

**BRYN MAWR COLLEGE  
GRADUATE SCHOOL OF SOCIAL WORK AND SOCIAL  
RESEARCH**

**SUMMER 2024  
B594: TRAUMA-INFORMED SOCIAL WORK**

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**Office Hours:** Monday/Thursday: 12:00 PM to 1:00 PM by appointment

**COURSE DESCRIPTION**

In this required course, students will address essential knowledge, values, and skills that support trauma-informed approaches to social work practice. Students will learn core concepts of trauma-informed social work from an EcoBioDevelopmental framework. This framework will assist students in understanding the impact of adversity and traumatic stress on health and well-being across the lifespan. Throughout the course, we examine how risk and protective factors shape the effects of traumatic stress on individuals, families, and communities. Connected to the strategic foci of the GSSWSR, this course builds on foundation-level content in our curriculum, including an emphasis on power, privilege, and oppression.

This course comprises key trauma-informed social work content and focus on the definition of trauma and traumatic stress, differentiating amongst levels of stress and clarifying unique elements of traumatic stress. In this course we also examine research on Adverse Childhood Experiences (ACEs) and how this work supports our understanding of how early life experiences of traumatic stress shape developmental and health outcomes across the life course. The interrelatedness of trauma and “intersectional” identity-based oppression – the accumulation of multiple forms of related subjugation (for example, based in racism, homophobia, transphobia, other gender-based oppression, and socioeconomic classism) that can cause and/or mediate traumatic experience, is also explored in this course. By taking this course students will be prepared to develop a grounding in assessing the trauma-informed capacity of their field agency, as well as for the promotion of trauma-informed principles in agency structure, policies, and in the organizational climate. Students will examine how cross-cultural perspectives on trauma are key to knowledge, values, and skills relevant to local and global models of social work practice. This builds upon a perspective of trauma that moves away from its conceptualization as a natural category to embrace the cultural and ecological systems that shape human experience and model ways of coping and meaning making. Additionally, this course explores pathways to trauma healing and particular implications for social work practice across system levels including Macro and Clinical Practice.

## **COURSE OBJECTIVES**

1. Identify definitions of trauma and toxic stress and be able to differentiate amongst various types of traumas
2. Define the EcoBioDevelopmental model and its relevance to understanding how trauma affects wellbeing across the lifespan
3. Recognize the SAMHSA model of trauma-informed social work
4. Demonstrate an understanding of Adverse Childhood Experiences (ACEs) and current models of how unmediated toxic stress impact development
5. Better understand of the neurobiology of trauma with a key knowledge on the parts of the stress response system (HPA Axis), and core concepts of allostatic load and epigenetics
6. Demonstrate an understanding of identity-based oppression and its impact on experiences of trauma
7. Identify key concepts relevant to social work practice with traumatized and marginalized communities.
8. Critically analyze Western models of trauma and their applicability across contexts
9. Show understanding of the concepts of collective and historical trauma and resilience and their relevance to social work practice
10. Understand and demonstrate application of the conceptual frameworks and evidence-based underpinning of assessment and promotion of the trauma-informed capacity of organizations and the trauma-informed knowledge of the staff within organizations
11. Demonstrate awareness of cross-cultural approaches to trauma and cultural variations in languages of distress and models of coping
12. Identify key concepts in pathways to trauma healing

## **CLASS POLICIES**

### ***Course Completion Requirements***

- Students must complete all assignments, submit on time, and receive a grade of 75 or above to pass this course (see assignment section on page 5).

### ***Class Schedule & Format***

- Classes will typically include synchronous time conducted in-person or on Zoom and asynchronous assignments and tasks before or after each class. The class will begin and end on time and may include a short break. Individual instructors will inform students of meeting times for scheduled Zoom meetings. Students are expected to be on time and to remain present online for the duration of all classes. Continual tardiness and/or not remaining present online constitutes unsatisfactory performance. Some classes will be conducted virtually for this course section *using synchronous and asynchronous formats (see course outline section below)*.

### *Attendance*

- Students are expected to attend all classes. If a student has two absences, the instructor will report this to the student's advisor and the Dean's Office. Three or more absences automatically result in the student being referred to the Committee on Academic Progress and Support (CAPS), and the student may receive an unsatisfactory grade for the course. Each instructor will note the method used to monitor students' attendance in class.
- Students are expected to be on time. Continual tardiness may constitute unsatisfactory performance for the course. Students are also expected to notify the instructor in advance if the student expects to miss class.

### *Restriction of Audio or Visual Recording, Reproduction, and Distribution of Course Content*

To protect the privacy of students, discussions about clinical practice, and the intellectual work of faculty and instructors in both in-person and online learning environments, students **are not** allowed to record, reproduce, screenshot, photograph, or distribute any live, video, audio, visual, or written content or discussion from the course without expressed permission from their instructor. Instructors will only typically allow recording of didactic/lecture portions of the class session and usually only when necessary for approved disability accommodations (see "Accommodations" below).

