



Welcome to Today's Webinar

Leading Trauma Informed School Systems Change

Before, During & After Pandemic Times

State Leadership

- Please post your organization, location, and role in the "Comments" chat box. If you have comments during the session, please also post them in the "Comments" chat box.
- If you have content related questions during the session, please post them in the "Questions" chat box. We will do our best to address them during the session, but if we are unable to we will provide follow-up after the session.
- If you have technical questions or issues, please post them in the "Tech Issues" chat box. You can also email joshel@cars-rp.org for assistance.
- A copy of today's presentation can be downloaded from the pod located directly below the list of attendees. It was also included in the reminder email that was sent out before the session.
- All phone/audio lines will be muted during today's session.
- At the conclusion of the webinar a feedback form will appear on your screen. Please take a few minutes to provide us with your thoughts as this is a very important part of our funding.

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Leading Trauma Informed School Systems Change

Before, During & After Pandemic Times

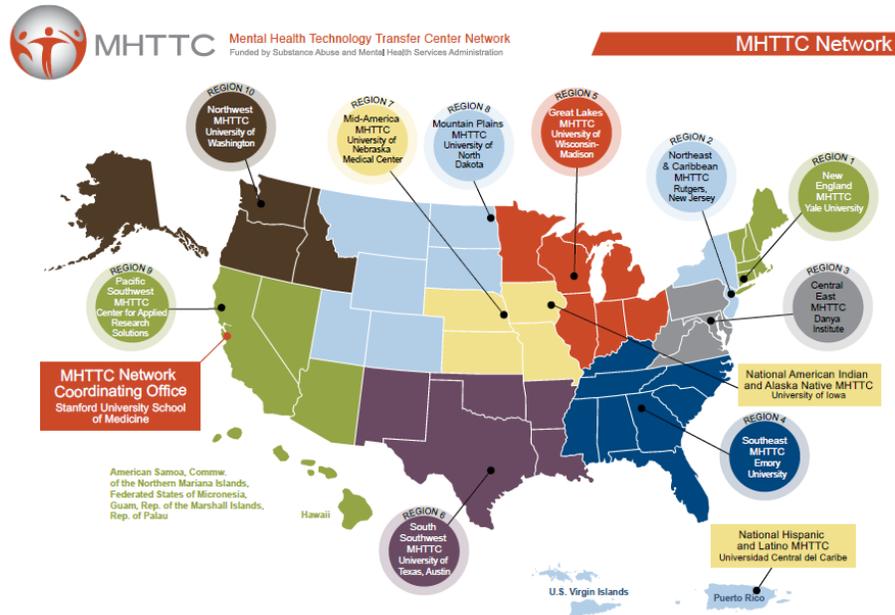
State Leadership

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DISCLAIMER

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).

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Southeast (HHS Region 4)
MHTTC Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

The Southeast MHTTC is located at Emory University in the Rollins School of Public Health.

Our Mission: To promote the implementation and sustainability of evidence-based mental health services in the Southeastern United States.

Our Services: We use a public health approach to build leadership capacity and to provide mental health trainings and resources to providers, agencies, and communities across the Southeast.

Please visit our website at www.southeastmhttc.org for upcoming trainings as well as archived recordings of past trainings.



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Our Learning Guides



Leora Wolf-Prusan, EdD (she/hers) is the School Mental Health Lead & Training Specialist for SAMHSA's Pacific Southwest Mental Health Technology Transfer Center and the Director of Partnerships & Teaching at the Center for Applied Research Solutions (CARS). She provides consulting and training around issues related to trauma-informed & resilience-oriented leadership, organizational & school climate and positive youth development, educator mental health and wellness, grief in the workplace, anti racism & health, among much more. Leora received a BA in International Relations and a BA in Spanish with a minor in Social & Ethnic Relations from the University of California, Davis; a teaching credential from Mills College in Oakland, California; and an EdD in Educational Leadership from the University of California, Los Angeles.



Miriam Silman, MSW, is the Trauma Informed Care Program Administrator at the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities, and the Kentucky Project AWARE Co-Coordinator. She has focused on trauma as a clinician, researcher and trainer for 30 years, working in community mental health, as well as the University of Kentucky Center on Trauma and Children and the University of Kentucky Department of Psychiatry. For the last decade she has also focused on supporting helping professionals to understand and address the effects of secondary trauma exposure through their work, including educators, healthcare providers, global health workers and behavioral health professionals. Learn about Miriam's work to support trauma informed practices in Kentucky's schools here <https://www.ksba.org/inconversationwith7353.aspx>



Kathryn Tillett, MSSW CSW, Kentucky AWARE Director, Kentucky Department of Education. Kathryn directs Kentucky Department of Education's statewide AWARE (Advancing Wellness and Resilience in Education) project. She is a leader in state efforts to build trauma-informed schools and to promote integration of mental health into schools' multi-tiered framework for supports and practices (MTSS). Kathryn has served on a variety of statewide child mental health related initiatives, including ones focused on suicide prevention, youth voice, and social-emotional learning. She holds a B.A. in Anthropology and English from Tufts University and a Master of Science in Social Work from University of Louisville. Kathryn's work in education is informed by her years of serving under-resourced communities through policy and direct service roles.



Janet Watkins, M.Ed., serves as Director of Training for Tennessee Advancing Wellness and Resiliency in Education (AWARE) for the Tennessee Department of Education. She works to increase competence to recognize signs of behavioral health disorders and appropriately connect youth to behavioral health resources by delivering and coordinating mental health first aid training to youth serving adults through Youth Mental Health First Aid. She currently has a cadre of 85 trainers she can send out to conduct Youth Mental Health First Aid across Tennessee She is currently certified to provide training in Youth Mental Health First Aid, Mental Health First Aid, and Mental Health First Aid for Law Enforcement, Corrections and Public Safety, Building Strong Brains-Strategies for Educators, and Restorative Practices. She also works to disseminate information to school districts to assist schools in advancing and maturing the response and recovery portion of their emergency management plan through Tennessee Schools Prepare, a crisis postvention tool. Janet previously worked as a School Counselor for 22 years and has also taught Special Education and 1st grade. Janet holds a Masters of Education in Elementary School Guidance and Counseling and a Bachelor of Science degree in Elementary Education/Special Education.

