefer the constant company of others while another seeks solitude – these experiences can be summarized at a high level as matters of Comfort, Community, and Choice. The 3 C's, which are at the heart of the TID process and a key consideration of all TID decision-making, are evidenced in the post-occupancy findings that emerged from Arroyo Village.

The following findings describe critical lessons learned about the resident and staff experience at Arroyo Village learned from interviewing the residents of PSH, and the staff who oversaw PSH and the shelter:

**As the first intentional TID project carried out by Shopworks Architecture, findings from Arroyo Village were foundational to the development of our TID framework (see page 5).**





- 1. Safety & Security** | Residents reported feeling a general sense of safety throughout the building, particularly in their apartments. Cameras were welcomed in more secluded locations, such as stairwells, but were not celebrated in common areas. The parking garage was widely identified as a place of compromised safety in which anyone could access the building through the garage without a keycard. In the shelter, staff shared that one of the guest's favorite spaces is the bathroom where they often saw guests hanging out. This area was a key focus of the design, knowing that bathrooms can often be triggering for transgender individuals. Staff also shared that guests having access to lockers where they set the lock code has had an incredible impact on guests feeling like they don't have to monitor their belongings at all times.



- 2. Noise** | Noise is a commonly raised issue in apartment buildings and a key element of trauma-informed design. Residents of Arroyo Village generally shared relief and appreciation that noise and soundproofing between apartments was not an issue. However, staff noted that the lobby did not absorb noise, resulting in an echo that made an otherwise comfortable space feel less cozy and intimate.



3. **Sunlight & Darkness** | Lighting is another critical TID consideration. Residents and staff alike celebrated the large windows and abundant sunlight throughout the building, including apartment units and office spaces. However, residents expressed a desire to make their apartments darker at night, particularly given that many were not afforded the luxury of sleeping in total darkness during their experience of homelessness both on the streets and in shelters.
4. **Attention to Details** | Appreciation of beautiful, natural details throughout the building were noted by residents and staff, including soothing paint colors and wood finishes. A large piece of artwork in the lobby was repeatedly cited as a delightful detail that imbued a sense of worth and hope. One resident shared, “when I walked in here and saw that you had spent money on such beautiful artwork in the lobby, I knew that I mattered.” Additionally, the furniture was noted as high quality, comfortable, and favorite elements of building. However, storage was raised as an issue for residents who requested more drawers and cupboard space in the kitchen as well as closet layouts that allowed for hanging clothes.
5. **Community Spaces** | Residents and staff of Arroyo Village agreed that the building facilitated both resident-resident and resident-staff connection. The lobby (adjacent to a staffed front desk) was often utilized by residents; however, the common room (located on the second floor and separate from staffed areas) was not. This suggested that amenity spaces in close proximity to staffed areas were more desirable, as they promoted a sense of security while residents were initially engaging with one another. Outdoor space was also identified as key for socialization and community building as well as an individual outlet for relaxation and decompression.
6. **Staff Care** | Staff hugely appreciated their dedicated break area as a place to share tea and build relationships with one another as well as light a candle and decompress. However, they identified a desire for windows and natural light in this area.

**Resident amenity areas in close proximity to staffed areas were more desirable and more highly utilized than those out of sight of staff.**





## Case Study 2

# Providence At The Heights

**Providence at the Heights (PATH) is a supportive housing building located in Aurora, Colorado, that contains 50 one- and two-bedroom apartments. The ownership team is led by Second Chance Center, an organization formed in 2012 that “offers care management, mentoring, and vital resources to assist formerly incarcerated individuals in reestablishing their lives and becoming successful members of the community.”**

### Phase 1

The Housing Development Team that came together to create Providence at the Heights (PATH) was led by Hassan Latif – the Executive Director of Second Chance Center (SCC). Latif’s visionary leadership shines through, particularly as he spent 18 years incarcerated and openly brings first-hand understanding of the difficulties of re-entry into the work. The vast majority of staff have experiences of incarceration as well. Latif struggled to find adequate housing for the individuals they were working with at SCC and jumped at the opportunity to develop housing to fully meet the needs of those in their community.

The development focused on providing supportive housing – apartments for individuals who were chronically homeless, with a disability, and making 0-30% of the Area Median Income (AMI).

**SCC “offers care management, mentoring, and vital resources to assist formerly incarcerated individuals in reestablishing their lives and becoming successful members of the community.”**

The full Housing Development Team, led by Second Chance Center (SCC), also included BlueLine Development, Shopworks Architecture, Wheeler Advisory Group, and BeauxSimone Consulting. The entire team was committed to the values of Trauma-Informed Design (TID) and understood the importance of bringing a Trauma-Informed Care (TIC) lens into the work.



**For an understanding of this work please see our publication “Designing for Healing, Dignity, and Joy” found at [www.shopworksarc.com/tid](http://www.shopworksarc.com/tid)**

Additionally, Katie Symons and Zoe LeBeau of BeauxSimone Consulting provided valuable guidance to the team on TIC, given their expertise training non-profits in best practices for permanent supportive housing.