### *Accommodations*

Students, who for any reason, believe that they may need accommodations in this course are encouraged to contact the Bryn Mawr College Coordinator of Access Services, at 610-526-7351 in Eugenia Chase Guild Hall, Room 103, to discuss their eligibility for accommodations. Early contact will help avoid unnecessary inconvenience and delays. Students with disabilities who need to record classroom lectures or discussions must contact Access Services to register, request, and be approved for this accommodation. If one or more students, with an approved academic accommodation, need to record an online or in-person class session the instructor will alert the class that some sessions (or portions of sessions) will be recorded without naming any students. Such recordings are to be used solely for individual or group study with other students enrolled in the class that semester. **These materials may not be reproduced or shared (including electronically or posting in any web environment) with individuals who are not part of the class.**

### *Class Participation*

Class discussion is a very important part of the learning process. In this class, students will often be working in small groups as well as participating in larger group discussions. In our first class, we will work together to develop guidelines regarding how to have discussions in respectful, mindful, and reflective ways aligned with the values and ethics of our profession.

### ***Assignments***

- Students are expected to complete assigned readings in advance of class meetings to be prepared for class discussion. The expectation for a graduate-level course is 1.5 to 2 hours of reading/class preparation for each class hour.
- Written Assignments must utilize the American Psychological Association (APA) 7<sup>th</sup> edition style for referencing sources and citations. [Please consult the Publication Manual of the APA](#)

### ***Plagiarism***

Students should review the student handbook for information on ethics in social work and the academy, especially those regarding plagiarism.

### ***Computers, Cell Phones, and other Technology***

**[Online]** All online classes will be facilitated online using zoom platform. As such, students are permitted to use their laptops, tablets and other computers for class attendance and activities only. Students **should not** be engaged in any other activities during that time. Except for the device being used for this online class, it is expected that all cell phones and other communication devices be turned off or placed on silent/vibrate during class. Use of social media and email during class is not allowed. **Students are expected to keep their cameras on during the entire class.**

**[In-Person]** All cell phones and other communication devices should be turned off during class. If it is required that a cell phone be turned on, it should be on silent/vibrate. Classroom use of laptops, tablets and other technology must be approved by the instructor so that we can assure that these devices do not become a barrier to class participation. Use of social media and email during class is not allowed.

### ***Confidentiality Statement***

In all instances when client material is discussed, whether in written assignments or classroom discussion, students **must omit clients' names and disguise all other pertinent identifying data** to preserve confidentiality.

### ***Grades***

Grades for this course are “Satisfactory” (S), Satisfactory minus (S-) and “Unsatisfactory” (U) in accordance with the School’s policy. To achieve the intended outcomes for the course, the student must complete all work with an evaluation of Satisfactory. Late submission of assignments must be negotiated in advance with the instructor. Extensions requested on the assignment due date **will not** be facilitated. ***Late submission of assignments will attract a 1% penalty per day.***

The rubrics for grading assignments are below. Students who experience extenuating circumstances preventing them from completing course assignments should speak to the instructor as soon as possible to discuss their individual situation.

### ***Statement of Support***

In this course, I am committed to creating and supporting a classroom community that is inclusive, equitable, and conducive to learning for all students, as well as sensitive to the specific, unique, and unpredictable challenges we will each and all encounter this term. To this end, I am designing course activities and assignments meant to help you gain and demonstrate understanding of key course content in ways that are flexible and personally meaningful. Our class meetings will include group check-ins, and I am available for individual or small group conferences as well. If you are unable to attend class or complete an assignment by the due date, I ask that whenever possible you let me know ahead of time and work with me to determine when you will complete the work (from class or assigned). In this situation there will be no grade penalty for late work. If it is not possible for you to request extra time beforehand, I ask that you maintain communication with me as much as possible so that we can work together to determine a good course of action.

### **ASSIGNMENTS**

All written assignments should be submitted in pdf format, using APA 7<sup>th</sup> edition formatting style, 12 pt. font, double spaced with 1-inch margins. Unless otherwise stated by your instructor, all assignments should be uploaded to your Moodle shell in the assigned class.

<b>Assignment</b>	<b>Grade</b>
Grounding Technique Facilitation Activity	15 points
Midterm Paper	30 points
Final Presentation	40 points (case vignette)
Class Participation	15 points
Total Points	100
	85+ is a Satisfactory grade (S)
	75-84 is a Marginal Satisfactory grade (S-)
	Under 75 Points is an Unsatisfactory grade (U)

The Class Participation Rubric is based on the GSSWSR's Standards of Professional Behavior (as outlined on pg. 35 of the student handbook:

[https://www.brynmawr.edu/sites/default/files/GSSWSR\\_Catalog\\_Web.pdf](https://www.brynmawr.edu/sites/default/files/GSSWSR_Catalog_Web.pdf)

### ***Class Participation Rubric***

13-15 Points	Fully prepared, attentive, always follows class guidelines, asks questions & makes comments in large or small group discussions; encourages & respects peers.
8-12 Points	Usually prepared, attentive, generally follows class guidelines, participates in asking questions and making comments regularly in large or small group discussions, encourages and respects peers regularly.
5-8	Preparation for class varies, generally follows class guidelines, and doesn't participate regularly by asking questions or making comments regularly, inconsistency with encouraging and respecting peers.
4 or less	Generally unprepared for class, doesn't participate consistently, or is disruptive or insensitive to others.