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WEBINAR SERIES

TIRO Systems Leadership

Archived and coming to you when ready!

**Session 1: Trauma Informed Systems Leadership:
Highlighting School District Leadership**



Today!

**Session 2: Trauma Informed Systems Leadership:
Highlighting State Agency Leadership**

July 30th at 10:30 am - 12:00 pm CST / 11:30 am – 1:00 pm EST

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Our Learning Flow Today

- Opening & Grounding
 - Defining Terms & Concepts
- Trauma-Informed & Resilience-Oriented Leadership, Always...and Now
 - Principles
 - Paradigms
- Guest Presenter: Project AWARE State Leaders in Tennessee and Kentucky
 - Celebrations & lessons learned leading the work as a district
 - Discussion
- Reflection & Closing

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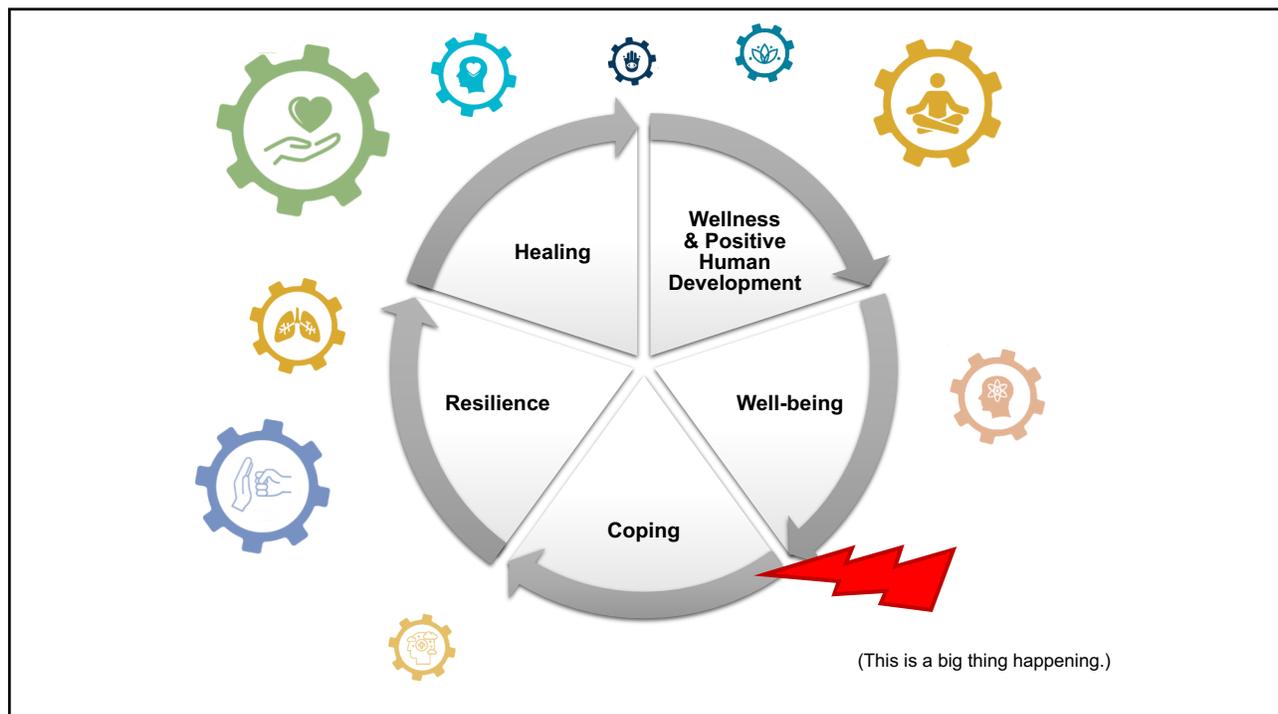
Offerings for Today

- Take what you need
- Know that you'll get the things that you need (resources, the
- Whatever resonates is what you need in this moment
- This time [of the webinar] is limited but the urgency isn't
- Now, and always
- Learning happens on three tracks...
 - You as a learner
 - You as a professional
 - And you as a facilitator

Invitations for Today

- To whom are you dedicating your learning?
- Who might you thank, literally or mentally, for guiding you in this moment?

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We define "School Mental Health Crisis Leadership" as:

The individual, collective, organizational, and systemic skills, knowledge, and competencies to create school conditions, climates, and cultures that empower others to navigate uncertainty and harm. This leadership is based on awareness and acceptance of the responsibility and accountability to help all students, staff, and partners repair, reconnect, regulate, and restore.⁶

<https://mhitcnetwork.org/centers/pacific-southwest-mhitc/product/school-mental-health-crisis-leadership-lessons-voices>
Marshall Gantz, 2010; From *Leading Change* in *Handbook of Leadership Theory & Practice*

