



## **Why I Chose Trauma-Informed Psychology**

"I didn't go into high school thinking psychology would mean anything to me. I just needed another class to fill a time slot. Intro to Psych fit. I remember thinking it sounded kind of interesting, but I wasn't expecting much. That changed fast. A few weeks in, I was staying after class to ask questions. I started picking up on the way people handled stress, how emotions played out in conversations, and even how silence said things nobody was willing to say out loud. For the first time, I had a framework for understanding what I'd always noticed but never had words for.

Once I got to college, I knew I wanted to take that curiosity further. I signed up for everything I could: cognitive psychology, developmental courses, and behavioral disorders. I was constantly looking for places where psychology and real life overlapped. Volunteering at a crisis center gave me that in a very immediate way. People called in at all hours, sometimes just needing someone to listen. I wasn't solving problems, not in any big way, but I was there. Just being present when someone needed it was what mattered to me.

Not long after that, I joined a research group working on adolescent mental health. The project was about how teens recover after going through something intense: loss and instability at home... I worked mostly behind the scenes, reviewing studies, putting together surveys, and helping manage interview notes. What surprised me most was how satisfying it felt to piece together messy data and make it mean something. I realized I didn't just want to support people emotionally. I wanted to understand what works and why, then use that to help in smarter ways.

That's how I ended up diving into trauma-informed care. A phrase I saw in one of the research readings stuck with me. The more I learned about it, the more it made sense as a way of being



with people: slowing down and letting people speak on their own terms instead of labeling them before they've had a chance to breathe. I kept thinking, 'This is the kind of work I want to do: keep asking questions and contributing to research that makes care more thoughtful.'

When I started researching grad programs, I wasn't looking for anything flashy. I wanted something grounded. A place where clinical training and applied research weren't just checkboxes but actually worked together. That's what I saw in this program. The community outreach and the way faculty mentor student research all line up with where I want to grow. I've read some of the work coming out of the department, and it's challenged the way I think in the best way.

This next step isn't something I'm taking lightly. I've failed at a few things I've tried and stuck with the ones that mattered. I've had time to figure out what kind of work I can see myself doing long-term. I know I'm not finished growing, but I'm ready to keep going with a lot of heart."