

Transforming Higher Education: A Rationale and Framework for a Trauma-Informed Institution



AUTHORS:

Debra Berke, PhD, CFLE
Kelly DaCunha, DSocSci, LCSW-C, CFLE
Kristen Doughty, EdD, MSN, RN
Nichol Killian, DSocSci, CTSS
Kieran Mohammed, DBA
Dae'Shawn Nixon, MPP
Kristen Wilson, DSocSci, CTSS

Background

Traumatic experiences across the lifespan can impact an individual’s mental health, cognitive development, and overall well-being. The Substance Abuse and Mental Health Services Administration [SAMHSA] (2014) defines trauma as “an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual’s functioning and physical, social, emotional, or spiritual well-being” (p. 7).

Traumatic events in childhood (before the age of 18), are referred to as adverse childhood experiences (ACEs) and include the experience of/or exposure to abuse, violence, neglect, and mental illness or substance abuse. The ACEs model has been expanded to include four realms of trauma: adverse childhood experiences, adverse community experiences, atrocious cultural experiences, and adverse climate experiences. Examples of traumas in these categories can be housing and food insecurity, community violence, racism, gender discrimination, human trafficking, climate change, global health crises, war and genocide, and all other forms of systemic and social injustices.

Over the past two years, individuals, communities, and cultures have experienced significant challenges with the COVID pandemic, widespread civil unrest, and ongoing economic instability locally, nationally, and globally. These challenges have significantly impacted higher education. COVID prevention measures resulted in campus closings and a course instruction shift to virtual learning environments both in K-12 and higher education. This immediate and unplanned shift left many students (and faculty) without proper resources, amplifying current barriers to teaching and learning.

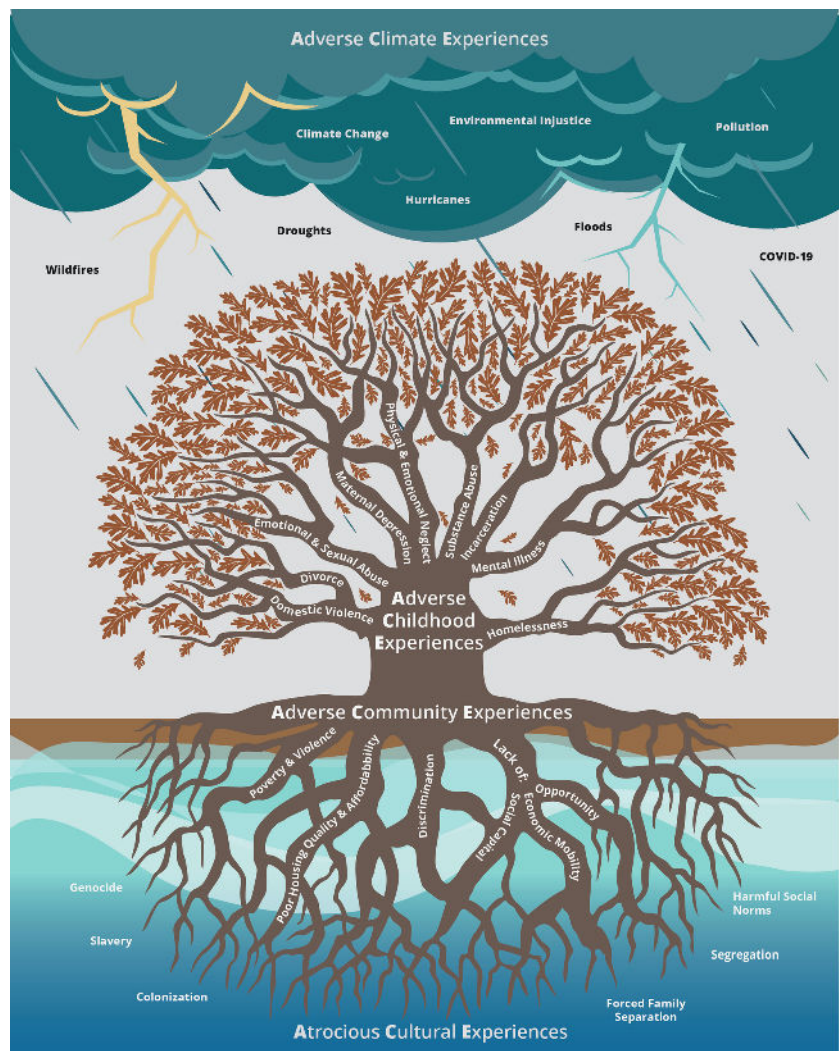


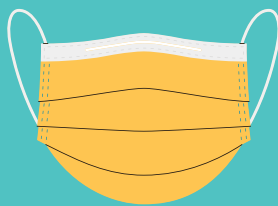
Image created by the North Carolina Partnership for Children © 2021

The impact of adverse or traumatic experiences spans every race, gender, age, ability, and culture and leaves indelible marks on the physical and mental well being of individuals, families and communities



Before March 2020, statistics showed that approximately 40% of college students experienced significant depression, and 60% experienced overwhelming anxiety (ACHA, 2017).