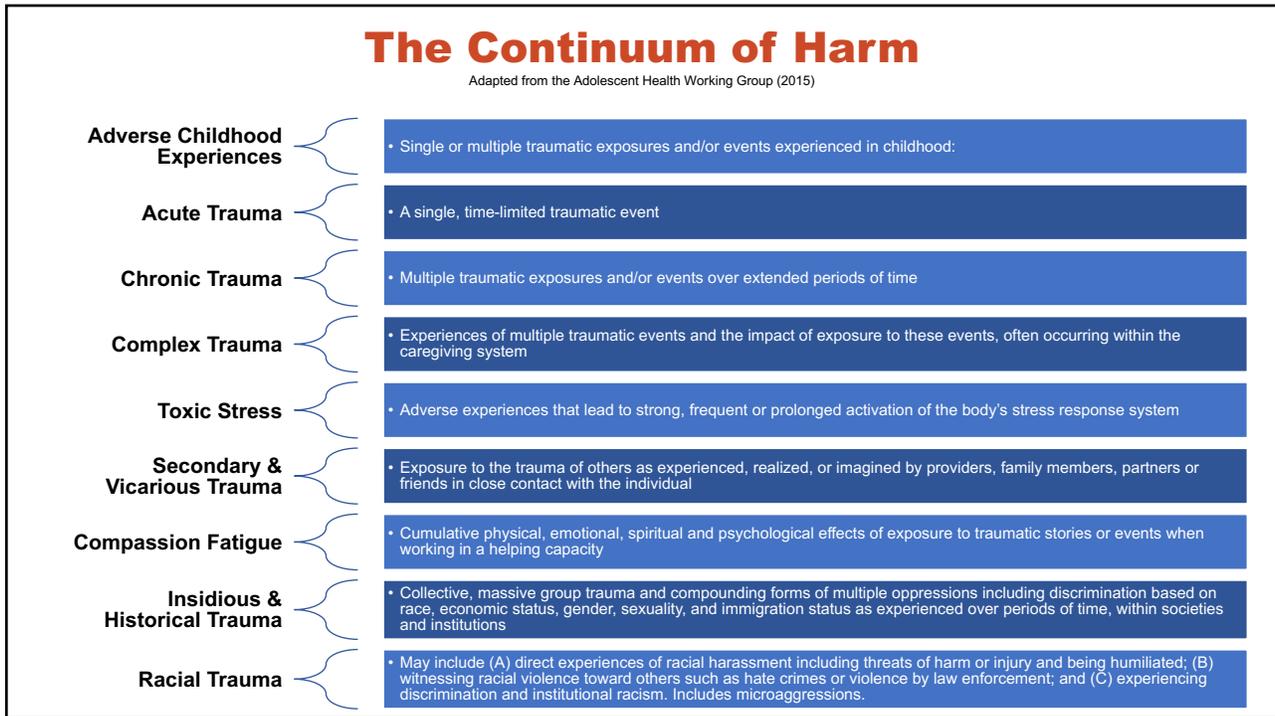
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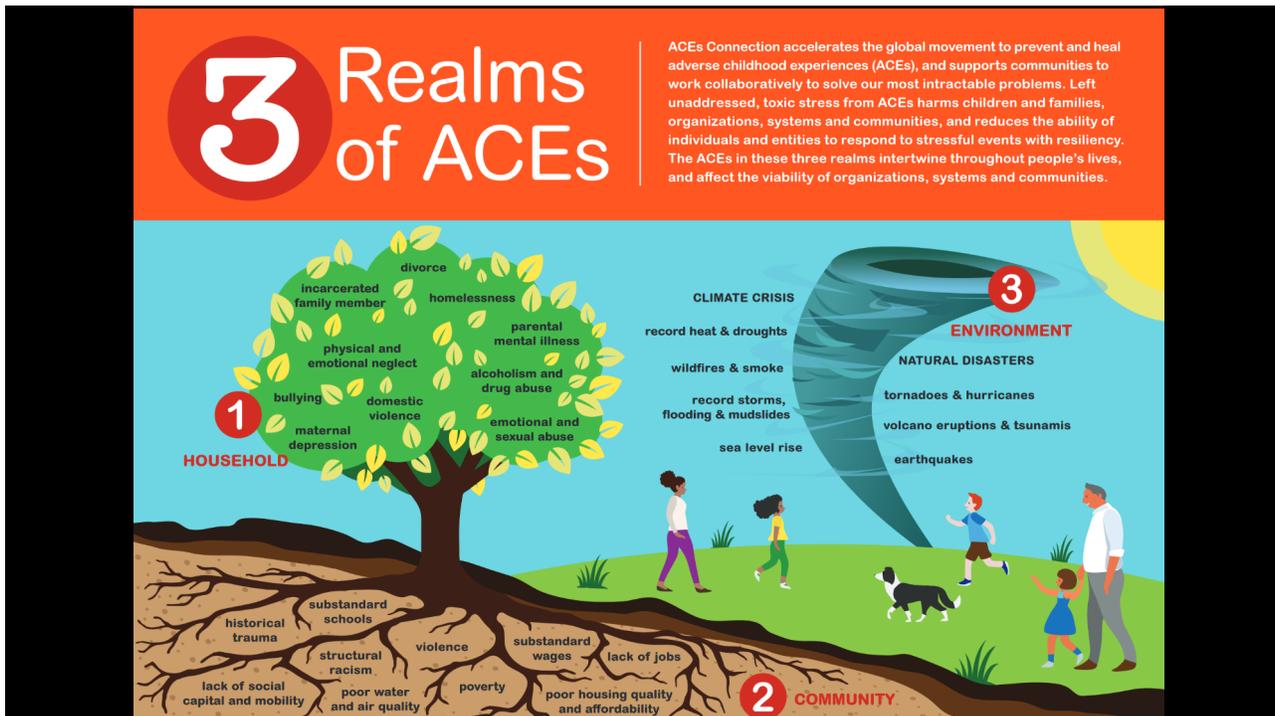
Trauma & Complex Trauma ACEs

Defining the thing to work from and with the thing

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In this Moment

- Which concepts do you need to do more work with to better serve yourself, your colleagues, and who your organization serves?
- What concepts are getting less attention (money, discourse, media) and why?