### **Mindfulness or Grounding Class Facilitation Activity (15 points)**

Grounding and mindfulness techniques are strategies that can help a person manage their traumatic memories or strong emotions. These grounding techniques can also help a person escape negative thoughts or flashbacks and can decrease the intensity of a person's feelings or trauma. Each student will identify and facilitate one grounding or mindfulness technique for the whole class, which should last approximately five to ten minutes. Examples include breathing exercises, progressive muscle relaxation, focusing on the five senses, and imagery. Students will sign up in week 1 to facilitate a technique between classes two and ten. No more than three students may present in the same session.

### **Midterm Paper (30 points): Due Class 6: Thursday, June 6th at 11:59 pm EDT**

Create a 3–4-page (**AND NO LONGER**) paper grounded in your experiences in a field setting (current or past field placement) utilizing APA 7<sup>th</sup> edition. This should include at a minimum four references. This assignment will be graded using the rubric provided in Moodle. **Paper #1 is due Thursday, June 6th at 11:59 pm EDT.**

In the paper, engage with the following elements while considering the impact of trauma-informed care on your agency:

#### Introduction

- Provide a brief overview of your agency and its mission and goals.

#### Understanding Trauma within the Agency

- How do the mission and goals of your agency reflect an understanding of trauma?
- Define and describe individual and group-level sources of traumatic stress for clients within your agency.

#### Trauma-Informed Care Integration

- Define Trauma-Informed Care and describe how it fits within your agency.

- How does the organization seek to acknowledge the impact of trauma on clients and clinicians, and what practices, if any, are put forward to address these impacts?

#### Diversity, Difference, and Structural Inequities

- In what ways do your organization's practices and procedures reflect an awareness of diversity, difference, and/or structural inequities that shape clients' experiences?
- What challenges do they experience in addressing these multiple layers of trauma?

#### Implementing Trauma-Informed Practices

- What steps can your organization take in implementing trauma-informed practices?

#### Policy Impact

- Are there policies, either within your agency or at the local, state, or Federal level, that are impacting the provision of services in your field setting? Discuss their implications for trauma-informed care within your agency.

#### Conclusion

- Summarize the key points discussed in the paper and propose potential strategies for further integrating trauma-informed care into your agency.
- Prompt for Reflection: As you reflect on your agency's practices and procedures, consider how trauma-informed care principles have been applied or could be further integrated. Reflect on the ways in which understanding trauma has shaped your approach to client care and organizational policies.

Ensure your paper adheres to the APA 7th edition guidelines for formatting and citation.

### **Final Assignment: Case Vignette Presentation (35 points): Due Class 10: Thursday, June 20th, at 9:00 am EDT**

The final presentation will use content discussed throughout the semester to analyze aspects of the case vignette available on Moodle. Students will work in groups of 4-6 individuals (assigned by the instructor) to address the prompts below. Students are expected to present their assigned vignette orally to the instructor and the class. Each presentation should last no longer than 25 minutes and include a **Q&A**. Students are expected to upload their PowerPoint presentation to be used during their oral presentation on Moodle on or before the presentation.

The PowerPoint and oral delivery will be graded using the rubric located on Moodle.

All assignment requirements must be addressed clearly throughout the presentation. All group members **MUST** contribute to both the written and oral presentations. Presentations for which the area/idea being discussed is unclear will affect your overall grade.

- Your presentation should be formatted to meet APA 7<sup>th</sup> formatting guidelines
- A reference page, formatted to meet APA 7<sup>th</sup> edition standards, should also be included, which includes all citations used throughout your document.

#### ***Case Vignette Presentation Prompts:***

1. Introduce the case by describing social identities and other influential biopsychosocial components of development and family context, the strengths, and the presenting problem(s) of your case vignette: Jack, Samuel, Dinah, or Paloma.
2. Identify a definition of trauma in the readings and use that specific definition to identify the traumatic experiences of your case vignette. Jack, Samuel, Dinah, or Paloma.

