

Trauma-Informed Organization Guide

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This guide accompanies the KCPHD Trauma-Informed Organization Policy. Providing evidence-based education and strategies for trauma and its impact on the workforce.

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Key Takeaways

70% OF ADULTS IN THE US HAVE EXPERIENCED AT LEAST ONE TRAUMATIC EVENT

- ◆ Experiencing trauma is common.
- ◆ Any profession or program can experience trauma. Or some type of trauma.
- ◆ Trauma can change your views about yourself, the world, and the future.
- ◆ Working in some professions and/or programs can increase the risk of trauma. Or some type of it.

(Galindo et al., n.d.) (Chefalo, 2023a)

Learning more

- [Guidance for CDR and FIMR Teams on Addressing Vicarious Trauma](#) - NCFRP

One program that may increase the risk of vicarious trauma is Child Fatality Review (CFR). This work involves repeatedly studying cases of childhood death. Profound loss, trauma, and empathy can be associated with each case.

Personal history may increase the risk of experiencing vicarious trauma. For example, a person who has experienced a house fire may have a harder time reviewing deaths involving fire. (National, 2016)

Becoming a Trauma-Informed Organization

- ◆ Is NOT accomplished with a universal plan or checklist.
- ◆ Is for anyone. Anyone in the organization can contribute to the culture shift.
- ◆ Is an ongoing process. One that is adapted to fit the organization.

(Marris, 2023)

Benefits of a Trauma-Informed Organization

- ◆ Improved employee wellness and mental health.
- ◆ Improved physical health. Fewer sick days.
- ◆ Lower healthcare costs.
- ◆ Greater resilience.
- ◆ Greater stress tolerance.
- ◆ Greater employee satisfaction, lower turnover.
- ◆ Positive impact on families and communities.
- ◆ Improved collaboration and communication.

(Chefalo, 2023a) (Marris, 2023)

Chefalo Consulting. (2023a). Complete guide to trauma- informed implementation. <https://www.chefaloconsulting.com/product-page/a-guide-to-trauma-informed-implementation>

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What is Trauma?

Trauma is a harmful event(s) that happens without healing.

(Marris, 2023)

Individual Trauma

A single event that happens to one person.

Example: A car accident.

Community Trauma

Trauma in a community or culture.

Example: Surviving a school shooting.

Group Trauma

Trauma shared by a specific group.

Example: Military service members experiencing war.

Mass Trauma

Trauma that affects a large amount of people.

Example: Terrorist attacks of September 11, 2001.

(Galindo et al., n.d.)

Any harmful events, situations, or experiences can cause trauma. The specifics of trauma are different for everyone because of different life experiences.

(Chefalo, 2023a)

Individual Trauma Experiences

- Physical or emotional neglect.
- Exposure to substance use at home.
- Exposure to mental health challenges at home.
- Loss of a loved one to death, family separation, and/or abandonment. I.e., child protection cases, divorce, incarceration, etc.
- Experiencing and/or witnessing violence.
- Frightening or upsetting health related experiences. I.e., serious illness, pain, injury, and/or medical procedures. This can be experienced by you, or people close to you.
- Bullying, discrimination, and/or unjust treatment.
- Poverty, hunger, and/or housing instability.
- Physical, emotional, and/or sexual abuse.

Mass Trauma Experiences

- Exposure to toxins, pollution, and/or other environmental problems.
- Racism, genocide, ethnocide, oppression, disenfranchisement, etc.
- Natural disasters.
- Refugee experiences, exposure to torture, terrorism, and/or war experiences.

(Marris, 2023)

Chefalo Consulting. (2023a). Complete guide to trauma- informed implementation. <https://www.chefaloconsulting.com/product-page/a-guide-to-trauma-informed-implementation>

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Vicarious trauma (VT) is hearing the details of someone else’s trauma. Instead of experiencing it firsthand. VT occurs from cumulative and persistent long-term exposure to others’ trauma experiences.