ACEs
 Toxic Stress
 Acute Trauma
 Secondary & Vicarious Trauma
 Complex Trauma
 Compassion Fatigue
 Insidious & Historical Trauma
 Racial Trauma

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Examples of Definition: Variations Within a Term

"Historically, the concept of trauma has focused on individual trauma—childhood abuse and neglect, adult or adolescent sexual assault, and abuse by an intimate partner, as well as the individual effects of combat trauma and military sexual assault. Yet many people experience collective forms of trauma, as well—trauma that affects people as part of a particular community, culture, or group. These experiences continue to affect individuals and communities across generations, **including the ongoing legacies of trauma resulting from structural violence, slavery, and colonization; the trauma of war, poverty, displacement, and persecution; the trauma of transphobic, homophobic, and gender-based violence; as well as the insidious, micro aggressive trauma of objectification, dehumanization, and marginalization that many people experience daily.**"

- National Center on Domestic Violence, Trauma & Mental Health, 2018, p. 48-49

"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.**"

- SAMHSA, 2014, p. 7

"Experiences or situations that are emotionally painful and distressing, and that **overwhelm people's ability to cope**, leaving them powerless."

- [Center for Nonviolence and Social Justice](#), Drexel University

Source: [Creating Trauma Informed School Policies Guide \(Pacific Southwest MHITC, 2019\)](#)

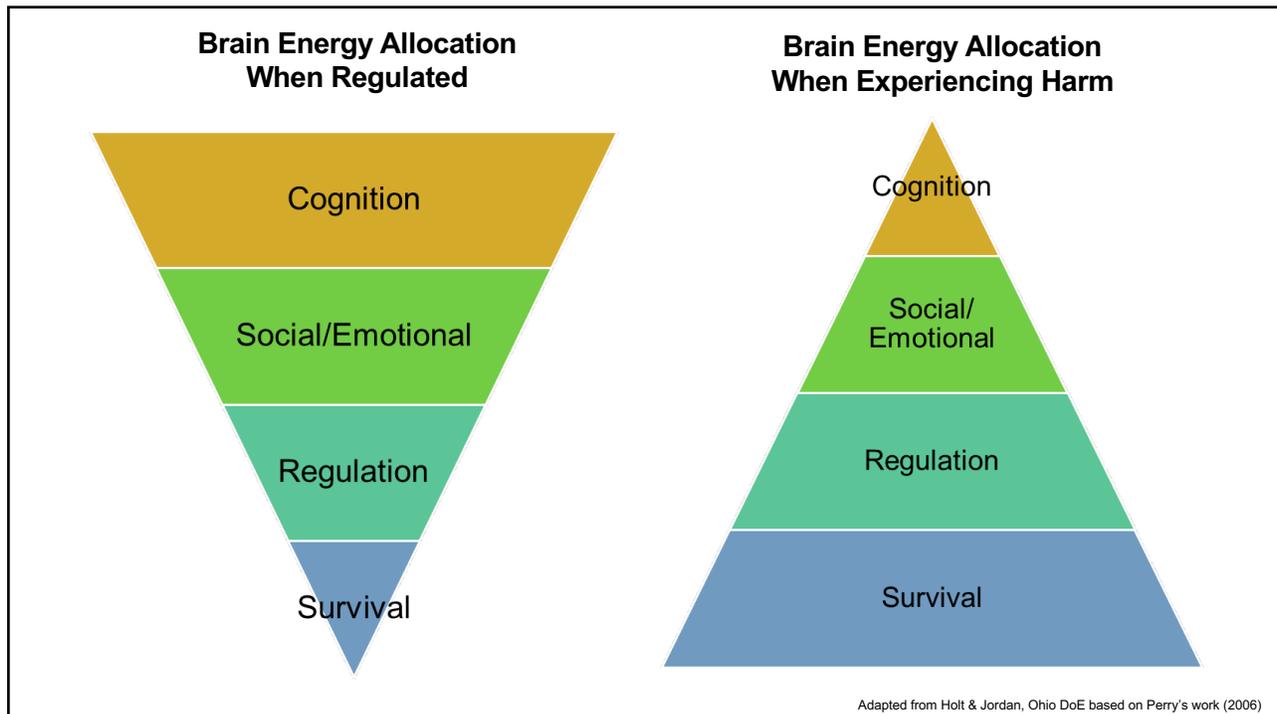
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“Trauma is both a psychological and a physical experience that impacts our internal sense of safety and our ability to trust in self, in relationships, and in the world.”

- Deb Dana

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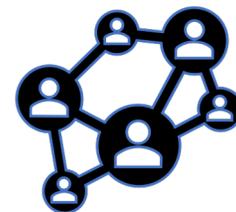
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Relationships can harm.

Relationships can heal.

Leadership can harm.

Leadership can heal.



(Always, and now)

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**PAUSE
CONNECT
REFLECT**

In the chat box, please tell us
1 takeaway,
1 “ah-ha”,
and 1 reminder
that is resonating with you right now.



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**Trauma
Informed
& Resilience
Oriented
Leadership**

PRINCIPLES
PRACTICES
POLICIES
PROGRAMS
PARADIGMS

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<h2 style="margin: 0;">Principles</h2> <p style="margin: 0; font-size: small;">(based on SAMHSA's 2014 framework and expanded)</p>	<h2 style="margin: 0;">Domains</h2> <p style="margin: 0; font-size: small;">(based on the National Council of Behavioral Health's Framework)</p>
<ul style="list-style-type: none"> • Safety • Trustworthiness & Transparency • Collaboration & Mutuality • Empowerment • Voice & Choice • Peer Support & Mutual Self Help • Resilience & Strengths Based • Inclusiveness & Shared Purpose • Cultural, Historical & Gender Analysis • Life - Long Learning 	<ul style="list-style-type: none"> • Cross-sector Collaboration • Physical Environment • Engagement & Involvement • Screening, Assessment, Treatment & Services • Progress Monitoring & Quality Assurance • Policy • Training & Workforce Development
<p><small>Check it out: https://traumainformedoregon.org/wp-content/uploads/2020/03/Considerations-for-COVID-19-Trauma-Informed-Response.pdf</small></p>	

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Principles in Practice



Safety
Ensure physical and emotional safety, recognizing and responding to how racial, ethnic, religious or sexual identity may impact safety.



Choice
Maximize choice, addressing how privilege, power, and historic relationships impact both perceptions about and ability to act upon choice.



