

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

International Center for Trauma  
Education & Care  
Andrews University

20  
23

Institute for Chief Academic Officers with Chief Advancement  
and Chief Communication and Marketing Officers  
November 4–7, 2023 » Tampa Marriott Water Street Hotel



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# Higher Education Initiatives Team

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- 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).



## International Center for Trauma Education & Care

### TRAUMA-INFORMED STAGES OF IMPLEMENTATION

#### 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.

## *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.

## Back Story: Andrews University Trauma Development



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



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## 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 \(OPHPR\)](#), 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:



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



Spirituality





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### TRAUMA RESPONSIVE

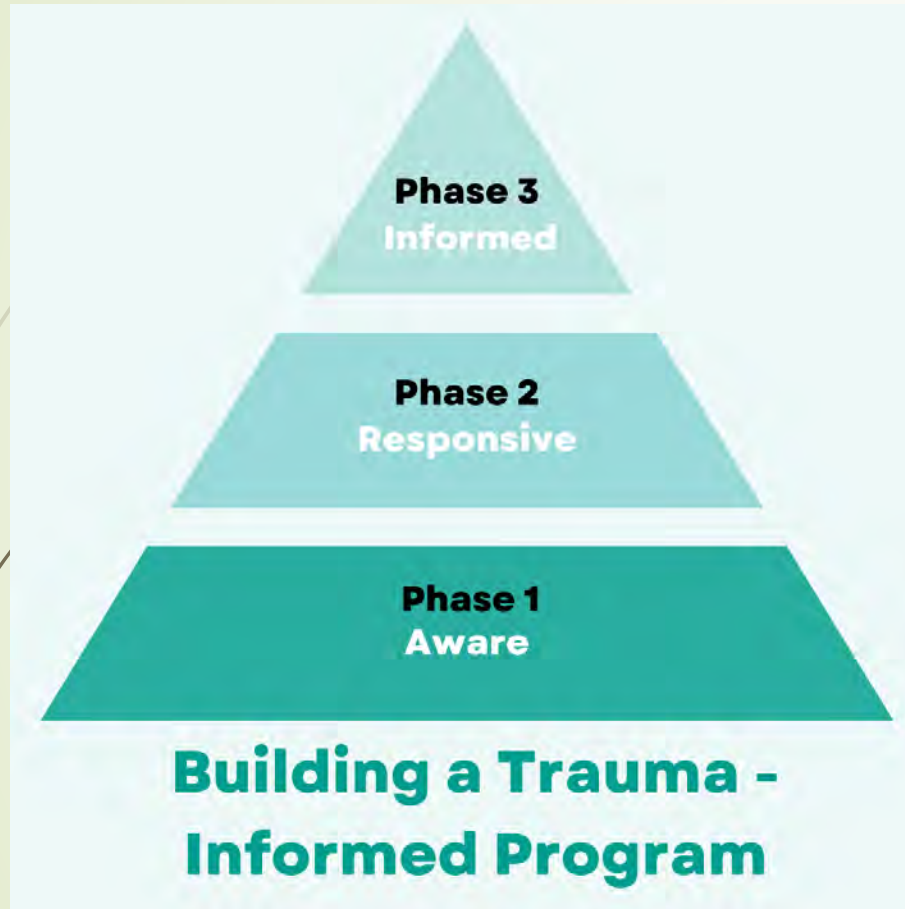
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# Model for Consulting and Training: Phase I

## ➡ Trauma Aware

- ➡ Basic: What is trauma and basic coping skills
- ➡ Advanced: Training seminar on trauma screening, assessment, referral



# Model for Consulting and Training: Phase II

## ■ Trauma Responsive

- Basic: Advanced Trauma Aware + student management issues + curriculum building recommendations
- Advanced: Group and individualized coaching on curriculum modifications + classroom management issues