(National, 2016)

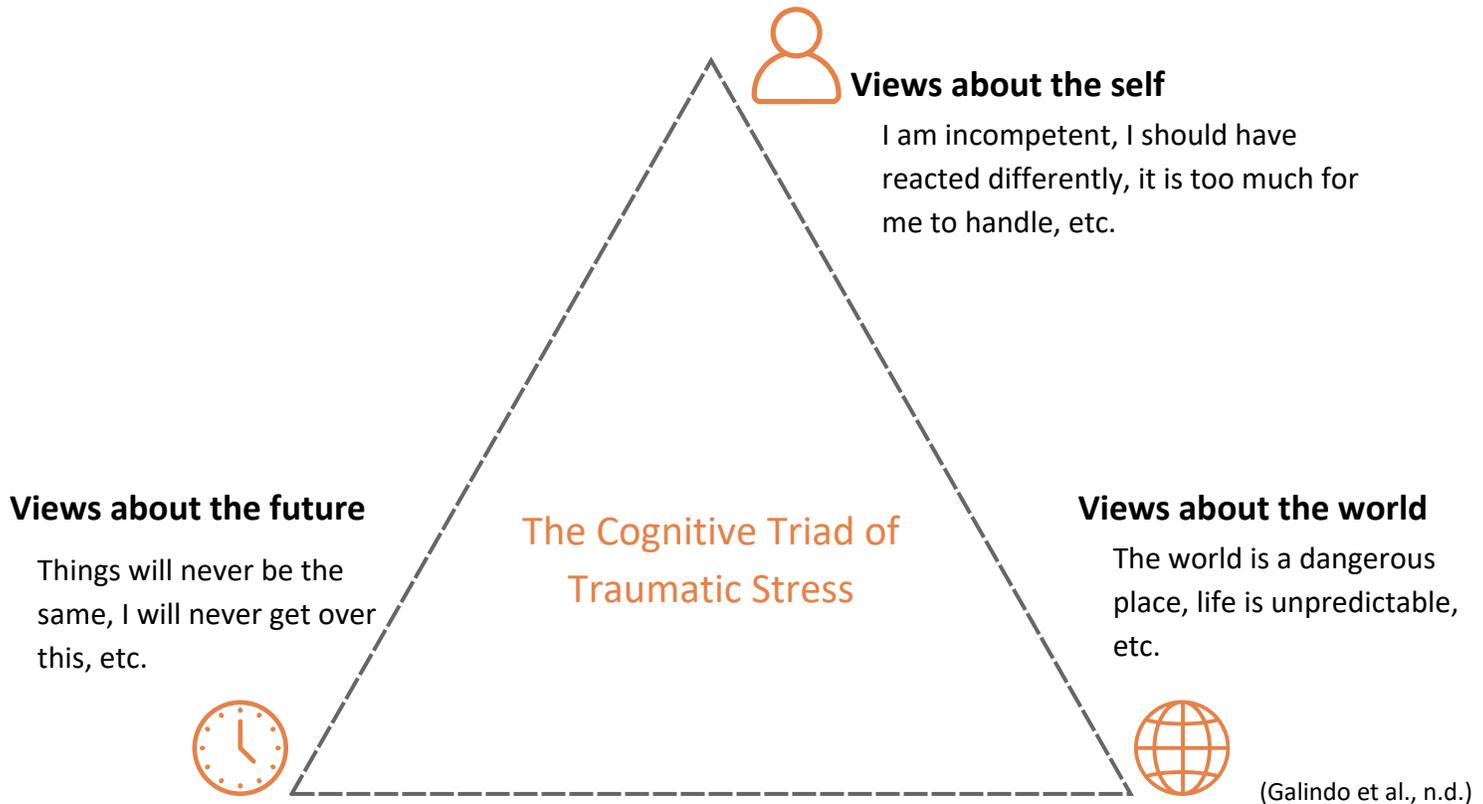
Vicarious trauma can happen at any workplace, but tends to be more common in professions such as:

- Social work
- Healthcare
- Law enforcement
- Victim advocacy
- First responders
- Journalists

Some KCPHD divisions and programs may be more likely to experience vicarious trauma. These include:

- Child Fatality Review
- Veterans Services
- Harm Reduction
- Emergency Management
- Communicable Disease
- Vital Records Management
- Human Services
- Environmental Health

Vicarious trauma is “a change of cognitive schemas resulting from consistent empathic engagement with traumatized individuals...**indirect exposure to trauma changes service providers’ cognitive schemas and beliefs about the self, others, and the world.**” (Kim et al., 2021, pg. 2)



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Trauma

Trauma is an event(s) that happens either too much, too soon, too fast, or for too long without something reparative or healing. Traumatic events have lasting adverse effects on a person's well-being.

How it might show up

- Feeling anxious, sad, or angry.
- Trouble concentrating and sleeping.
- Repeatedly thinking about what happened.
- Easily startled and jumpy.
- Headaches, stomach pain, and/or digestive issues.
- Difficulty falling asleep or staying asleep
- Fast heartbeat and sweating.

