

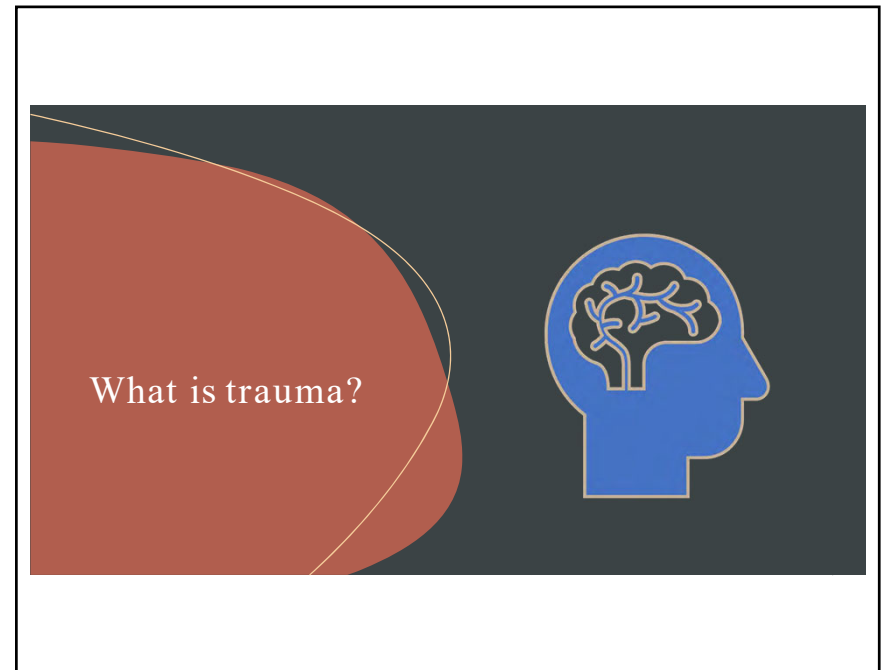
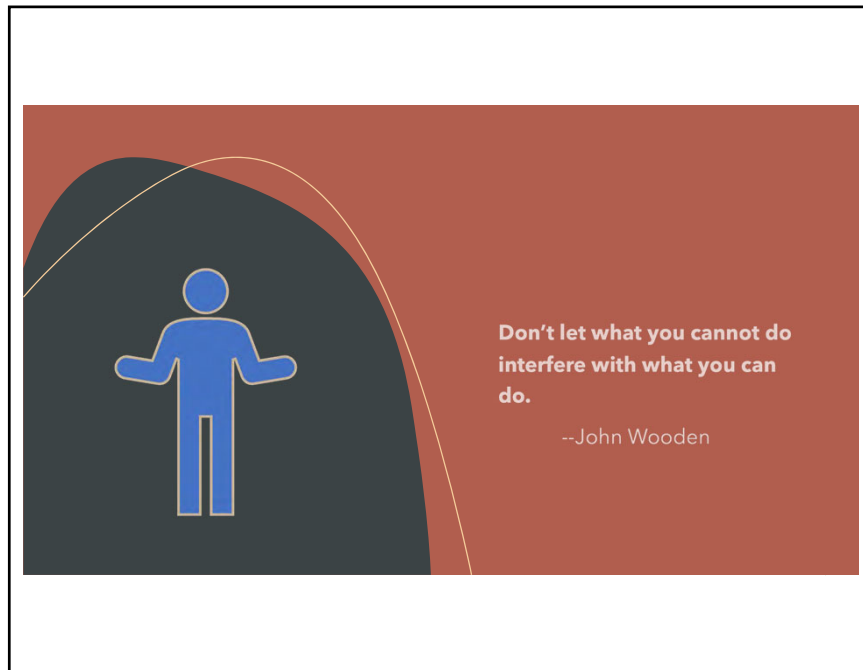


Trauma-Informed Approaches in Faculty Development

Dr. Candace Burton, PhD, RN,
AFN-BC
Sue & Bill Gross School of Nursing

Ground rules

- This is a safe space but ALSO a brave space.
- Take a timeout if you need to!
- Remember that you are not in charge of fixing everything.
- Ask for what you need.



Trauma is defined by 3 key components (the 3 E's):

Individual trauma results from an **event**, series of events, or set of circumstances

....that is **experienced** by an individual as physically or emotionally harmful or life threatening

....and that has lasting adverse **effects** on the individual's functioning and mental, physical, social, emotional, or spiritual well-being

Substance Abuse and Mental Health Services Administration. SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-48864. Rockville, MD: Substance Abuse and Mental Health Services Administration; 2014.