The Housing Development Team’s hope for this space was to not simply build housing but to create a building that could help individuals heal and thrive as they moved along their paths towards stability. PATH was designed to meet the unique needs of people who had experienced homelessness. The team under-

stood that individuals who experience chronic or cyclical homelessness do so for similar reasons as people with a history of incarceration - including mental health struggles, experiences of trauma, and substance use disorders.

According to Latif, “we wanted it to be as welcome, as safe, as trauma-informed, and as inviting as possible.” The Housing Development Team came together around values of safety, healing, stability, transparency, community, and the worth and dignity of all people.



**Our now more-formal TID Process would call for Client Focus Groups at this stage. Because we had not yet determined the full TID 4-Phase Process, formal focus groups weren't held on this project. However, the leadership of the organization brought their depth of knowledge from lived experience that had the same goals and outcomes as the focus groups we now recommend.**



## Phase 2

A critical part of TID is ensuring that the voices of those with lived experience are actively integrated into the design of the building. Second Chance Center (SCC) is led by an individual who shares the experience of the clients of SCC. Latif and many of his staff have experienced incarceration and understand first-hand the struggles of re-entry. Some staff were even SCC clients prior to joining the team. For example, Sean Taylor, the Deputy Executive Director at SCC, actively participated in the design process and shared his lived experience of incarceration and re-entry, which directly informed design decisions.

Leadership that comes from and directly represents the community being served provides an empowering and meaningful model for clients. The parallels between the experiences of those in leadership at SCC and the new residents who had experienced chronic homelessness provided helpful guidance on how to best design the apartments to meet the needs of those who would call the building “home”. The significance of this is demonstrated in follow-up focus groups in which clients reflect that being able to speak with staff about shared experiences and seeing that staff members have “come out on the other side of it” offered them the hope they needed to push on. As an organization committed to client leadership, SCC holds regular Resident Advisory Committee meetings at PATH, which offer residents an opportunity to share feedback on the building as well as program services.





## Phase 3

Once the project received LIHTC funding, the Housing Development Team entered Phase 3 of the TID process – refining the TID values and bringing them to life.

Below are some examples of how the values identified in Phases 1 and 2 of the TID process were carried out on the project:

- Safety** was the biggest priority for the design team. The design team prioritized this by creating wide hallways and open stairwells. A higher-end access control system was also designed to allow residents to fob themselves into the building and staff to have control over the doors from various locations within the building.
- Healing** was another key aspect, understanding that all of the residents had been chronically homeless and many had to put off taking care of themselves as they focused on survival. Biophilia, the study of how nature helps us heal, is a helpful partner to TID and was drawn on extensively through PATH. Design elements such as wood glulam beams and wood ascents were integrated throughout. The color schemes in both the paint and furniture were chosen to reflect the colors of the surrounding nature. Dynamic visual access to the outside through large windows and doors created an indoor/outdoor connected amenity space.



**Adding dynamic visual access to the outside through large windows and doors created an indoor/outdoor connected amenity space.**





- **“Simple but significant”** was a value highlighted early on. Instead of creating a building that felt overwhelming and intimidating, the hope was to develop something out of natural materials that was modest in scale. The intention was to create an approachable building in which nothing in the design felt overbearing. As such, the community space was designed to be big enough to fit the resident advisory committee but small enough to be intimate, inviting, and easy to manage.
- **Community** is a critical element of TIC and TID in promoting healing. Thus, spaces were intentionally designed to foster community, such as a sitting area off the lobby where people could gather in close proximity to staff as well as the indoor/outdoor amenity space with grills and shaded seating areas. Purposeful amenity spaces, like the barber shop and bike room, were designed to gather people around common interests.
- **Transparency** was important for the staff at SCC. The message that there was “nothing to hide” was communicated through open amenity spaces and large windows facing the adjacent neighborhoods. This concept is repeated throughout the building in spaces like the laundry rooms where large windows let significant light into spaces often treated as an afterthought.
- **Respect and worth** were critical for the SCC staff to communicate to residents through high quality furnishings. As with all affordable housing developments, the team had to work within financial constraints on the project. However, even within those limitations, Latif was committed to ensuring that no matter what was created, quality was not sacrificed. It was better to have fewer design features that were of the highest quality than to put anything into the building that felt cheap. As Latif stated, “We wanted people to sense that we really took time and effort to make this place a beautiful home for people – and we respected them.”

**Instead of creating a building that felt overwhelming and intimidating, the hope was to develop something that was modest in scale and approachable.**

- **Living in harmony** with the surrounding environment was critical to the Housing Development Team. As such, one of the key ideas behind the building, which is situated on a creek, was that Latif wanted it to feel integrated in its surroundings. In one conversation with Shopworks Architecture, he noted that he wanted the building to feel “like it grew there, instead of it having been built. We wanted it to fit beautifully with the surrounding landscape.” The architecture team took a photo of the land and creek beside it and chose brick, paint, and wood based on colors from that photo.
- The team wanted the building to feel **aspirational** for the residents – to to dream after coming out of phase of life where they were focused on survival. This is illustrated through a series of mirrors placed strategically throughout the building, which, in the words of Latif, are “because we want people to see themselves as they evolve into their new lives.”