Vicarious Trauma

Experiencing something by hearing or seeing the details of someone else's trauma. Not experiencing it firsthand. Vicarious trauma is experienced long term and results in a shift in beliefs. This continues over time.

How it might show up

- Loss of meaning and hope.
- Decreased ability to make decisions.
- Difficulty regulating/managing emotions.
- Difficulty feeling okay about yourself.
- Excessive worry about potential dangers in the world.
- Challenges with boundaries.
- Headaches, stomachaches, and/or fatigue.

Secondary Traumatic Stress

Work related, secondary exposure to extremely or traumatically stressful events. Trauma-related symptoms are usually quick to start and associated with a particular event. Acute or develops in the short term.

How it might show up

- Nightmares.
- Feeling angry or cynical.
- Misplaced feelings of guilt.
- Disturbing thoughts of the event.
- Isolation from family and friends.
- Feeling detached, numb, or apathetic.

Chefalo Consulting. (2023a). Complete guide to trauma- informed implementation. <https://www.chefaloconsulting.com/product-page/a-guide-to-trauma-informed-implementation>

Coping with traumatic events. (n.d.) National Institute of Mental Health. Retrieved from https://www.nimh.nih.gov/health/topics/coping-with-traumatic-events#part_2510%20

Marris, W. (2023). Trauma-informed workplaces: concepts, strategies, and tactics to build workplaces that support well-being. Campaign for Trauma-Informed Policy and Practices. <https://www.ctipp.org/post/toolkit-trauma-informed-workplaces>

Burnout

Physical, mental, and emotional exhaustion from long-term stress in the workplace. Burnout involves feelings of cynicism and reduced personal accomplishment.

How it might show up

- Apathy.
- Cynicism.
- Blaming others.
- Feeling overwhelmed.
- Disconnecting from others.
- Desire to use substance to cope.
- Feeling like nothing can help.
- Irritability and easily frustrated.
- Decrease in professional efficacy.
- Increased mental distance from work.
- Feeling like a failure. Or like you aren't doing your job well.
- Decreased empathy/compassion.

Compassion Fatigue

Deep emotional, physical, and spiritual exhaustion with acute emotional pain. Compassion fatigue is a combination of burnout and secondary traumatic stress.

How it might show up

- Increased isolation.
- Conflict in relationships.
- Limited stress tolerance.
- Feeling, angry, irritable, or tense.
- Reduced sense of accomplishment.
- Difficulty concentrating on job duties.
- Self-blame, including for situations that are out of one's control.

Resilience

The ability of an individual, family, group, organization, or community to cope with and/or adapt to change, challenges, adversity, and/or trauma. It is a developmental process over the lifespan that must be modeled, taught, and promoted.

How it might show up

- High adaptivity. Sometimes described as "bouncing back" in the face of stress, challenge, or change.
- Strong sense of self.
- Tenacity.
- Active coping skills.
- Willingness to learn new coping skills.
- Realistic sense of hope.

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Coping with traumatic events. (n.d.) National Institute of Mental Health. Retrieved from https://www.nimh.nih.gov/health/topics/coping-with-traumatic-events#part_2510%20

Marris, W. (2023). Trauma-informed workplaces: concepts, strategies, and tactics to build workplaces that support well-being. Campaign for Trauma-Informed Policy and Practices. <https://www.ctipp.org/post/toolkit-trauma-informed-workplaces>

Trauma responses and trauma symptoms are often overlooked or dismissed. They might be seen as “bad behavior” or signs of physical illness. Identifying trauma responses and trauma symptoms can begin the healing process.

Reactions experienced after an event may be:

- Emotional.
- Psychological.
- Physical.

They can vary widely depending on things like:

- The nature of trauma.
- Coping mechanisms.
- Age.
- Environment.

Trauma responses are normal reactions to abnormal events. They can be upsetting and are a normal way of dealing with intense stress or fear.

Fight

Fight response can appear as defensive, irritation, resistance to change, or raising one’s voice. During a fight response, people may become physically aggressive.

Flight

Flight response doesn’t always translate to literally running away. A person might “flee” through avoidance, question dodging or evasion, or not being mentally present during meetings.

Freeze

Freeze response can appear as emotional numbness, shutting down, and zoning out.

Appease (Fawn)

Appease response is when a person resorts to people pleasing to evade a perceived or real threat. Usually, the appeaser crosses their own boundaries or gives more than they can. Leaving them emotionally and mentally drained.

Disassociation

Disassociation is one of the most common and most overlooked symptoms of trauma. When someone dissociates, they experience a disconnect between their thoughts, memories, feelings, actions, and sense of who they are.