3. Using the EcoBioDevelopmental model, describe factors associated with individuals' and communities' paths to risk and resilience in response to the traumatic experiences of your case vignette: Jack, Samuel, Dinah, or Paloma.
4. Consult on a possible intervention for treatment:
  - Identify the presenting problem you would **first** address with the client.
  - Suggest an intervention you would use and the reason for selecting it based on the specific presenting problem of your case vignette: Jack, Samuel, Dinah, or Paloma.
  - Describe the intervention in detail (explain the pros and cons of this intervention and include cultural considerations or adaptations).
    - Examples of approaches to consider (**NB:** this is not an exhaustive list): Cognitive processing therapy (CPT), Trauma-Focused Cognitive Behavior Therapy (TF-CBT), Eye Movement Desensitization and Reprocessing (EMDR), Animal-assisted therapy, Neurofeedback/biofeedback, trauma-sensitive yoga, Indigenous healing practices, Trauma Recovery and Empowerment Model (TREM; this is a group intervention model), brief psychodynamic, Music Therapy.

### **EPAS Competencies**

<b>EPAS Competency</b>	<b>Dimension</b>	<b>Activity</b>
Demonstrate Ethical and Professional Behavior	K, V, S, CAP	Grounding Technique
	K, V, S, CAP	Final Presentation
	K, V, S, CAP	Individual Reflection
Engage Diversity and Difference in Practice	K, V, S, CAP	Paper # 1
	K, V, S, CAP	Final Presentation
Advance Human Rights and Social, Economic, and Environmental Justice	K, V, S, CAP	Final Presentation
Engage in Practice Informed Research and Research Informed Practice	K	Final Presentation
	K, V, S, CAP	Paper # 1
Engage in Policy Practice*	K, V, CAP	Paper # 1
Engage with Individuals, Families, Groups, Organizations, and Communities	K, S, CAP	Paper # 1
Assess Individuals, Families, Groups and Communities	K, V, S, CAP	Final Presentation
Intervene with Individuals, Families, Groups, Organizations and Communities	K, S	Grounding Technique
	K, V, S, CAP	Final Presentation
Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities	K, V, S	Paper # 1

*Note.* K=knowledge; V= values; S= skills; CAP=cognitive and affective processes



**\*Reminder:** Definition of Engagement in Policy Practice:

Attend to the meaning of policy practice in a variety of practice settings. Note that in the advance trauma competencies, Policy Practice is inclusive of the following:

- Engage in the policy proposal process to amend policies across levels and fields of practice that are counter to the principles of trauma-informed practice
- Engage stakeholders in formulation, implementation, and evaluation of trauma-informed policies to advocate for human rights and social, economic, and environmental justice, from the local to the global level
- Advocate for trauma-informed policies to increase access and enhance service delivery, *including self-care and other provisions* for social workers affected by trauma

## COURSE OUTLINE

### **Class 1: Course Introduction**

#### Topics

- Review of course modules, assignments, and guidelines for classroom discussion
- Planning for self-care and the Professional Quality of Life (PROQOL)
- Introduction to grounding techniques
- Introduction to trauma and vicarious trauma

#### **Readings and Multimedia:**

- Rosman, K. (2023). Should college come with trigger warnings? At Cornell, it's a hard no. New York Times
- Lipsky, L. V. D. (2009). Trauma Stewardship. Berrett-Koehler, Publishers, Inc: San Francisco, CA. [Chapters one and three].
- <https://proqol.org/>

#### *Supplemental Readings:*

- Centers for Disease Control (2020). [Coping with stress during a pandemic](#).
- Ginwright, S. (2018). [The future of healing: Shifting from trauma informed care to healing centered engagement](#).

### **Class 2: Core Concepts: The EcoBioDevelopmental Model, Human Development, and Stress Theory**

#### Topics

- Review of the EcoBioDevelopmental Model
- Adverse Childhood Experiences (ACEs)
- Differentiation of types of stress: Positive, Tolerable, and Toxic Stress
- How unmediated stress impacts early development
- Trauma in the context of development across the life course
  - Types of traumatic stress: Acute, Chronic, and Complex Traumatic Stress
  - Impact of traumatic stress on indicators of wellbeing across the lifespan

#### ***Readings and Multimedia***

- Shonkoff, J., Garner, A., and the Committee on Psychosocial Aspects of Child and Family Health (2011). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, 129(1). doi: 10.1542/peds.2011-2663
- National Childhood Traumatic Stress Network (2018). [Effects of complex trauma](#).
- Watch YouTube Video on the EcoBioDevelopmental Model (on Moodle Site)
- Center for the Developing Child (2014). Excessive stress disrupts the architecture of the developing brain. National Scientific Council on the Developing Child. Working Paper #3.
- Trauma Screening (Child Interview): <https://youtu.be/rKTYOAI65zE>
- Trauma Screening (Parent Interview): [https://youtu.be/bxbSsK5D\\_PY](https://youtu.be/bxbSsK5D_PY)

#### Grounding Technique Facilitation Activity

### **Class 3: Trauma-informed Care Principles [Asynchronous] (Asynchronous Materials with Quiz in Moodle)**

#### Topics

- Trauma-informed organizations: Guiding principles
- Reflection on TIC and your agency

