

Trauma-Informed Practice: Designed for Children, Necessary for Adults

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Abstract: Trauma-informed practices were initially designed for children; however, we argue that higher education is well-positioned to address the needs of adults as well. This paper discusses adopting trauma-informed practices in organizations and relational spaces. We also share preliminary findings from a qualitative pilot study that explored the attitudes of student affairs professionals toward the concepts and strategies of providing trauma-informed care in an institution of higher education. Study participants engaged in a post-training survey and semi-structured interviews after completing a trauma-informed services training intervention developed and delivered by research team members.

Keywords: trauma-informed, organization development, higher education, professional development

Over the last twenty years, an increasing body of research has brought attention to the impact of early childhood trauma and adversity on how people approach daily challenges and interpersonal relationships. While trauma-informed practices have been implemented in the K-12 settings, we argue that higher education institutions are well-positioned to address such needs for adult learners. Adults who have experienced adversity, anxiety, and toxic stress, much like elementary and secondary educational children could benefit from post-secondary system-based support. Even though trauma-informed practice is designed to meet the needs of children, we believe it is necessary for adults who bring maladaptive coping mechanisms into higher education organizations to also receive such program planning. This growing need is timely as we navigate our future workplaces and learning communities. A trauma-informed approach shifts questioning from *What's wrong with you?* to *What happened to you?* Such an approach shifts blame from a person to the situation. Hence, this paper briefly details trauma-informed practice and related professional development. Next, we share preliminary findings from a qualitative pilot study that explored student affairs professionals' perceptions of concepts and strategies following a trauma-informed training intervention. Finally, we discuss limitations and make recommendations for future research and practice.

Literature Review

Trauma and childhood adversity are ubiquitous in the United States. An estimated 50%-90% of people in the United States have experienced trauma (Gray & Litz, 2005; Treleaven, 2018; Donisch et al., 2016; Brion, 2020). To address the impact of trauma and adversity on the populations they serve, some public health and community service agencies, including the K-12 system developed and implemented trauma-informed frameworks and practices for approaching their work. Nevertheless, research is needed to determine how these models could influence the culture of adults learning and working at higher education institutions.

Education, emergency response, child welfare, and health systems need providers trained in research-based trauma services (Ko et al., 2008). Educational systems are accessible and well-

situated to provide needed support. However, professionals in these social sciences fields, trained to *do no harm*, lack the proper training to support students who have experienced trauma (Alisic, 2012). Therefore, these professionals avoid providing support in the name of possibly furthering harm or retraumatizing children. Effective trauma-informed training must include *actionable steps* that staff, faculty, and administrators can implement to become more inclusive and culturally responsive (Henshaw, 2022).

In addition to benefits for those receiving services, trauma-informed training interventions also positively impact people working in the organization. Recent studies illustrate positive correlations between staff perceptions of their organization and increased client outcomes after adopting a trauma-informed approach to care (Hales et al., 2019). Training interventions positively impact the well-being of the trainees, who feel their experiences were validated (Schimmels & Cunningham, 2021). Parker et al. (2020) found that employees who received trauma-informed training demonstrated an enduring change in their mindset and approach to work. However, training language used to discuss a trauma-informed approach is inconsistent across service sectors (Donisch et al. 2016).

The literature on trauma-informed practice has shown benefits on the personal, social, and societal levels (Fernández et al., 2023). Vandervoort (2006) proposes that a trauma-informed curriculum could benefit the university climate and culture. Moving an institution of higher education toward becoming a trauma-informed organization is significant for several reasons. A trauma-informed approach in higher education can increase perceptions of safety and well-being in the organization (Henshaw, 2022). Implementing trauma-informed practices in higher education could aid in retention and graduation rates for all students, particularly those who have experienced contentious relationships with educators (Henshaw, 2022). Additionally, trauma-informed practices could potentially benefit faculty and staff retention and increase the well-being of employees, which could positively impact overall student success and experience. As educators and practitioners, our research team has devoted time to developing trauma-informed training interventions that address issues pertinent to higher education institutions. In the study presented here, we share preliminary findings of a pilot study that sought to understand which aspects of a trauma-informed training intervention resonated with student affairs professionals. We begin by addressing questions to evaluate trauma-informed staff training recommended by Purtle (2020): 1) what should be the minimum duration of trauma-informed training; 2) which content should be included; and 3) to what extent the training should be tailored to the organization?

