

THE SANCTUARY MODEL AND ITS UNIFYING BELIEF

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The Sanctuary Model (Bloom & Farragher, 2010) represents an evidence-supported, attachment-based, trauma-informed model for upgrading human service delivery organizations. It is based on the following belief: “We believe that the core issue for traumatized children who present with complex problems is disrupted attachment and that one single therapeutic approach is unlikely to be a sufficient remedy for all that is disrupted in the child’s basic operating system because of the intertwined complexity of the developmental impacts.” In essence, although it presents multiple strategies for supporting the efficacy of the model, it is unified, grounded, focused, and driven by the one belief that disrupted attachment is the core issue, and if resolved, can change the lives of traumatized children.

The model focuses on the seven key domains of attachment. These domains are then used to evaluate the operating systems of the organization. For example, the first attachment domain is *safety and security*. A crisis-driven environment is created when members do not experience safety and security in their environment. It becomes anxiety ridden, resistant to and fearful of change, vulnerable to major staffing issues, which increases performance and efficiency deficiencies. The same practices used to restore safety and security for the traumatized child are then used in the Sanctuary Model to redesign operating systems that have been traumatized.

are: (1) establishment of and a shared commitment to core values; (2) shared commitment to a trauma-informed belief or set of beliefs that drives every practice, program, procedure, and organizational policy; and (3) the clear communication of these values and beliefs in actions and words.

Values and Beliefs Matter: The Rest of T’s Story

[T’s story adapted from Brendtro, Ness, & Mitchell, 2001.] (Values and beliefs are in *italics*.) When T arrived at the Starr Commonwealth campus he probably felt disoriented; many helping professionals who work in clinics or

Trauma-Informed Practices With Children and Adolescents

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