One year into the pandemic, 65% of students report having fair or poor mental health (the latest Student Voice survey, conducted by Inside Higher Ed and College Pulse and presented by Kaplan (2021).



Students across higher education may be experiencing ongoing trauma associated with the COVID-19 pandemic, including job loss, heightened stress from being an essential worker, full-time caretaking of family members, losing loved ones, racial injustice, discrimination experienced by students with disabilities, or experiencing other mental health impacts: (U.S. Department of Education, 2021. p.4).



Anxiety and depression in college students were significantly associated with COVID related news (Huckins et al., 2020).

Students and Trauma

1

By the time they reach college, 66% to 85% of youth report lifetime traumatic event exposure, with many reporting multiple exposures (Read et al., 2011; Smyth et al., 2008).

2

College students are particularly vulnerable to experiencing a potentially traumatizing event, with as many as 50% exposed in the first year of college (Galatzer-Levy et al., 2012).

3

66% of new students at two universities reported exposure to trauma, and 9% met the criteria for PTSD (Read et al., 2011).

4

College students' stress surveys from the 2015 American College Health Association study indicate that almost half of the students in the US are going through some kind of turmoil. Moreover, 34.3% experienced the average stress level, while 12.7% experienced tremendous stress.



Faculty/Staff and Trauma

1

Recent ACE survey reports show that the mental health of staff and faculty are also a top concern for presidents as institutions contend with this evolving environment (Turk, Soler, & Ramos, 2020).

2

The Chronicle of Higher Education reported that 73% of employee respondents at the University of Wisconsin–Milwaukee disclosed experiencing at least one symptom of traumatic stress. Nearly 40% reported having three or more symptoms (Brown, 2022).

3

Faculty explained numerous ways that they are exposed to student stress and trauma and experience both PTSD and Secondary Traumatic Stress (STS) in their role as first responders or emergency management personnel in the classroom (Goode, 2022).

4

Many higher education faculties are teaching topics related to violence, crime and death; and a subset of this group are also researching and writing on those potentially distressing topics, however, little attention has been paid to the emotional well-being of professors and scholars (Nikischer, 2019).

5

According to a 2022 Gallup poll, workers in higher education had the second highest reported rate of burnout- 35%, after K-12 employees in the U.S. workforce (Marken, & Agrawal, 2022).



Becoming a Trauma-Informed Institution of Higher Education

Institutions of Higher Education (IHE) have a unique opportunity to better serve their students, faculty/ancillary staff, and community by addressing the impact of trauma and toxic stress on teaching and learning. It has never been more crucial to recognize the impact of trauma and toxic stress on learning and learning environments. This can occur at many levels: as an institution, a discipline or a department, or an individual faculty/staff. A trauma-informed system may increase recruitment and retention of faculty/staff and students, and degree completion for students, while enhancing overall wellbeing of students, faculty, staff and the community.

The Purpose of Trauma Informed Care:

- Create an environment where people are respectful, competent, sensitive and culturally aware.
- Implement evidence-based trauma-informed principles and approaches that address the effects associated with trauma.
- Develop a common language and framework for dialogue and discussion to enhance communication and progress.
- Assess the implementation of basic principles of trauma-informed approaches in various settings.
- Increase the effectiveness of all services and assistance.
- Ensure that the educational community does no harm.
- Promote protective factors to reduce retraumatization.



Image from BHSC, 2022

The IHE Framework for Trauma-Informed Development, along with a glossary of terms and some additional implementation tools, can be found on this website:
<https://traumamattersdelaware.org/education/>.

IHE Framework for Trauma-Informed Development

The IHE Framework for Trauma-Informed Development (Berke et al., 2022) functions as a roadmap for how IHEs can actively work towards becoming trauma-informed. This framework outlines knowledge, methods of application, and attitudinal shifts along a continuum of development. This 4-stage framework can be utilized by an individual or an institution.



Trauma Aware

Emphasis in this stage is on building knowledge and beginning to change attitudes. Individuals are trained in the basics of trauma and are familiar with the values and terminology of trauma-informed care. Leadership, faculty and staff understand how trauma impacts students and peers.



Trauma Sensitive

Emphasis in this stage is continued knowledge building and creating readiness for change. Individuals begin to see those with whom they interact through a trauma lens. Institutions promote training and professional development for all employees.