Sources of trauma



“Invisible” trauma

Published: 05 April 2017

Faculty Service Loads and Gender: Are Women Taking Care of the Academic Family?

Cassandra M. Quattrone¹ & Victor M. H. Borden

Research in Higher Education 58, 672–694 (2017) | [Cite this article](#)

7795 Accesses | 129 Citations | 768 Altmetric | [Metrics](#)

Abstract

This paper investigates the amount of academic service performed by faculty. We use 2014 data from a large national survey of faculty to examine the relationship between service loads and gender, race, and other factors. The results suggest that women and people of color are more likely to perform a larger amount of service work than their male and white counterparts. This finding has implications for the academic family and the role of service in higher education.

CAREER FEATURE • 24 JUNE 2020

The time tax put on scientists of colour

The pressure on researchers from ethnic minority groups to participate in campus diversity issues comes at a cost.

Virginia Smith

[Find a new job](#)

INTERSECTIONALITY

gender, class, race, ethnicity, language, sexuality, age, ability, nationality

the local, national, across field and physical health

Historical Trauma

Definition: The collective emotional and psychological injury both over the life span and across generations, resulting from a cataclysmic history of genocide (Dr. Maria Yellow Horse Braveheart)

Causes:

- Legacy of genocide

Effects:

- Unsettled trauma
- Increase of child abuse and domestic violence

long-hauler

long hauler [lawing-haw-ler]

A person who suffers from symptoms of COVID-19 for longer than two weeks, and generally for several months.

Why does this matter?

Trauma is not just an emotional event.

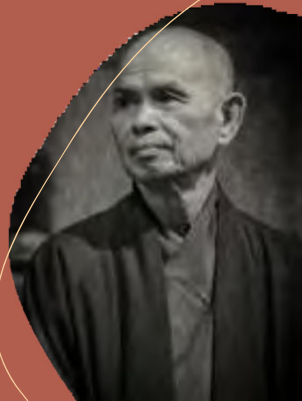
Trauma is not just an acute event that can be “over.”

Trauma is not a sign of weakness, lack of coping skills, or any kind of failure.

Trauma isn't just in your head....

"Anger is like a howling baby, suffering and crying. The baby needs a parent to embrace him. You are the parent for your baby, your anger. The moment you begin to practice breathing mindfully in and out, you have the energy of a parent, to cradle and embrace the baby. Just embracing your anger, just breathing in and breathing out, that is good enough. The baby will feel relief right away."

— Thich Nhat Hanh, [Anger](#)



How can interaction with students, faculty, and/or colleagues be traumatic?

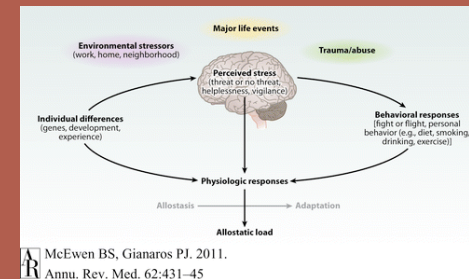
- **Social** structures define interactions, treatment, dynamics among groups
- Create hierarchy → Inequity & Disparity
- **Structural stress:** Strain or harm inflicted through biased social structures, leading to reduced capacity to meet needs (Burton, Gilpin, & Draughon-Moret, 2020)

How can others' trauma affect me?

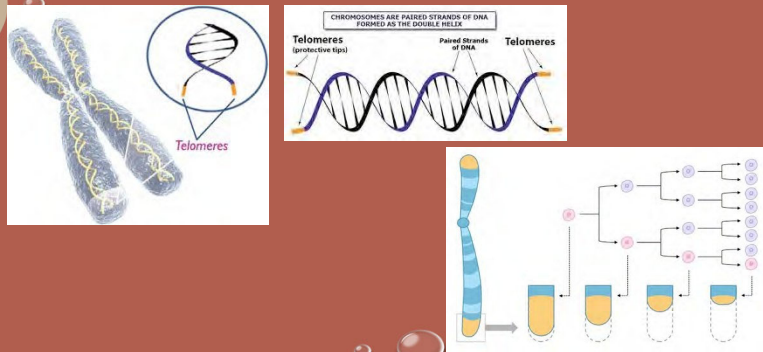
- Vicarious trauma, compassion fatigue, burnout
- Fatigue and exhaustion—physical, mental, emotional, existential
- Ongoing traumatic stress
- Lack of motivation, decreased self-efficacy
- Dissatisfaction with work

And.....