#### ***Required Readings and Multimedia***

- SAMHSA (2014). SAMHSA's concept of trauma and guidance for trauma-informed care.
- SAMHSA (2014). Trauma-Informed Care in Behavioral Health Services. TIP 57. Pp. 1-58.
- Webinar (1 hour). Connect & Learn: An Introduction to Trauma-Informed Care. Please watch the full webinar linked here:  
<https://www.youtube.com/watch?v=Sgmb09FHC9M&t=3326s>
- Complete the Class 3 TIC Quiz in Moodle.
- In preparation for the midterm paper, please reflect on the following prompts related to your internship. Please be prepared to review these in a small group during class 5.
  - How do the mission and goals of your agency reflect an understanding of trauma?
  - Describe individual and group-level sources of traumatic stress for clients.
  - How does the organization seek to acknowledge the impact of trauma on clients and clinicians, and what practices, if any, are put forward to address these impacts?
  - In what ways do the practices and procedures within your organization reflect an awareness of diversity, difference, and/or structural inequities that shape clients' experiences?
  - What challenges do they experience in addressing these multiple layers of trauma?
  - What steps can your organization take in implementing trauma-informed practices?
  - Are there policies, either within your agency, or at the local, state, or Federal level that are impacting the provision of services in your field setting?

### **Class 4: Organizational Trauma and Implementation of Trauma-informed Principles in Agency Contexts**

#### Topics

- The impact of trauma on systems
- Signs and symptoms of traumatized systems
- Assessing organizational health and traumatization
- Implementation of trauma-informed principles

#### ***Required Readings and Multimedia***

- Bowen, E. & Murshid, N. (2016). Trauma-informed social policy: A conceptual framework for policy analysis and advocacy. *Perspectives From the Social Sciences*, 106(2), 223-229.
- Brisson, D., Holtzinger, C., Macur, R., Rossbert, L., Speer, S. R., & Wilson, J. (2023). Designing for healing, dignity, and joy: Iterating on the Trauma-Informed Design Framework (V.2). *Shopworks Architecture, Group 14 Engineering, University of Denver*

*Center for Housing and Homelessness Research, and Bryn Mawr College.*

- Harris & Fallot. (2001). Envisioning a trauma-informed service system: A vita paradigm shift. *New Directions for Mental Health*, 89, 1-22.

### Grounding Technique Facilitation Activity

## **Class 5: Trauma and The Stress Response System**

### Topics

- The Stress Response System: The HPA Axis
- Neurodevelopmental impact of chronic activation of the stress response system
- Allostatic load and epigenetics
- Neurodevelopmental mediation of early adversity and pathways for risk and resilience
- Small Group: Mid-Term Paper Review Activity

### ***Readings and Multimedia:***

- NIMH (2018). [Brain Basics](#).
- Berens, A. E., Jensen, S. K. G., & Nelson III, C. A. (2017). Biological embedding of childhood adversity: From physiological mechanisms to clinical implications. *BMC Medicine*, 15, 135. doi: 10.1186/s12916-017-0895-4
- Bruce, L. (2005). The biology of belief: Unleashing the power of consciousness, matter and miracles. *Santa Rosa: Elite Books*. 31-43.

### ***Supplemental Readings:***

- Shapiro, J. & Applegate, J. (2018). The neurodevelopmental impact of stress, adversity and trauma: Implications for social work with vulnerable parent-child dyads. In Shapiro, J. & Applegate, J., *Neurobiology and Clinical Social Work*.
- Bernard, K., Hostinar, C. & Dozier, M. (2015). Intervention effects on diurnal cortisol rhythms of child protective services referred infants in early childhood preschool follow up. *JAMA Pediatrics*, 169(2), 112-119. doi:10.1001/jamapediatrics.2014.2369

Watch: Bruce Perry Slides on Brain Development and Toxic Stress

### **Seven Slide Series Video: The Human Brain**

This is a free, 14-minute online video created and narrated by Bruce D. Perry. Core concepts regarding brain structure and function are introduced providing the basis for developmentally sensitive and trauma-informed caregiving, education and therapy. Perry, B.D., (The Child Trauma Academy). (2013) 1: The Human Brain [Video webcast].

In Seven Slide Series. Retrieved from <https://www.youtube.com/watch?v=uOsgDkeH52o>

### **Seven Slide Series Video: Sensitization and Tolerance**

This is a free, 10-minute online video created and narrated by Bruce D. Perry. An introduction to the crucial role that patterns of stress response system activation play in pathology and healing is discussed.

Perry, B.D., (The Child Trauma Academy). (2013) 2: Sensitization and Tolerance [Video webcast].

In Seven Slide Series. Retrieved from <https://www.youtube.com/watch?v=qv8dRfgZXV4>

### **Seven Slide Series Video: Threat Response Patterns**

This is a free, 12-minute online video created and narrated by Bruce D. Perry. The variety of adaptive responses that can be used under threat are introduced, with a focus on the hyperarousal and dissociative continuum.