Reenactments

A reenactment is the automatic repetition of a previous traumatic event(s). The trauma brain responds as if replaying a memory.

(Chefalo, 2023a)

Learning more

- [Trauma Responses Explained: Fight, Flight, Freeze, Appease](#) - Chefalo Consulting

Individual Coping Strategies

Distraction or Escape

Distraction or escape can take many forms. Examples include:

- Being on social media for hours.
- Netflix binging.
- Online gaming.
- Spending hours at the gym.

Legal and Illegal Substances

Escaping into an altered state with drugs or alcohol.

Other Addictions

All offer an altered state and allow for escape, or avoidance.

- Gambling, exercise, sex, food, self-harm , etc.

Hobbies and Self Care

- Selfcare: Massage, meditation, bubble bath, being in nature, reading a good book, etc.
- Hobbies: Art, sports, fishing, etc.

Informal Debriefing

Talking to a trusted friend, colleague, or mentor can be helpful. It may not solve anything, but can help with loneliness. Sometimes processing something by putting words to it is enough.

Professional Help

- Psychologist, coach, mentor, EAP service, or family doctor.

They can use specific forms of treatment, or a combination, such as:

Cognitive Behavioral Therapy (CBT), Mindfulness Based Therapy (MBT), interpersonal therapy, coaching methodology, etc.

What makes a coping response a good or a bad strategy?

- Is it helpful? Or unhelpful? This language removes judgement.
- Is it short-term or long-term? A strategy that feels good in the moment may not be good in the long-term.
- How does it impact others? Does it interfere with somebody else's wellbeing? Does it help with growth?

N.E.A.R Science stands for Neurobiology, Epigenetics, Adverse Childhood Experiences (ACEs), and Resilience.

This approach helps gain an understanding of childhood experiences. It studies adverse effects on the brain and overall health. As well as how positive experiences create healing and resilience.

This framework combines knowledge from several fields of study. This helps understand the long-term impact of childhood experiences on health, behavior, and mental well-being.



Neurobiology

The study of the brain and nervous system. Adverse experiences like abuse, neglect, and exposure to violence can affect brain development. Chronic stress during childhood development can alter brain structures and functions. Which can lead to issues with learning, memory, emotional regulation, and decision-making.

As a result, the brain's stress response systems can become overactive. Increasing the risk of mental health challenges and chronic diseases.



Epigenetics

The study of how environmental factors can influence gene expression. It explores how early trauma or adversity can alter genes. Potentially leading to changes in the body's stress response system and immune function. Increasing the likelihood of chronic diseases.

These changes can be passed down across generations. Affecting the individual who experienced trauma or adversity and their descendants.



ACEs

ACEs are traumatic events that happen in childhood. They can lead to lifelong physical and mental health challenges. ACEs include experiences like:

- Physical or emotional abuse.
- Household dysfunction.
- Neglect.
- Exposure to domestic violence.

These experiences can disrupt healthy brain development. Increasing the risk of conditions like:

- Depression.
- Substance abuse.
- Anxiety.
- Chronic illnesses.



Resilience

The ability to recover from adversity and thrive despite challenges. Protective factors like supportive relationships, community resources, and personal coping skills can help children and adults overcome the negative effects of ACEs. Resilience is growing, adapting, and learning.

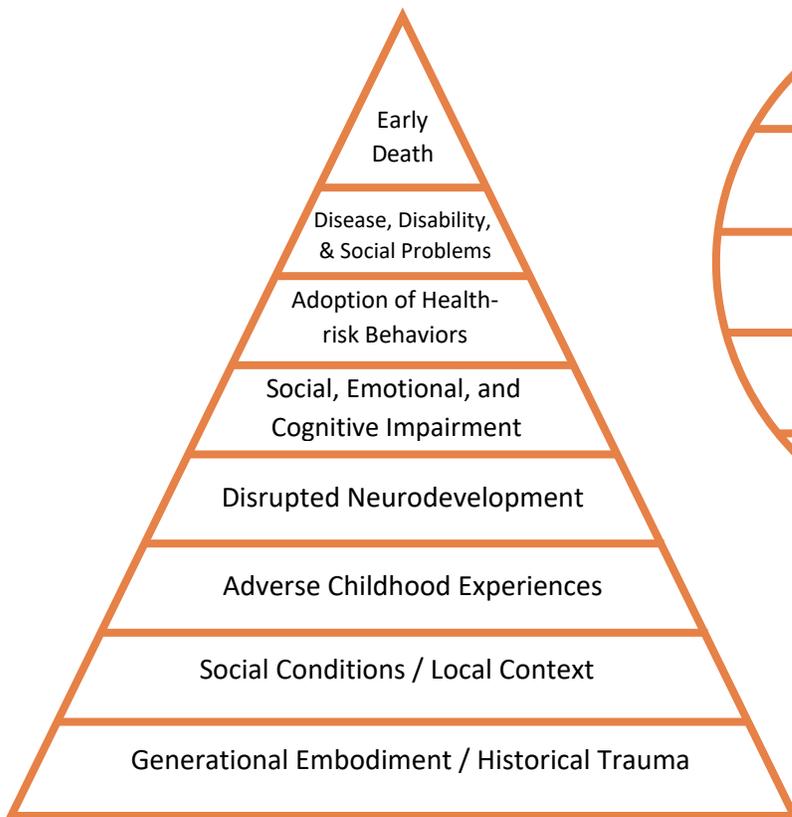
PACEs stands for Positive and Adverse Childhood Experiences. PACEs are positive and negative childhood experiences. They influence development, well-being, and long-term outcomes in life.

