Intentional Inter-disciplinary Trauma-Informed Initiatives: Frameworks, Techniques, and Experiences

International Center for Trauma Education & Care
Andrews University
Institute for Chief Academic Officers with Chief Advancement and Chief Communication and Marketing Officers
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Higher Education Initiatives Team

- **Dustin Young**, Assistant Professor of Social Work & Director of Higher Education Initiatives
- **Ingrid Slikkers**, Associate Professor of Social Work & Director, Center for Trauma Education & Care
- **Jenica Joseph**, Assistant Professor of Speech-Language Pathology and Audiology
- **Curtis VanderWaal**, Professor & Chair of School of Social Work
Literature Review

- **Challenges**
  - Post-COVID mental health challenges faced by colleges/universities
  - Faculty burn out
  - Student mental health challenges, esp. among Gen Z

- **Need for trauma education and integrated campus solutions**
  - Gaps educators trying to fill
  - Solutions proposed
  - Resources available for faculty & staff
Trauma Defined

(Psychological) Trauma is an event that overwhelms the central nervous system, altering the way we remember and react to things that remind you of the event(s).

(Van der Kolk, 2014)

When a person directly experiences or witnesses an event involving actual or threatened death, serious injury or sexual violation. And/or repeated exposure to aversive details of the traumatic events (Diagnostic & Statistic Manual - TR, 2022).
Mental Wellness

refers to positive mental health.
Maintaining and striving for mental wellness is equivalent to working towards good mental health.

Mental Health

refers to cognitive, behavioral, and emotional well-being.
It affects how we think, feel, and behave; this includes how we handle stress, relate to others, and make choices.

Mental Illness

refers to mental health disorders.
These are conditions that affect your mood, thinking, and behavior.
Mental illnesses come in many forms, each with their own symptoms and treatment.
Clinical experience led to classroom content

Decision to become a trauma-informed School of Social Work

Establishment of International Center for Trauma Education & Care

Community collaboration – school districts, CASA, justice, faith-based trainings, refugee worker training, etc.

Shark tank proposal: higher education initiative

Expansion across campus was much greater than expected

Provost invitation to extend trainings beyond Andrews University and faith-based settings
Academic Departments
- Class Design & Delivery
- Consulting (Tutors & TA)
- Co-Teaching
- Support Staff Training

Student Services
- Chaplain Office
- Student Life
- Spiritual Life
- Student Outreach

Campus Services
- Deans & Dorm Staff
- Library
- Campus Safety

Administration
- Office of The President
- Provost Office
- DEI Office
- College Deans
Off-Campus Initiatives

- Education
- Emergency Responders (EMS/Fire)
- Hospital/Medical
- Churches/Faith Communities
- County Agencies
- International Initiatives
Collaborative Training Approaches

- Students
- Faculty
- Staff
Impact on Campus, Students & Community

Descriptions of impact:

- Students
- Faculty
- Staff
6 GUIDING PRINCIPLES TO A TRAUMA-INFORMED APPROACH

The CDC’s Office of Public Health Preparedness and Response (OPHRP), in collaboration with SAMHSA’s National Center for Trauma-Informed Care (NCTIC), developed and led a new training for OPHPR employees about the role of trauma-informed care during public health emergencies. The training aimed to increase responder awareness of the impact that trauma can have in the communities where they work. Participants learned SAMHSA’S six principles that guide a trauma-informed approach, including:

1. SAFETY
2. TRUSTWORTHINESS & TRANSPARENCY
3. PEER SUPPORT
4. COLLABORATION & MUTUALITY
5. EMPOWERMENT, VOICE & CHOICE
6. CULTURAL, HISTORICAL, & GENDER ISSUES

Adopting a trauma-informed approach is not accomplished through any single particular technique or checklist. It requires constant attention, caring awareness, sensitivity, and possibly a cultural change at an organizational level. On-going internal organizational assessment and quality improvement, as well as engagement with community stakeholders, will help to imbed this approach which can be augmented with organizational development and practice improvement. The training provided by OPHPR and NCTIC was the first step for CDC to view emergency preparedness and response through a trauma-informed lens.
- Identity
- Practice & procedures
- Learning stance
- Non-judgmental stance

Skills To Consider:
- Clarification of spirituality v. religion
- Examine purpose
- Use a curiosity stance
- Normalize responses of a crisis of faith when facing/responding to trauma
- Audit humor & terminology surrounding faith
Building a Trauma-Informed Program

Phase 1: Aware
Phase 2: Responsive
Phase 3: Informed

TRAUMA IMPACTED
Responses to an event or ongoing events in which one’s coping skills are overwhelmed, resulting in changes in mind, body and behaviors.

TRAUMA AWARE
An awareness of impacts of trauma on a general level. Understanding of how individuals may respond when coping techniques are overwhelmed. Systemic awareness to barriers and needs.

TRAUMA RESPONSIVE
Efforts to increase techniques to support, educate and expand capacity without retraumatizing those we are serving.

TRAUMA INFORMED
Policies are continually examined and adjusted to reduce barriers or retraumatization. Increased capacity building approaches.

TRAUMA QUALIFIED
Receiving formal training and practice within areas of trauma care. Inclusion of clinical mental health specialists and providers.
Trauma Aware
- Basic: What is trauma and basic cop ing skills
- Advanced: Training seminar on trauma screening, assessment, referral
Trauma Responsive

- Basic: Advanced Trauma Aware + student management issues + curriculum building recommendations
- Advanced: Group and individualized coaching on curriculum modifications + classroom management issues
Model for Consulting and Training: Phase III

Trauma – Informed

- Basic: Advanced Trauma Responsive + review of department/school/university policies & practices + group consultation/coaching
- Advanced: individualized consultation/coaching with administrators, program heads, and larger academic units
IMPLEMENTATION TIMELINE

01
Infusing Trauma Education Across Primary Departments
Initial faculty training, curriculum development, research & evaluation, professional services-trauma education center
$40,000 Budget

02
Expanding Trauma Training Across Campus
Faculty training, course infusion, research & evaluation, professional services continued
$25,000 Budget

03
Broadening Training and Measuring Outcomes
Continued faculty training, course infusion, research & evaluation, professional services
$25,000 Budget
Planned Evaluation

- **Quantitative**
  - Pre-Post: Attitudes Related to Trauma-Informed Care Scale (ARTIC-45)
    - 45-item individual belief statements related to trauma-informed care
    - Normed on health and human service and educational settings

- **Qualitative**
  - Faculty/staff questionnaire on institutional/department barriers, implementation challenges, successes
  - Faculty/staff focus groups on strengths, weaknesses, suggestions for improvement
Discussion
References


CDC (n.d.) Six guiding principals to a trauma informed approach [infographic]. https://www.cdc.gov/cpr/infographics/6_principles_trauma_info.htm


Thank you for attending this session!