Trauma Responsive

Emphasis in this stage is continued knowledge building and promoting cultural shift towards Trauma Informed Care (TIC). The individual begins to integrate Trauma-informed (TI) principles into behavior and practices.



Trauma-Informed

Emphasis in this stage is on continuous improvement and monitoring of trauma-informed knowledge, skills and attitudes throughout personal and professional endeavors. The institution has cemented a cultural shift towards a Trauma-informed approach to higher education.

Call to Action

We urge you to utilize the IHE Framework to achieve the following:

- Employees and students understand trauma, its impact and trauma-informed approaches.
- Faculty integrate trauma-informed educational strategies into their pedagogy.
- Faculty integrate trauma-informed education in curricula to support workforce preparedness and student successful outcomes.
- Staff integrate trauma-informed strategies into their work.
- Institutions integrate a trauma-informed approach in written policies and protocols.
- Institutions create and promote a safe learning/working environment for all.
- All have improved access to mental health, trauma and community resources.
- All continuously monitor and evaluate trauma-informed principles.

Applying the principles of trauma-informed care to individual courses, within departments and programs, and, ideally, as an institution, has tremendous benefit. Trauma-informed higher education provides safety, voice, choice, empowerment and healing at a time of great need. Students of today are the workforce of tomorrow (and at some institutions are also the workforce of today as many are working their way through school). Utilizing a developmental framework specifically built for institutions of higher education will strengthen and empower our institutions, and the workforce that we are molding. This work does not happen overnight, but achieving a resilient, healthy, growth mindset environment through a trauma-informed approach is well worth the investment.



References

American College Health Association. (2015). National College Health Assessment II: Reference Group Executive Summary Spring 2015. Hanover, MD.

Berke, D., DaCunha, K., Killian, N., & Wilson, K. (2022). A trauma-informed framework for higher education. <https://traumamattersdelaware.org/informative/a-trauma-informed-framework-for-higher-education/>

Brown, S. (2022). What one university learned about pandemic trauma and its workforce. <https://www.chronicle.com/article/what-one-university-learned-about-pandemic-trauma-and-its-work-force>

Buffalo Hearing & Speech Center (BHSC). (2022). What's the buzz around trauma informed care. <https://askbhsc.org/blog/whats-the-buzz-around-trauma-informed-care>

Galatzer-Levy, I. R., Burton, C. L., & Bonanno, G. A. (2012). Coping flexibility, potentially traumatic life events, and resilience: A prospective study of college student adjustment. *Journal of Social and Clinical Psychology, 31*(6), 542–567.

Goode, J. R. (2022). Instruction on the front lines: student trauma and secondary traumatic stress among university faculty, *Communication Education*, DOI: [10.1080/03634523.2022.2149827](https://doi.org/10.1080/03634523.2022.2149827)

Huckins, J. F., daSilva, A. W., Wang, W., Hedlund, E., Rogers, C., Nepal, S. K., Wu, J., Obuchi, M., Murphy, E. I., Meyer, M. L., Wagner, D. D., Holtzheimer, P. E., Campbell, A. T. (2020). Mental health and behavior of college students during the early phases of the COVID-19 pandemic: Longitudinal smartphone and ecological momentary assessment study. *Journal of Medical Internet Research, 2020 Jun 17*, e20185. doi: 10.2196/20185. PMID: 32519963; PMCID: PMC7301687.

Marken, S. & Agrawal, S. (2022). K-12 workers have highest burnout rate in U.S. <https://news.gallup.com/poll/393500/workers-highest-burnout-rate.aspx>

Nikischer, A. (2019). Vicarious trauma inside the academe: Understanding the impact of teaching, researching and writing violence. *Higher Education, 77*, 905–916. <https://doi.org/10.1007/s10734-018-0308-4>

Read, J. P., Ouimette, P., White, J., Colder, C., & Farrow, S. (2011). Rates of DSM-IV-TR trauma exposure and posttraumatic stress disorder among newly matriculated college students. *Psychological Trauma 3*(2), 148-56. doi:10.1037/a0021260

Substance Abuse and Mental Health Services Administration. (2014). SAMHSA's concept of trauma and guidance for a trauma-informed approach. https://ncsacw.samhsa.gov/userfiles/files/SAMHSA_Trauma.pdf

Turk, J., Soler, M. C., & Ramos, A. M. (2020). College and university presidents respond to Covid-19. <https://www.acenet.edu/Research-Insights/Pages/Senior-Leaders/College-and-University-Presidents-Respond-to-COVID-19-2020-Fall-Term.aspx>

U.S. Department of Education [USDOE] (2021). Office of Planning, Evaluation and Policy Development, ED COVID-19 Handbook, Volume 3: Strategies for Safe Operation and Addressing the Impact of COVID-19 on Higher Education Students, Faculty, and Staff. Washington, DC.