PACEs can help buffer the effects of ACEs. Creating resiliency and reducing the likelihood of negative outcomes in life.

Supportive, nurturing, and enriching experiences in childhood promote healthy development and wellbeing. Positive experiences include:

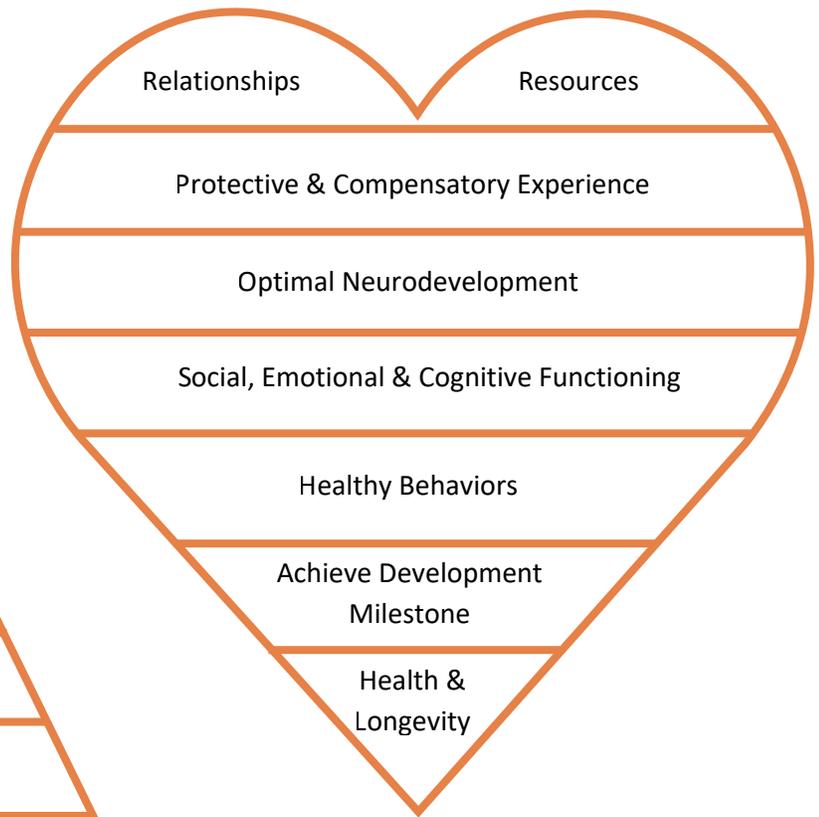
- Feeling supported in school, at work or by community organizations.
- Positive relationships with peers and mentors.
- Engaging in activities promoting social, emotional, and cognitive growth.

How ACEs Influence Health & Well-being Throughout the Lifespan



(CDC, 2024)

How PACEs Influence Health & Well-being Throughout the Lifespan



(Ratliff et al., 2020)

It is important to understand how PACEs impact a person. This helps to see the whole picture. Both positive and adverse childhood experiences can have a profound impact on lifelong health and well-being.

Strategy #1: Support and Belonging

Support

Support in the workplace recognizes that not all people start at the same place. Different types of support might be needed to succeed.

Learning more

- [Building an Equitable Workplace at Local Health Departments](#) - NACCHO

Differences in the Workplace

- Organizational roles and responsibilities.
- Personalities and perspectives.
- Cultures and backgrounds.
- Skillsets, knowledge, and expertise.
- Spiritual beliefs and worldviews.
- Race and ethnicity.
- Lived experiences.
- Physical, mental, and emotional abilities.