## Phase 4

Post-occupancy evaluations were conducted with PATH residents and staff approximately 16 months following the opening of the building. It is important to note that PATH's opening in February 2020 coincided with the onset of the COVID-19. As such, this extreme historic event must be considered when interpreting the findings of this research. The conditions of the pandemic not only impacted organizational policies and the overall utilization of the building but may have also affected the reported perceptions of participants interviewed during this time.

Numerous findings emerged from these interviews, which were carried out and reported on by Shopworks Architecture with the goal of both supporting PATH's organizational practices and decision-making as well as improving upon Shopworks' TID knowledge and future design approach.

The focus on ensuring those who had experienced incarceration felt safe in the building was well received and celebrated by residents in the focus groups. The front lobby area was a favorite space for people to connect as was the indoor/outdoor amenity space. Residents shared that they felt safe throughout the apartment, especially because they felt that staff were always nearby.

Six key findings are highlighted here as examples of critical lessons learned about the resident and staff experience of PATH spaces:

- 1. Resident Safety** | Residents named that there were "no unsafe places" within the PATH building, though everyone agreed that the place that felt the safest was their own apartment (which is consistent with every post-occupancy study we have done in PSH).
- 2. Staff Safety** | Staff reported mixed feelings about safety in the building,



citing that the entryway was the greatest safety concern at PATH, along with blind spots (such as an inability to see into the vestibule from the front desk) and areas that were not monitored by the camera system.

**3. Amenity Spaces |** Staff and residents at PATH agreed that they love the spacious dining room/kitchen amenity area that opens onto the outdoor patio. This space met many needs and was utilized to play bingo and cards as well as host events, such as art shows and building-wide meals. The outdoor patio, off the main amenity space, was named as a favorite space by many, featuring grills, a gazebo, and a fire pit for additional socializing and recreation. The outdoor patio was also named as a critical space where connections were made between residents and between residents and staff

**4. Apartment Units |** Across the board, residents shared that the individual apartment units were meeting their needs. The only requested change from residents was to have a washer and dryer in all the units, though they were thankful for access to free laundry in the building.

**5. Unmet Resident Needs |** The need for improved areas for children, both indoors and outdoors, was emphasized, as was a request for a designated pet area outside. One resident noted that

“kids need socializing.” Additionally, spaces to accommodate visitation for residents without full custody of their children were raised as an important design consideration. This need could be met by providing an indoor/outdoor children’s play area in a common space in the building.

**6. Unmet Staff Needs |** Staff at PATH requested more multi-purpose conference areas. There are no spaces for larger meetings, which are currently hosted either in the lobby or at the church next door, when additional privacy is needed. Staff require a large community room with auditory privacy and additional one-on-one meeting spaces. Lastly, staff requested access to a dedicated break room where they can relax and decompress during their shifts.

The post-occupancy evaluation confirmed that the design of PATH was generally meeting the needs of residents and staff, offering key elements that support individual connection and thriving.



The outdoor patio, off the main amenity space, was named as a favorite space by many, featuring grills, a gazebo, and a fire pit for additional socializing and recreation.

## Learn More About Our Work

### **Designing for Healing, Dignity, and Joy:**

This was our research team's first Trauma-Informed Design White Paper which integrated feedback from resident and staff focus groups at supportive housing developments across Colorado. This paper provides an overview for our initial TID Framework centered around how the built design can promote physical health, mental health, and well-being through a trauma-informed approach to design.



## **Architectural Principles In The Service Of Trauma Informed Design:**

This pamphlet focuses on ways to design a building to help regulate the body and support therapeutic approaches. Since trauma lives and works through the body, and the body reacts to physical space before we cognitively process it, the built environment is integral to how one experiences trauma. This document presents a brief primer on the body-space-trauma relationship, organizing principles for trauma-informed architecture, some examples of built work, and narratives that inform what amenities residents and staff may need. The aim is to provide a spatial framework from which to approach trauma-informed architecture.

## **Trauma Informed Design Process:**

This is an overview of the Four-Phased Trauma Informed Design Process. This is not a checklist, but more about how the process should be impacted when we seek to design with an understanding of trauma as a core value. This overview includes case studies on specific developments to show how the process was implemented on specific developments, as well as an accompanying step-by-step manual.

**Engage with our team at  
[Shopworksarc.com/tid](https://shopworksarc.com/tid)**






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Implementing a Four-Phased

# Trauma Informed Design Process

Promoting Physical Health,  
Mental Health, and Well-Being Through  
Trauma-Informed Design

Shopworks Architecture

University of Denver  
Center for Housing and  
Homelessness Research

Group14 Engineering