Research Design

Two research team members developed a trauma-informed training curriculum in 2018 and piloted the program at a practitioner conference for educational opportunities programs fall of 2019. Over four years, our team tailored the curriculum to meet the needs of regional organizations that requested our training. Our training team consulted with each client to tailor the workshops to meet their organizational needs. The complete training intervention curriculum takes approximately 14-16 hours to deliver, although some have been considerably shorter. During spring 2022, we consulted with a student affairs division at a public four-year university in the northwestern United States to provide a workshop on trauma-informed approaches. Staff

from this group represented a variety of offices across the institution. The client reviewed our developed materials and met with us to customize the curriculum for their training.

We designed the training to promote personal growth in addition to professional development. The curriculum framed trauma-informed organizations using Sandra Bloom's (2020) conception of creating *biocratic* organizations. According to Bloom (2020), biocratic organizations are living systems that must have their basic needs met in order to healthily function. Concepts explored in training included Bath's three pillars of trauma-wise care (Safety, Connection, and Coping), Substance Abuse and Mental Health Services Administration and the Center for Disease Control's six guiding principles of trauma-informed care (1. Safety, 2. Trustworthiness and Transparency, 3. Peer Support, 4. Collaboration and Mutuality, 5. Empowerment, Voice and Choice, and 6. Cultural, Historical and Gender Issues), an overview of adverse childhood experiences, and ways toxic stress, vicarious/secondary trauma, and burnout impact individuals and organizations (Bath, 2015; SAMHSA, 2014). Weaved through the training were practices rooted in relational mindfulness. Such methods included activities in deep listening, validation, empathy, and understanding interpersonal reactivity.

Data Collection and Analysis

Research participants in this study attended a one-day training designed and facilitated by our research team. We utilized a generic qualitative design because our approach was not informed by a predetermined set of philosophical assumptions, for study design and data collection (Kahlke, 2014). We collected data post-training intervention via a four-question qualitative survey and twenty-minute semi-structured qualitative interviews. The open-ended survey was created using the Qualtrics platform and sent to training attendees (~40) via email approximately one week after participating in the training intervention. The survey included the following questions:

1. Which aspects of the training did you appreciate and why?
2. What concepts or ideas presented in the training resonated with you that you can begin using in your professional and/or personal life?
3. What do you see as the potential effects a trauma-informed approach could have on organizational culture and the well-being of faculty, staff, and students?
4. In what ways do you see yourself promoting and creating trauma-awareness and responsiveness in our campus community?

Attendees received a follow-up contact reminder to complete the survey approximately two weeks after the conclusion of the training. Twenty respondents began the survey, with nine completing and submitting responses. Each complete submission was downloaded as a PDF for our research team to analyze individually and then as a group. Answers were combined by the survey questions and entered into a shared spreadsheet.

Training attendees were also offered an opportunity to participate in a brief qualitative interview. The research team collaborated with the training organizer to recruit interviewees. We used purposeful convenience sampling to select participants who would provide information-rich feedback about the training through interviews (Patton, 2015). Three training attendees participated in the research interviews, and the following questions guided the data collection:

1. What do you remember about that day? Tell me more about that?

2. Have any of the concepts from the training come up since the training either at work or at home? Please tell me about that.
3. Is there anything you recommend we remove from the training?
4. If there was one thing from the training that you wish was widely practiced in higher education, what would it be and why?

The in-person interviews were conducted and recorded via Zoom and initially processed with online transcription software. One team member cleaned the transcripts using intelligent verbatim transcription. Each research team member independently analyzed and coded the data and met weekly to discuss insights and findings. Our research team utilized the reflexive iteration framework proposed by Srivastava and Hopwood (2009). Their proposed framework captures a flexible and simplified process to understand and articulate relationships and concepts discovered during analysis. Central to this approach is “the visiting and revisiting the data and connecting them with emerging insights, progressively leading to refined focus and understanding” (p. 77). We adapted this process and engaged in individual and group reflexive analysis to support and articulate our understanding of the data. Additionally, the reflexive group analysis process supported data triangulation by incorporating multiple perspectives from the three individual members of our research group (Patton, 1999).