Empowerment
Encouraging self-efficacy, identifying strengths, and building skills which lead to individual pathways for healing while recognizing and responding to the impact of historical trauma and oppression.



Trustworthiness
Foster genuine relationships and practices that build trust, making tasks clear, maintaining appropriate boundaries and creating norms for interaction that promote reconciliation and healing. Understand and respond to ways in which explicit and implicit power can affect the development of trusting relationships.



Collaboration
Honor transparency and self determination and seek to minimize the impact of the inherent power differential while maximizing collaboration and sharing responsibility for making meaningful decisions.



Equity
A state of being in which an individual's outcomes are no longer predictable by race or other demographic factor. The process of giving individuals what they need, not just what's "equal".

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Leader's Roles in Creating a Trauma Sensitive School



Leaders balance action and reflection

Create an environment where educators and staff not only engage in trauma-sensitive action planning and action steps, but also **build in time for reflecting on the actions** taken to assess where things are going well and where different or additional action is needed.



Leaders develop a shared vision

By developing a shared vision for trauma sensitivity among all staff, the leader helps to **establish a shared purpose** and to create a learning community among the staff, inviting everyone into the work and to take ownership of the work.



Leaders tap into the power of the community

Leaders set the tone for a strong and supportive professional community that shares responsibility both for each other and for all students. The staff works collaboratively to create a safe and supportive school based on an **explicit, shared set of values**, this focus extends to partnering with families.



Leaders foster collaboration

Strong collaboration and collaborative relationships develop over time. Leaders play a crucial role in **setting the conditions** for these relationships to be nurtured and to grow.



Leaders value inquiry

To promote new ways of thinking and new possibilities, leaders **create a culture of inquiry** among staff and also ask themselves:

- What do I pay attention to?
- What are the next steps?
- What professional development is required?

Adapted from: <https://traumasensitiveschools.org/school-building-leaderships-role-in-creating-a-trauma-sensitive-school/>

Voices from the Field

Project AWARE Kentucky

Project AWARE Tennessee





Kentucky Department of Education's Implementation of Trauma Informed Practices in Education



Kathryn Tillett, MSSW, KDE
Miriam Silman, MSW, DBHDID



TEAM
KENTUCKY



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Top 10 Celebrations

1. Culture change regarding impact of trauma & role of schools in addressing (& student behavioral health & well-being overall)
2. Improved practices are resulting in better student outcomes
3. Learning Collaborative model using strategic planning teams over sustained period promoted implementation and sustainability
4. Concerted statewide strategy for dissemination
5. Continued expansion of reach and depth of knowledge
 - LEA buy-in => broader and more intensive work,
 - TtTs continue training
 - TARGET, TFCBT, CBITS, SSET, STS



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Top 10 Celebrations

6. 2019 School Safety and Resiliency Act: Content influence & strong constituent pressure
7. Funding allocation in state budget
8. State & schools are better prepared for current triple crises (pandemic, racial trauma, opioid use) & don't have to make argument for social-emotional support to leaders
9. Leaders & LEAs are more receptive to acknowledging racial trauma now, perhaps less fearful, more understanding about how to respond
10. Equity & youth voice (notoriously thorny issues) are receiving new funding to ensure continued focus and action.



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Lessons Learned

Get	Attend	Model
<p>Get the right people involved</p> <ul style="list-style-type: none"> • Diverse content experts across KY Dept of Education divisions • Trauma experts: UK Center on Trauma and Children • Trusted messengers & boundary-spanners: Regional Special Education Cooperatives 	<p>Attend to engagement</p> <ul style="list-style-type: none"> • Administrative leaders need special treatment • Intentionally promote collaboration and bridge gaps to avoid issues being silo-ed among counselors and special education departments 	<p>Model multi-disciplinary collaboration: Blending TIC + School Practice expertise and modeling collaboration was critical</p>

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Lessons Learned, continued

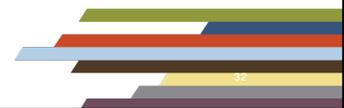
- **Funding alone doesn't overcome skepticism and other barriers:**
 - Address conceptual differences & terminology, e.g. re-frame/explain content relative to behaviorist approach
 - Persist: Ongoing, consistent messaging & repeat trainings throughout the state
 - Be ready to respond when opportunities arise (legislative, leadership changes, & even local crises)
- **Resist pressure for quick fixes or timelines:**
 - Learning Collaborative model for teams delivered content well; needed universal model of implementation & tool for measuring implementation
 - Ongoing coaching & support for both teams & trainers was critical to successful implementation



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Leading Trauma-Informed School Systems Change

Janet Watkins, TN AWARE Project Coordinator
Tennessee Department of Education, Office of Whole Child



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Tennessee ACE's Initiative Mission

We work to change the culture of Tennessee so that the state's overarching early childhood philosophy, policies, programs and practices utilize the latest brain science to prevent and mitigate the impact of adverse childhood experiences.

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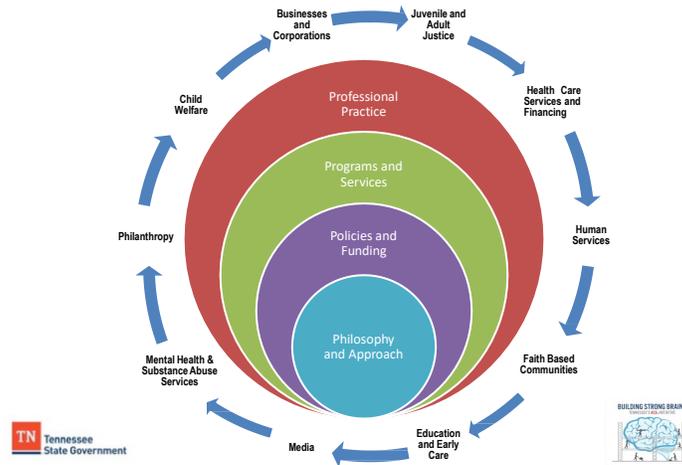
Public Private Partnerships