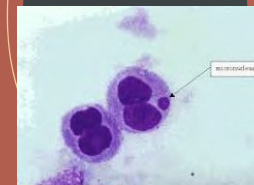
Embodied trauma: allostatic loading



Embodied trauma: DNA-based changes

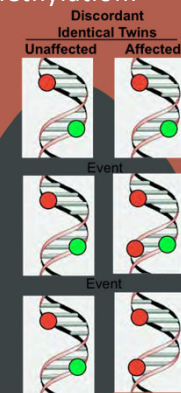


Micronucleus formation:



Other cellular level changes related trauma & stress...

DNA Methylation:



What is a trauma-informed approach?: The 4 R's

A program, organization or system that is trauma-informed:

Realizes the **prevalence of trauma** and taking a **universal precautions** position. **Assume all patients may have experienced trauma, and treat accordingly.**

Recognizes how trauma affects all individuals involved with the program, organization, or system, **including its own workforce.**

Responds by putting this knowledge into practice

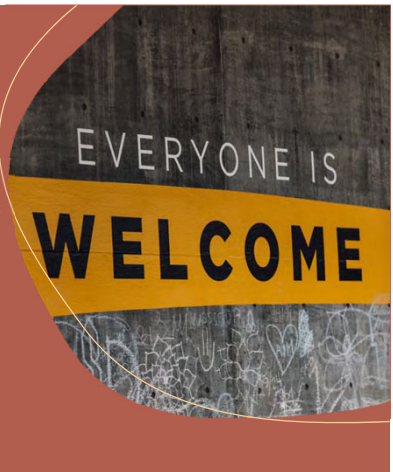
Resists retraumatization

1. Substance Abuse and Mental Health Services Administration

What does a trauma informed approach look like in practice?: 6 Key Principles to Incorporate

- Safety
- Trustworthiness and transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice and choice
- Cultural, historical, and gender issues

1. Substance Abuse and Mental Health Services Administration



What Does A Trauma-Informed Approach Mean for Faculty Chairs and other Administrators?

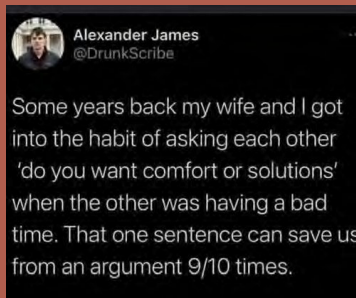
- **Being aware** of how immediate and more subtle factors, including historical and ongoing exposure to violence, shape people's real-life experiences
- **Being open** to consider how our practices and policies may unintentionally harm people and changing those policies and practices
- Being **respectful and inclusive** of people's diverse histories and contexts

• Wathen & Varcioe, 2019

What can we DO?

Give	Give relaxed, unhurried attention
Talk	Talk about concerns and procedures before doing anything
Share	Give as much control and choice as possible back
Validate	Validate any concerns as understandable and normal
Allow	Allow a support person or other staff person to be present if desired
Awareness	Be mindful of, and acknowledge possible stress reactions as normal
Assume	Universal Precautions: Assume everyone may be a trauma survivor, and treat accordingly

1. Substance Abuse and Mental Health Services Administration



We're all in this together...right?

- How does leadership communicate its support and guidance for implementing a trauma-informed approach?
- How do leadership and governance structures demonstrate support for voice and participation of people in the unit?
- How is transparency and trust among faculty promoted?
- What strategies are used to reduce the impact of power differentials among faculty?
- How can administrators help people to identify strategies that contribute to feeling comforted and empowered?
- How does the unit address gender-based issues in the context of assessment and planning?
- Do faculty and administrators talk with each other about the range of trauma reactions and work to minimize feelings of fear or shame?

What do I do...



You've scheduled a Zoom session with a faculty member to discuss workload planning. They arrive ten minutes late and seem tired and distracted. You can hear children and pets in the background.

1. What is your immediate reaction to this scenario?
2. How might there be trauma here?
3. What do you want to do?

Options...

ASK	ASK: "What would help right now?" "What can I do to support you?"
OFFER	OFFER: "Would it be helpful to connect to..."
ENGAGE	ENGAGE: "Do you want to talk about it? I am here to listen."
REMIND	REMIND: "I am here to support you so please reach out when you are struggling."

For campus
support...

Dr. Negar Shekarabi
Coordinator of Faculty/Staff
Support Services
<https://whcs.uci.edu/faculty-staff-support-services/coordinator>



Thank you for everything you do.



Questions???

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