Preliminary Findings

This pilot study aimed to gain insights into how student affairs professionals engaged with a professional development training on trauma-informed services. We aimed to explore the participants’ perceptions of the concepts and strategies promoted during the training. Our preliminary analysis revealed survey and interview respondents fell into three audience tiers: 1) those with no intention of integrating the material, 2) those who found the information helpful, and 3) those already working toward a similar goal and desired further development. Within these tiers, we identified preliminary themes: a) learning human skills takes practice, b) learning and common language, c) realistic training time(ing), and d) training as a valued opportunity.

Learning human skills takes practice. Our analysis showed that while participants learned concepts during the training, they recognized not knowing how to apply these concepts in their day-to-day work. Participants indicated wanting more time to practice what they learned during the training instead of later. Understanding concepts is easy, doing them poses challenges.

Learn and use common language. One recurring theme from the surveys and the interviews was the concept or need of *naming* or providing a common language to describe the practice. Some training attendees were in the process of moving their work teams toward adopting similar practices discussed in the intervention but appreciated how the training provided them with a common language for trauma-informed practice.

Need for Realistic training time(ing). A consistent theme that emerged from the survey responses and interviews was the *timing* of the training intervention. Most respondents expressed that they felt they needed more time with the concepts. Additionally, due to the compressed nature of the training, the ability to engage in activities to support their learning transfer was and context. Another issue related to timing was the time of year the training occurred. The training

intervention was scheduled before the beginning of the academic year, a critical time for student affairs professionals to prepare for various events and orientations. The beginning of the academic year proved difficult as approximately half of the division staff could attend the training. Additionally, the low completion rate for the post-training survey and the difficulty in recruiting interviewees could be explained by the hectic nature of this time of year.

Training as a valued opportunity. One of the most interesting themes we identified from the study was hidden or *invisible data*. In addition to conducting the current pilot study, our research team also analyzed data from another study that explored what people found meaningful in a small workgroup professional development training. We found that one of the primary differences in how the groups reacted to the training was the *value* attached to the opportunity. The trainers received no monetary compensation for this session, whereas previously we received compensation as trainers for professional development training. Therefore, it is possible that the attendees did not find value in the training because it was offered without a fee to the participants. The second issue in terms of value was related to *compulsory attendance*. The entire division of student affairs was not able to attend the training. If the training was optional, it is possible that finding value in the content is diminished. Finally, by attempting to accommodate the client's request to include a lot of content over a short duration, we ultimately did not meet their needs as an organization. In our attempt to meet this request, we compressed the content, leaving the group without enough time to engage more deeply with the material.

Discussion

The preliminary findings start to answer questions posed by Purtle (2020). In terms of duration, we believe trauma-informed training interventions must last longer than one day (7 hours) for attendees to understand and begin applying the concepts. Allowing enough time during the training for application and reflection is critical to personal and organizational integration of the concepts and content (Furman & Sibthorp, 2013). While we did not explicitly design our study to address Purtle's second question regarding what content to include, as the training developers, we felt it was essential to introduce the critical background and foundational information to contextualize the curriculum (Thomas, 2007). Because one size does not fit all, we tailored the training to suit the stated needs of the contact client (Schein, 1999). Moving forward, we want to ensure we do not dilute the learning process by offering *a la carte* workshops.

Institutions of higher education are well-positioned to meet the needs of adults, both employees and learners, who bring diverse life experiences to institutions. As awareness of societal issues that impact individual adults increases, we believe adopting approaches that honor their lived experiences is crucial to healthy and inclusive organizational cultures (Bloom, 2020). Integrating trauma-informed practices in higher education can support the creation of a more inclusive campus climate. Although there are studies assessing trauma-informed training interventions, we recommend further investigation into trauma-informed professional development designed explicitly to meet the needs of faculty, staff, and administrators in higher education institutions.

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