- Public Sector Steering Group *balanced by*
- Private Sector Steering Groups *supported by*
- Foundations *and*
- In-kind resources of Tennessee State Government

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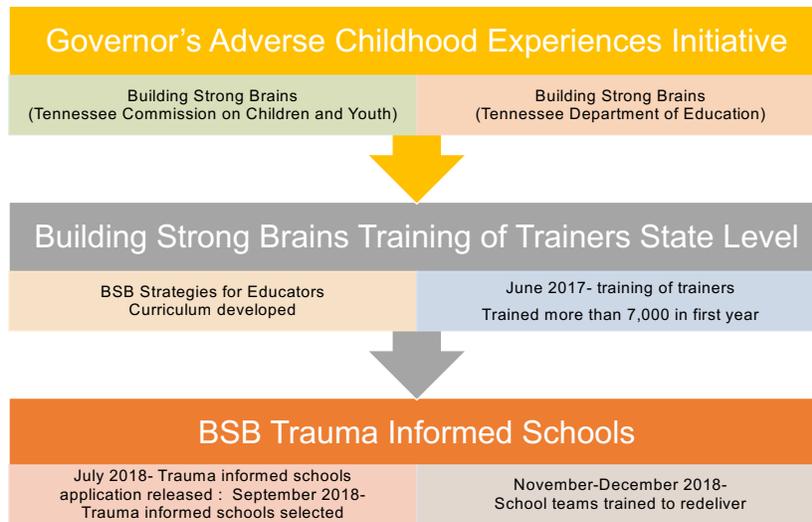
BSB Intentions: Transform the “4 Ps”

Adverse Childhood Experiences: Prevention, Mitigation, and Recovery
Anticipated Multi-Sector, Multi-Level, Public and Private Impacts 2-29-16



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Trauma-informed Schools: Building Strong Brains



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3 Year Commitments

- Form a trauma-informed schools leadership team
- Conduct a school needs assessment
- Deliver *Building Strong Brains* training to faculty and staff
- Participate in the department's online school climate survey for students, teachers and parents
- Collect attendance and discipline data
- Focus on staff self care

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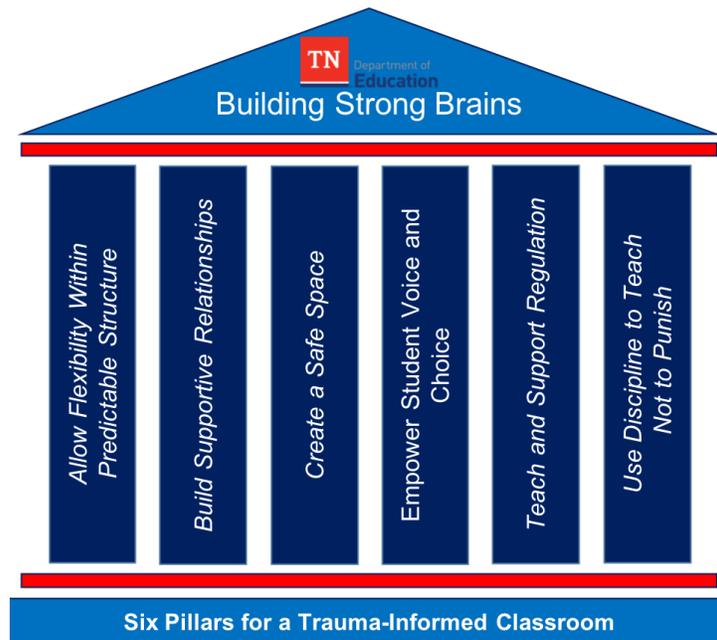


Commitments

- Include information about trauma-informed practices within existing family engagement activities
- Participate in periodic community of practice calls led by TDOE
- Complete action planning tool each year to include action steps for training, data collection and analysis, staff self-care, and family engagement activities
- Participate in deeper dive into strategies in year 2 with Six Pillars of a Trauma Informed School training

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Six Pillars for a Trauma-Informed Classroom



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Top Celebrations

1. Interagency collaboration—participate in statewide planning groups comprised of leadership from private and public steering groups
2. Continued focus and support from executive, legislative and judicial branches of government
3. Built a cadre of trainers from all three grand divisions of the state to increase capacity for training
4. Legislative action related to trauma-informed schools
5. Whole Child is one of the three initiatives in the department's strategic plan. Building Strong Brains is an integral part of Whole Child
6. In response to COVID and racial violence, trauma training has been the most requested training from districts in regard to Whole Child



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TN AWARE's Lessons Learned



Mindset: Changing the mindset of the adults interacting with young people is the first and most critical step



Self-Care: Teachers and staff have embraced and appreciated the elevation of self care strategies



Technical Assistance and Support: Follow up at the completion of training is critical. Find a champion in the district to assist.