(Chefalo, 2023a)

Belonging

Belonging in the workplace helps staff feel welcome and supported. It creates a space where employees do not feel the need to hide or minimize parts of themselves. That doesn't mean they share everything. The goal is that employees can share parts of themselves or their lives, if they want to.

Implementing

1. Foster meaningful and authentic participation.

Provide opportunities for input from employees. Use that input when making decisions. Help people feel heard and included in decision making.

2. Invest in employees.

Provide opportunities for growth. Including professional development, training programs, and mentorships.

3. Commit to diverse representation.

Commit to interview panels that include multiple perspectives. Encourage collaboration among employees.

4. Be intentional in communications and actions.

Communication with employees is key. Specific and actionable communication helps support workplace belonging.

5. Remember there's no one-size-fits-all solution, keep evolving.

Continually review and update policies, practices, and procedures with the lens of building unity at work.

(Wormington, 2024)

1. Realize

Understanding trauma can affect KCPHD as an organization and individuals.

Implementing

- Use this guide and its resources to learn more about trauma. Including its impacts in the workplace and individuals.
 - When we have language and understanding to talk about these things, then we are better prepared to address them.
-

2. Recognize

People at KCPHD recognize signs of trauma. Workforce development, employee assistance, and management practices assist in recognizing trauma.

Implementing

- You can practice recognizing the signs of trauma in yourself and others.
 - To learn more about vicarious trauma, read about vicarious trauma on pg. 3 of this guide.
 - For individualized help recognizing personal trauma, reach out to the Employee Assistance Program (EAP). Offered to all Kittitas County staff as a free benefit.
-

3. Respond

To respond effectively, KCPHD integrates trauma-informed approaches in all areas. With an understanding that trauma can impact anyone. And trauma is different for everyone.

Implementing

- Ongoing trauma-informed training opportunities for staff.
 - Leadership can recognize and respond to the role of trauma. Both in the lives of staff and those we serve.
 - Policies and practices support a trauma-informed approach.
-

4. Resist

KCPHD seeks to resist re-traumatization. Staff at KCPHD understand that individuals that have experienced traumatic events may have a higher increase of being re-traumatized in the workplace setting.

Implementing

- Intentional debriefing after challenging work experiences, like CFR reviews.

Learning More

- [Vicarious Trauma Training - Workplace Mental Health](#)

(SAMHSA, 2014)

There are six guiding principles in a trauma-informed approach. KCPHD can embed these principles into our culture. By using them in our daily practices, procedures, and policies.

1. Safety



Staff at KCPHD feel physically and psychologically safe.

Implementing

- Try creating your own personal safety plan. [This is an existing template](#) you can use.
- Remember that people experience safety differently.
- Prioritize support and belonging in the workplace.

Learning more

- [Step-by-step guide to safety planning](#) - Dr. Sandra Bloom, Associate Professor Dornsife School of Public Health at Drexel University

2. Trustworthiness and Transparency



KCPHD employees use transparency in daily operations.

Implementing

- Provide feedback in a timely manner.
- Communicate updates and changes in a timely manner.

Learning more

- [Transparent Communication](#) - Michigan State University
- [Strategies for Transparency](#) - University of Florida Training & Organizational Development

3. Peer Support



Peer support helps establish safety and hope. In this instance, the term “peers” are coworkers experiencing similar traumas at work.

Implementing

- Schedule intentional debriefing after challenging work experiences. Like CFR reviews. Attending and/or participating is optional. Never required.
- Normalize symptoms of trauma.

Learning more

- [Guidance for CDR and FIMR Teams on Addressing Vicarious Trauma](#) - NCFRP
- [Mental Health Awareness Training](#) - Workplace Mental Health Institute

4. Collaboration and Mutuality



KCPHD recognizes that everyone has a role to play in a trauma-informed approach. Healing happens when prioritizing relationships. And in the sharing of power and decision-making.

Implementing

- Everyone can contribute to a trauma-informed approach.
- Prioritize connection and relationships.

Learning more

- [U.S. Surgeon General’s Framework for Workplace Mental Health & Well-Being](#)
- [Improve Social Relationships in the Workplace](#) - Harvard University

5. Empowerment, Voice, and Choice



KCPHD believes in the ability of individuals, organizations, and communities to heal. Leading to recovery from trauma.