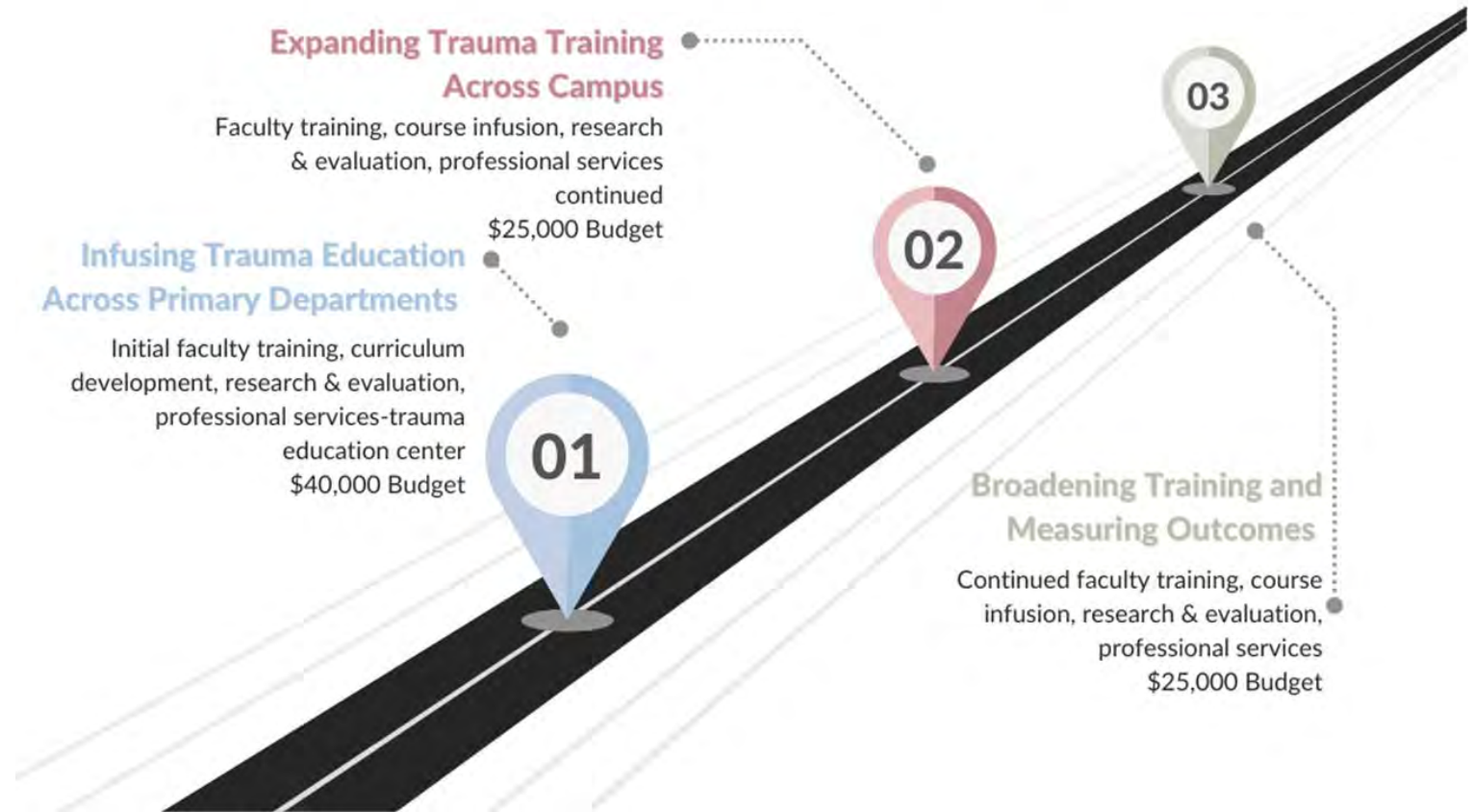
# Model for Consulting and Training: Phase III

## ➡ 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





# 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



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Thank you  
for attending  
this session!



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