Perry, B.D., (The Child Trauma Academy). (2013) 3: Threat Response Patterns [Video webcast].

In Seven Slide Series. Retrieved from <https://www.youtube.com/watch?v=sr-OXkk3i8E&feature=youtu.be>



## **Class 6: Trauma, Intersectionality, and Identity-Based Oppression**

### Topics

- Trauma and intersectionality
- Identity-based oppression
- Trauma and identity-based oppression across systems (juvenile justice, education, and mental health)

### ***Required Readings and Multimedia***

- Alessi, E. J., & Martin, J. I. (2017). Intersection of trauma and identity. *Trauma, resilience, and health promotion in LGBT patients: What every healthcare provider should know*, 3-14.
- Nadal, K. L. (2018). *Concise guides on trauma care series. Microaggressions and traumatic stress: Theory, research, and clinical treatment*. American Psychological Association. [Chapter 1]
- Smith, C. (2019). Intersectionality and sizeism: Implications for mental health practitioners. *Women & Therapy*, 42 (1-2), 59-78. <https://doi.org/10.1080/02703149.2018.1524076>

### *Supplemental Readings:*

- Kendi, I. X. (2020). [Stop blaming Black people for dying from the Coronavirus.](#)

### Grounding Technique Facilitation Activity

## **Class 7: Collective Trauma, Historical Trauma, and Cross-Cultural Perspectives on Trauma.**

### Topics:

- Collective and historical trauma
- Social factors that impact trauma recovery
- Collective trauma in marginalized communities
- Social work practice with traumatized and marginalized communities
- Cross-cultural approaches to trauma
- Languages of distress and models of coping

### ***Required Readings and Multimedia***

- Schroeder, K., Noll, J. G., Henry, K. A., Suglia, S. F., & Sarwer, D. B. (2021). Trauma-informed neighborhoods: Making the built environment trauma-informed. *Preventive Medicine Reports*, 23(2021), 101501.
- Alessi, E. (2014). A framework for incorporating minority stress theory into treatment with sexual minorities. *Journal of Gay and Lesbian Mental Health*, 18(1), 47-66.
- Patel, A. R., & Hall, B. J. (2021). Beyond the DSM-5 diagnoses: A cross-cultural approach to assessing trauma reactions. *Focus*, 19(2), 197-203.
- Hinton, D. E., & Lewis-Fernández, R. (2011). The cross-cultural validity of post-traumatic stress disorder: Implications for DSM-5. *Depression and Anxiety*, 28, 1-19.

### *Supplemental Readings*

- Goodkind, J. R., Hess, J. M., Gorman, B., & Parker, D. P. (2012). "We're still in a struggle": Diné resilience, survival, historical trauma, and healing. *Qualitative Health Research*, 22(8), 1019-1036. doi:<http://dx.doi.org/10.1177/1049732312450324>

- Norris, F., Stevens, S., Pfefferbaum, B., Wyche, K., & Pfefferbaum, R. (2008). Community Resilience as a Metaphor, Theory, Set of Capacities, and Strategy for Disaster Readiness. *American Journal of Community Psychology*, 41 (1-2), 1-2.
- Prevention Institute. *What? Why? How? Answers to Frequently Asked Questions About the Adverse Community Experiences and Resilience Framework*
- Hernández, Pilar. (2002). Resilience in Families and Communities: Latin American Contributions from the Psychology of Liberation. *The Family Journal*, 10(3), 334-343.
- Brave Heart, M. Y. H., Chase, J., Elkins, J., & Altschul, D. B. (2011). Historical trauma among indigenous peoples of the Americas: Concepts, research, and clinical considerations. *Journal of Psychoactive Drugs*, 43(4), 282-290.
- Roberts, A. L., Gilman, S. E., Breslau, J., Breslau, N., & Koenen, K. C. (2011). Race/ethnic differences in exposure to traumatic events, development of post-traumatic stress disorder, and treatment-seeking for post-traumatic stress disorder in the United States. *Psychological Medicine*, 41, 71-83.

### **In-Class Activity:**

- “Reflect on the applicability of “languages of distress” to current Western discussions of PTSD and other trauma-related mental health and behavioral outcomes.
  - Do you think it is even possible to identify universal dimensions of human experience?
  - How do you think a person’s position on the individualism-collectivism spectrum might impact trauma treatment?
  - What type of holistic or culture-based forms of healing are present in your placement?
  - Robert’s et al. (2011) posit, “Race/ethnic differences in risk for PTSD can therefore arise from two sources: (1) differences in exposure to a qualifying traumatic event and (2) differences in the risk for developing PTSD among those who are exposed to trauma” (p. 71). Do you agree or disagree? Why? What might be missing in this conceptualization?”