Implementing

- Build upon individual strengths, skills, and experiences.
- Shared decision-making, when possible.

Learning more

- [Empowerment, Voice, and Choice in Organizations](#) - Phoenix Trauma Center

6. Cultural, Historical, and Gender Issues



KCPHD actively moves past cultural stereotypes and biases. For example, biases based on race, ethnicity, sexual orientation, age, religion, geography, etc.

Implementing

- Practice inclusion in policies, protocols, and processes.

Learning more

- [Improving Cultural Competency and Awareness for Health Professionals](#) - Institute for Healthcare Advancement
- [Foster Cultural Competence](#) - Massachusetts Department of Public Health

“Trauma-informed supervision incorporates the fundamental elements of trauma-informed care into the supervisor-supervisee dynamic and focuses on offering relationship-based supervision. It breaks down the traditional hierarchy of manager to employee and emphasizes open, honest feedback” (Galindo & Lewis-Stoner, n.d., p. 36).

1. Safety



Managers at KCPHD help staff feel physically and psychologically safe.

Implementing

- Give space for people to express their concerns. Without fear of retribution.
- Avoid spreading blame.
- Show compassion and grace.
- Authentically asking, “Are you okay?”

(Galindo et al., n.d.)

(Chefalo, 2023b)

Learning more

- [9 things that happen when employees feel safe at work](#) - Shenandoah Chefalo

2. Trustworthiness and Transparency



Managers and Management Team use transparency when making decisions. And in daily operations. The goal is to build and maintain trust with staff.

Implementing

- Share as much information as possible. Even if it feels like overcommunicating.
- Explain the process behind decisions and directions.
- Accept that some people may be slow to trust others.
- Practice intentional relationship building with everyone.
- Be consistent in your practices. For example, keep regular meeting times with staff.

(Galindo & Lewis, n.d.)

Learning more

- [Six practices to be intentional about building positive relationships](#) - Katie Ockert

3. Peer Support



Managers understand that staff can benefit from supporting one another.

Implementing

- If they want, help staff create a “buddy system”. To help feel connected and support each other.
- Normalize symptoms of trauma.
- Promote resilience among staff.

(Galindo et al., n.d.)

Learning more

- [The art and science of safety and connection in the workplace](#) - Dayna Lee-Baggley, Ph.D.
- [Secondary Traumatic Stress Core Competencies for Trauma-Informed Support & Supervision](#) - The National Child Traumatic Stress Network

4. Collaboration and Mutuality



KCPHD managers help share decision-making. They work with staff in an engaged way, toward the same goals.

Implementing

- Keep in regular contact with others. In person, email, or virtually.
- Try deciding on goals and objectives together, when possible. Instead of telling staff what to do.
- Find ways to keep teamwork alive.

(Galindo et al., n.d.)

Learning more

- [5 affirmations to support compassionate leadership](#) - Shenandoah Chefalo
- [How can we grant employees flexibility in their job positions?](#) - Mental Health America

5. Empowerment, Voice, and Choice



KCPHD managers provide tools and resources to help their team learn. Regularly providing praise more than criticism. Choices are offered in all aspects of work, whenever possible.

Implementing

- Help make sure everyone feels seen and heard. This may look different for different people.
- Offer flexible options for work schedules based on staff's needs, as much as possible.
- Honor staff's choices and preferences, as much as possible.

(Galindo et al., n.d.)

Learning more

- [Autonomy in the workplace: Why it matters and how to foster it](#) - Lyra Health
- [Job autonomy and work meaning: drivers of employee job-crafting behaviors in the VUCA times](#)

6. Cultural, Historical, and Gender Issues



KCPHD managers recognize that culture and background can influence staff's work and interactions.

Implementing

- Practice cultural humility.
- Promote cultural competence among staff.
- Acknowledge your privilege. Recognize that not all individuals experience the same levels of risk or protective factors.

(Galindo et al., n.d.)