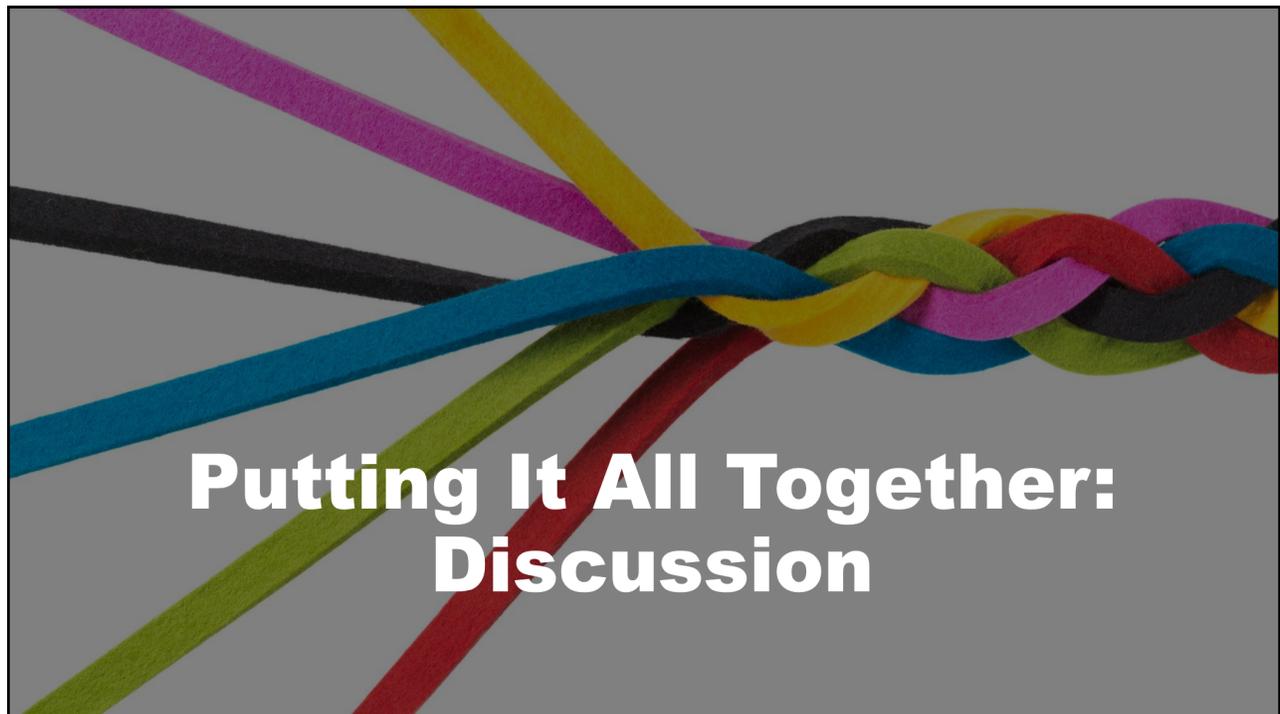


Action Planning: Data, data, data—must be data driven!

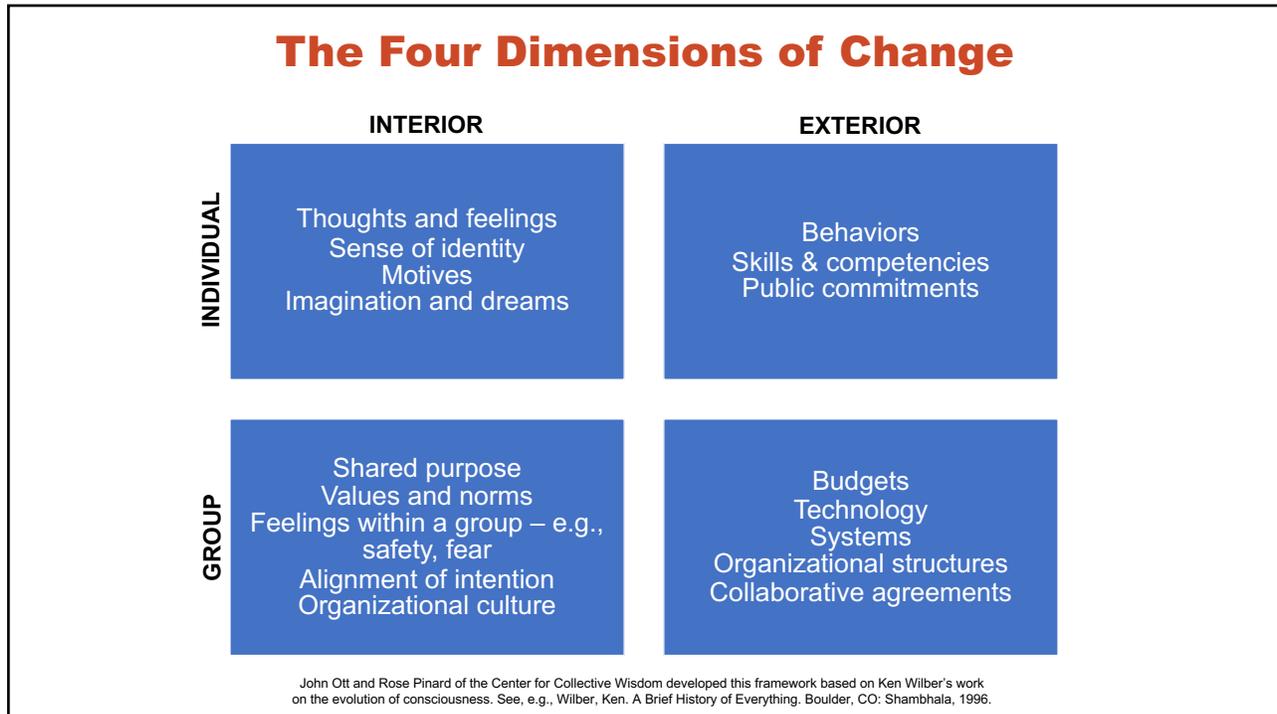


Community of Practice Calls: Forming a community of practice to share strategies that work, new readings, etc., supplies an additional layer of support to continue the work

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The Bottom Line

- The language we use matters-always, and especially now
- This leadership work happens now & always
- Leadership through uncertainty = personal, structural, procedural
- Resourcing and regulation happens at personal, interpersonal, team, and organizational levels
- It's not trauma-informed if its not racially just
- Normalize, name, nurture
- Your story is not everyone's story, and everyone's story is not your story
- Witness, don't dismiss
- Nothing is definitive, and everything is dynamic and subjective
- Mental health challenges do not always = trauma; adversity does not always = trauma or mental health challenges
- This trauma impacts us all; but we may experience different acuity of impact
- COVID Consent! Ask people if they want to share/ disclose- give the power of choice

Others?