### Grounding Technique Facilitation Activity

## **Class 8: Pathways to Trauma Healing: Triphasic Model, Best Practices, and Clinical Considerations**

### Topics

- Best practices
- Common factors
- Triphasic model of trauma treatment
- Creating safety
- Trauma processing
- Reconnection
- Clinical considerations

### ***Required Readings and Multimedia***

- Zaleski, K. L., Johnson, D. K., & Klein, J. T. (2016). Grounding Judith Herman’s trauma theory within interpersonal neuroscience and evidence-based practice modalities for trauma treatment. *Smith College Studies in Social Work*, 86(4), 377-393.

- Briere, J. & Scott, C. (2013). *Principles of trauma therapy: a guide to symptoms, evaluation, and treatment, 2<sup>nd</sup> edition*. Sage Publications: Thousand Oaks, CA. [**Chapters 4 and 5**]
- Van der Kolk. (2014). *The body keeps the score*. New York: Penguin, 205-231.
- Briere, J. & Scott, C. (2013). *Principles of trauma therapy: A guide to symptoms, evaluation, and treatment, 2<sup>nd</sup> edition*. Sage Publications: Thousand Oaks, CA. [**Chapter 6**]

#### *Supplemental Readings*

- Courtois, C. (2014). *It's not you, it's what happened to you*. Washington D.C: Telemachus, 74-94.
- Ford, J., & Courtois, M. (2009). *Best practices in psychotherapy for children and adolescents. Treating complex traumatic stress disorders*. New York: Guilford, 59-81
- Clinical considerations

### **Class 9: Pathways to Trauma Healing: Trauma-Focused Modalities.** **Asynchronous Content and Group Meeting Time**

#### Topics

- Introduction to some trauma-focused interventions (CPT, EMDR, SE)

#### ***Required Readings and Multimedia***

- ☐ Lipsky, L. V. D. (2009). *Trauma Stewardship*. Berrett-Koehler, Publishers, Inc: San Francisco, CA. [**Chapter Four**]
  - Reflect on any trauma exposure responses that might be potential burnout warning signs for you.
- ☐ Somatic Experiencing:
  - Visit the SE website: <https://traumahealing.org/>
  - Watch the following related video on Kanopy (55 minutes). *Body-Oriented Therapy Sessions II: Somatic Experiencing Therapy*.  
<https://www.kanopy.com/en/brynmawr/video/120767>
- ☐ EMDR
  - Visit the EMDRIA website: <https://www.emdria.org/about-emdr-therapy/experiencing-emdr-therapy/>
  - Read the overview of experiencing EMDR Therapy and watch the video on the webpage (5 minutes). [Thinking about EMDR Therapy?](#)
- ☐ CPT
  - Visit the website: <https://cpt2.musc.edu>
  - Watch the following related video on an Introduction to CPT (22 minutes).  
<https://www.youtube.com/watch?v=EBMuIw5kjCk&t=1074s>

**Small Group Meeting:** In addition to the required asynchronous content, please use this time to meet with your small group and prepare for the final presentation due on Thursday.

### **Class 10: Course Wrap-up and Group Presentations:**



CHART: SUMMARY of 2015 EPAS COMPETENCIES AND DIMENSIONS

Competency	Course Content: lecture, discussion, readings, multi-media, assignments, quizzes, tests, experiential learning	Dimensions: Knowledge (K), Values (V), Skills (S), Cognitive and Affective Processes (C/A)	Location in Syllabus
1.Demonstrate Ethical and Professional Behavior	Planning for self-care in the context of trauma-informed work. Class discussion and readings such as Rosman, K. (2023). Should college come with trigger warnings? At Cornell, it's a hard no. New York Times. Lipsky, L. V. D. (2009). Trauma Stewardship. Berrett-Koehler, Publishers, Inc: San Francisco, CA. [Chapters one and three].	K, V, S, C/A	Week 1
2. Engage Diversity and Difference in Practice	In-class Activity: Based on the definitions of identity-based oppression, and intersectionality, reflect on the potential traumatic experiences represented in the documentary, and identify the definition of trauma examples of its applicability to the main character.	K, S, C/A	Week 3
	Intersectionality and trauma. Readings, assignments, and reflective class discussions focused on content relating to Identity-based oppression, and trauma and identity-based oppression across systems (juvenile justice, education, and mental health). Examples of readings include: Alessi, E. J. (2014). A framework for incorporating minority stress theory into treatment with sexual minority clients. <i>Journal of Gay &amp; Lesbian Mental Health</i> , 18, 47–66. Nadal, K. L. (2018). <i>Chapter 1: Concise guides on trauma care series. Microaggressions and traumatic stress: Theory, research, and clinical treatment.</i> American Psychological Association. Smith. C. (2019). Intersectionality and sizeism: Implications for mental health practitioners. <i>Women &amp; Therapy</i> , 42 (1-2), 59-78. <a href="https://doi.org/10.1080/02703149.2018.1524076">https://doi.org/10.1080/02703149.2018.1524076</a>	K, V, S	Week 4, 5, and 8
	Lecture, readings, and class discussion focused on cross cultural and ecological perspectives on trauma. Readings, class discussions and films focused on critical analysis of cultural and ecological context of trauma research and interventions. Topics include: Cross-cultural approaches to trauma, and Languages of distress and models of coping. Readings include: Patel, A. R., & Hall, B. J. (2021). Beyond the DSM-5 diagnoses: A cross-cultural approach to assessing trauma reactions. <i>Focus</i> , 19(2), 197-203.	K, V, S, C/A	Week 9
	Readings, lectures, and class discussions focused on collective trauma, historical trauma and resilience within marginalized communities, Readings include: Schroeder, K., Noll, J. G., Henry, K. A., Suglia, S. F., & Sarwer, D. B. (2021). Trauma-informed neighborhoods: Making the built environment trauma-informed. <i>Preventive Medicine Reports</i> , 23(2021), 101501. Evans-Campbell, T. (2008). Historical Trauma in American Indian/Native American Communities: A Multilevel Framework for Exploring Impacts on Individuals, Families, and Communities. <i>Journal of Interpersonal Violence</i> , 23(3), 316-338.	K, V, S	Week 8