Learning more

- [Culture Comparison Tool](#) - Hofstede Insights
- [What is cultural competence & how to develop it](#) - Penn State Extension

Organizational Strategies

Evidence-Based Strategies

Support and Belonging

- Not everyone starts at the same place. Different types of support may be needed.
 - Differences in the workplace are more than race and ethnicity.
 - Belonging in the workplace means staff are welcomed, supported, and free to be themselves.
-

Four Rs of a trauma-informed approach

- Understand that trauma has an impact on individuals and organizations.
 - Recognize signs of trauma.
 - Integrate trauma-informed approaches at work.
 - Seek to resist re-traumatization in the workplace.
-

6 guiding principles: Trauma-informed approach

- Consider creating a personal safety plan.
 - Communicate updates in a timely manner.
 - Schedule debriefings with coworkers.
 - Everyone can contribute to a trauma-informed approach.
 - Build upon individual strengths and skills.
 - Regularly review policies and processes.
-

6 Guiding Principles: Trauma-informed Supervision

- Avoid spreading blame.
 - Include staff in decision making, when possible.
 - Explain the processes behind decisions.
 - Promote resilience among staff.
 - Decide on goals and objectives with staff, when possible.
 - Help everyone feel seen and heard.
 - Promote cultural competence among staff.
-

Prevention

- Staff at KCPHD understand that trauma can affect both an organization and individuals (4 Rs).
 - Staff at KCPHD have language to understand trauma and its impacts.
 - Review of the KCPHD Trauma-informed Organization Policy and this guide are included in onboarding.
-

Mitigation

- Trauma experiences and symptoms are normalized.
 - Staff have the tools to learn and recognize potential symptoms of trauma, vicarious trauma, burnout, compassion fatigue, and resilience.
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Addressing

- Managers practice trauma-informed supervision.
 - Staff practice the guiding principles for a trauma-informed approach.
 - Continued education opportunities on trauma and resiliency.
 - Staff use the Kittitas County Employee Assistance Program (EAP).
-

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Support

Kittitas County - Employee Assistance Program (EAP)

The EAP is available 24/7 and covers employees, spouses, domestic partners, and children up to age 26.

The EAP offers up to 5 sessions face-to-face or telehealth. There is no co-pay, deductible, or premium. Appointments are with a qualified clinical expert. They can assess your concerns and help develop an action plan. EAP is a free and confidential service.

To learn more about the EAP go to the:

- [Human Resources Benefits Guide on Camas, or reach out to HR.](#)
- [First Choice EAP Employee Orientation presentation on Camas.](#)

Crisis situations are not a good fit for starting care. It may take 24 hours to be matched with a counselor.

CONTACT THE EAP

Phone: 800.777.4114

Website: www.firstchoicееap.com

Username: Kittitas

Kittitas County - Other Benefits

Depending on your healthcare coverage, you may also be eligible for other healthcare benefits, like:

- Massage
- Behavioral health
- Acupuncture
- Nutritional counseling

Depending on your healthcare coverage, you might be eligible for therapy sessions with a psychiatrist or psychologist with \$0 co-pay. [Review your benefits coverage or reach out to HR to see what benefits may be included in your plan.](#)

988 Suicide & Crisis Lifeline

[988 is for everyone, free, and available 24/7/365 for crisis situations.](#)

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Existing Tools

[Blueprint for a Vicarious Trauma-Informed Organization](#) – U.S. Department of Justice, Office For Victims of Crime

[Complete Guide to Trauma-Informed Implementation](#) – Chefalo Consulting

[Checklist: What Makes a Policy Trauma-Informed?](#) – Campaign for Trauma-Informed Policy and Practice (CTIPP)

[Creating a Trauma-Informed System of Care](#) – Relias

[Employee Assistance Program](#) – Washington State Department of Enterprise Services (DES)

[Guidance for CDR and FIMR Teams on Addressing Vicarious Trauma](#) – NCFRP

[Trauma-Informed Workplaces](#) – (CTIPP)

[Framework for Workplace Mental Health & Well-being](#) - U.S. Surgeon General

[Understanding and Addressing Vicarious Trauma](#) – Headington Institute

[Workplace Mental Health Toolkit: Creating a Culture of Support and Well-being](#) - Mental Health America

[Mind the Workplace 2024: Health Workplaces Lead with Trust and Support](#) - Mental Health America

Essential Skills Training – Building Resiliency in our IPC Work Through Emotional Intelligence - NACCHO

Recognizing and Responding to Vicarious Trauma in Fatality Review – NCFRP (Password: VT)

Stewarding Trauma-Informed Workplaces in Public Health – Association of Maternal & Child Health Programs

Supporting the supporter: vicarious trauma and support needs Dr. Keren Cohen, University of London

The Call We Carry: Confronting PTSD in the Fire Service – Tacoma Fire Department

Workplace Conditions as the Cause and Cure for Workforce Burnout – National Association of Chronic Disease Directors

Trainings

Vicarious Trauma Training – Workplace Mental Health Institute (WMHI)

Mental Health Awareness V2 - WMHI

Trauma Informed Practice - WMHI

Creating Personal Resilience – WMHI