

## How to Identify an Experienced Trauma-Focused Therapist

In the aftermath of a mass violence incident (MVI), communities are often inundated with offers of help and support. This will include individuals who define themselves as trauma “experts” in delivering therapy or counseling to MVI victims. Such claims of expertise may be false, exaggerated, or merely misguided, leaving communities with little guidance about how to determine whether someone has the training or expertise to provide the most effective interventions to victims and survivors in the wake of an MVI. Selection of a trauma-focused mental health intervention will vary depending on factors, such as the victim’s age, cultural background, specific needs, previous history of trauma and/or victimization, and severity of problems, as well as whether the intervention is conducted immediately after an MVI or further down the line.

An appropriate trauma therapist must be knowledgeable and trained about *evidence-based* trauma treatments and practices, particularly those that are effective in treating victims and survivors of violent crime. For information related to best practices for trauma-related problems, please refer to the tip sheet “What are Evidence-based Treatments and Evidence-based Practices” on the NMVVRC website.

Below are areas of inquiry and specific questions to help determine whether a mental health provider has the requisite knowledge and skills to deliver trauma-focused mental health interventions.

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### Importance of Assessment

A thorough assessment is essential to determine the mental health treatment needs of MVI survivors. This should include questions to determine the types of potentially traumatic events an individual has experienced (in addition to the MVI), as well the mental and behavioral health impact of these events. Thus, it is important to inquire whether a provider routinely conducts a comprehensive trauma-focused mental health assessment prior to recommending any specific treatment intervention.

Some additional questions include:

- What specific measures do you administer? (These measures should be commonly used to assess for exposure to potentially traumatic events and trauma-related problems.)
- Does the provider know how to score and interpret the information obtained from the assessment instruments?
- Do you share results of the assessment with your clients, indicating areas of strength, major concerns, and how they are used to inform decisions related to treatment needs?

In addition to conducting a pre-treatment assessment to help determine an individual’s needs, it can be important to find out whether the provider uses any type of repeated assessment throughout the course of treatment to monitor the status of symptoms and any changes.

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## **Not all Treatments are Effective for Trauma-related Problems**

Since not all mental health treatments are effective for treating trauma-related problems, it is important to ask the provider what specific types of therapies they deliver. Additional questions can be asked to determine whether the provider can outline what a course of treatment typically involves. Questions could include:

- What type of trauma-focused treatment do you provide?
- How many sessions are typically involved? How long do sessions last?
- What specific skills are taught?
- Does treatment involve homework or practice between sessions?
- How do you address cultural considerations?

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## **Provider Training**

Questions should be asked to learn more about the provider's training in the treatment practice, including how they were trained, when they were trained, and whether they continue to receive any ongoing consultation or supervision in specific trauma-focused treatment interventions. For example, providers can be asked several of the following:

- How were you trained in the trauma-focused treatment that you offer? Providers that engaged in formal trainings, such as completion of an online/e-course, attendance at a multi-day training (in person or virtually), or participation in individual or group consultation or coaching may have a stronger skillset than those who have only read about treatment approaches or have had no formal training at all.
- How do you know the treatment that you provide is delivered as intended?
- How do you determine success in treatment?

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## **Experience Matters**

It can be helpful and reassuring to a MVI victim to know whether their provider has prior experience in delivering trauma-focused treatments and whether they have had success. For example, a provider can be asked:

- How many children/adolescents/adults/families have you treated with an evidence-based trauma treatment?
- What proportion of clients do you see improve when you deliver trauma-focused interventions?
- Have you provided treatment to individuals who have experienced a mass violence incident?
- What other types of traumatic events have you addressed in treatment (e.g., childhood abuse; sexual or physical assault, adult violence exposure, etc.)?

If a provider is new to delivering the trauma-focused treatment, they still could be extremely helpful, but it would be important to ask whether they are being supervised by someone with relevant experience and expertise.

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