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6 C's

- **Connection:** Increase safety & stability
- **Context:** Reduce stress
- **Coherence:** Promote connectedness
- **Collaboration:** Co-create inclusive resources, response and recovery strategies
- **Consolidation:** Instill authentic hope
- **Consent:** Cultivate power with vs power over

Adapted from T2's 5Cs, "Clinical Guidelines for COVID-19 Response" | <http://traumatransformed.org/healing-mass-trauma/>

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TIRO COVID 19 Leadership Resources

- Trauma Informed Systems-COVID 19: Resourcing Practices for Leaders During Crisis (Trauma Transformed): <http://traumatransformed.org/wp-content/uploads/Resourcing-Leaders-in-pandemics.pdf>
- COVID-19 Considerations for a Trauma Informed Response for Work Settings (Organizations/Schools/Clinics): <https://traumainformedoregon.org/wp-content/uploads/2020/03/Considerations-for-COVID-19-Trauma-Informed-Response.pdf>
- Trauma-Informed Leadership Guide for Leaders from All Sectors and Industries: <https://jessicalawmastercom.files.wordpress.com/2020/03/covid-19-trauma-informed-leadership-guide.pdf>
- Planning Your Organization's Return from COVID-19 Planning Checklist: <https://kindredleaders.com/2020/04/15/planning-your-organizations-return-from-covid-19-planning-checklist>
- "Leading Your People In Times of Crisis": <https://www.rootinc.com/blog/leading-your-people-in-times-of-crisis>
- The National MHTTC website for COVID 19 resources: <https://mhttcnetwork.org/centers/global-mhrtc/responding-covid-19>

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Organizations to Whom We Refer for Our Learning

- PCORI: <https://www.pcori.org>
- Resilience Research Centre: <http://resilienceresearch.org>
- Adverse Childhood Experiences: ACES Too High: www.acesconnection.com & ACES Connection: www.acesconnection.com
- The Center for Nonviolence & Social Justice (Drexel University): <http://www.nonviolenceandsocialjustice.org/FAQs/What-is-Trauma/41>
- The Center for Post-Trauma Wellness: <http://www.posttraumawellness.net/resources>
- The Trauma Center at Justice Resource Institute: <http://www.traumacenter.org/index.php>
- The Prevention Institute: www.preventioninstitute.org
- The Center for Collective Wisdom: <https://c4cw.org>
- Trauma Transformed: <https://traumatransformed.org>
- Lumos Transformed: <https://lumostransforms.com>
- NCTSN Learning Center: <http://learn.NCTSN.org>
- National Child Traumatic Stress Network: www.NCTSN.org
- TEND: <https://www.tendacademy.ca>
- Organizational Health in Trauma-Exposed Environments – Online Course
- The American Psychological Association's Center for Organizational Excellence: <https://www.apaexcellence.org/resource>

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Resource: Trauma-Informed Relational Systems Professional Competencies for Leaders, Always

- Demonstrate knowledge of the disorganizing effects of trauma at all levels.
- Demonstrate knowledge about and skills of offering consultation on trauma-informed systems of care and models of care.
- Demonstrate the ability to engage in interdisciplinary collaboration regarding traumatized individuals and communities.
- Demonstrate understanding that institutions and systems can contribute to primary and secondary trauma and offer strategies to reduce these barriers as appropriate.
- Demonstrate an understanding of the importance of using relational healing for relational injury (e.g., trustworthiness) and the capacity to use the relationship effectively.
- Demonstrate knowledge about the role of organizations in building resilience, prevention, and preparedness (universal precautions).
- Demonstrate the ability to consistently recognize how the cultural, historic, and intergenerational transmission influences perception of helpers.

Cook, J. M., & Newman, E. (2014). A consensus statement on trauma mental health: The New Haven Competency Conference process and major findings. *Psychological Trauma: Theory, Research, Practice, and Policy*, 6(4), 300-307. doi:10.1037/a0036747

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Extension Activity: Our TIRO Leadership Competencies

- **Head:** what mindsets foster trauma-informed & resilience - oriented experiences and environments?
- **Heart:** What is the **WHY** you are committing to-for your clients AND your colleagues?
- **Hands:** What skills, knowledge, and training do staff need to have to carry out your Why?
- **Feet:** What actions, strategies, and decisions do you experience from leaders who are committed to trauma-informed and mentally well work experiences and environments?



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New! School Crisis Suite of Tools

School Mental Health Crisis Leadership Lessons: *Voices of Experience from Leaders in the Pacific Southwest Region*

- Guide
- Complementary Reflection Worksheet

LEARN MORE AT

[Bit.ly/smh-crisis-leadership-lessons](https://bit.ly/smh-crisis-leadership-lessons)



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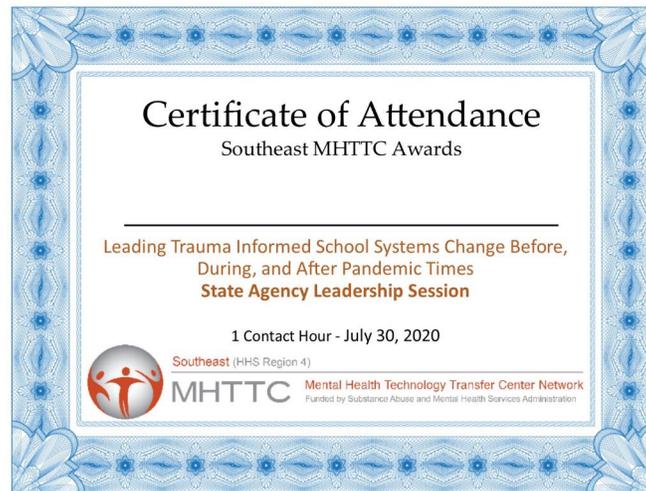
Thank you for attending!

**We need to hear from you to keep
bringing you these FREE resources!**

Please take a few minutes to give us your feedback!
We use it to plan our future events—and we are required
to include it in our reports for our funder, SAMHSA.

The feedback form will appear on your screen when
the webinar ends and is also included in the follow-up
email sent immediately following the webinar.

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A link to your certificate of completion is located at the bottom of the evaluation.

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