3. Advance Human Rights and Social, Economic, and Environmental Justice	Readings, lectures, and discussion on organizational trauma and collective resilience. Readings include: Bowen, E. & Murshid, N. (2016). Trauma-informed social policy: A conceptual framework for policy analysis and advocacy. <i>Perspectives From the Social Sciences</i> , 106(2), 223-229. Brisson, D., Holtzinger, C., Macur, R., Rossbert, L., Speer, S. R., & Wilson, J. (2023). Designing for Healing, Dignity, and Joy (v2). Iterating on the Trauma-Informed Design Framework. Shopworks Architecture Group 14 Engineering, University of Denver Center for Housing and Homelessness Research, and Bryn Mawr College.	K,V,S	Week 7
	Resilience in Families and Communities: Norris, F., Stevens, S., Pfefferbaum, B., Wyche, K., & Pfefferbaum, R. (2008). Community Resilience as a Metaphor, Theory, Set of Capacities, and Strategy for Disaster Readiness. <i>American Journal of Community Psychology</i> , 41 (1-2), 1-2.	K, V, S	Week 8
	Readings and discussion on impact of Adverse Childhood Experiences on long-term health and mental health outcome with emphasis on impact of social disparities on health outcomes, including the impact of racism and structural inequity. Readings include: Child Trends (2020). Resources to support children's emotional wellbeing amid anti-Black racism, racial violence, and trauma. Accessed at: <a href="https://www.childtrends.org/publications/resources-to-support-childrens-emotional-well-being-amid-anti-black-racism-racial-violence-and-trauma">https://www.childtrends.org/publications/resources-to-support-childrens-emotional-well-being-amid-anti-black-racism-racial-violence-and-trauma</a> Huffington Post (2017). An American public health crisis: the PAIR of ACES. Accessed at: <a href="https://www.huffpost.com/entry/addressing-an-american-public-health-crisis-the-pair_b_58aca9f6e4b0acc17645d844">https://www.huffpost.com/entry/addressing-an-american-public-health-crisis-the-pair_b_58aca9f6e4b0acc17645d844</a>	K,V,S	Week 3
4. Engage in Practice-informed Research and Research-informed Practice	Readings focused on core concepts with emphasis on EcoBioDevelopmental model and research on the stress response system. Application of research on trauma to social work practice. Examples: Shonkoff, J., Garner, A., and the Committee on Psychosocial Aspects of Child and Family Health (2011). The lifelong effects of early childhood adversity and toxic stress. <i>Pediatrics</i> , 129(1). doi: 10.1542/peds.2011-2663 originally published online December 26, 2011; National Childhood Traumatic Stress Network (2018). Effects of complex trauma. Accessed at: <a href="http://www.nctsn.org/trauma-types/complex-trauma/effects-of-complex-trauma">http://www.nctsn.org/trauma-types/complex-trauma/effects-of-complex-trauma</a> ; Center for the Developing Child (2014). Excessive stress disrupts the architecture of the developing brain. National Scientific Council on the Developing Child. Working Paper #3.	K, S	Week 2
	Videos about trauma screening for parent and children. Trauma Screening (Child Interview): <a href="https://youtu.be/rKTYOAI65zE">https://youtu.be/rKTYOAI65zE</a> Trauma Screening (Parent Interview): <a href="https://youtu.be/bxbSsK5D_PY">https://youtu.be/bxbSsK5D_PY</a>	K, S	Week 3
5 Engage in Policy Practice	Lecture and reflective group discussions on trauma-informed care, trauma-informed policy, the impact of trauma on systems, and assessing organizational health/traumatization. Readings: Bowen, E. & Murshid, N. (2016). Trauma-informed social policy: A conceptual framework for policy analysis and advocacy. <i>Perspectives From the Social Sciences</i> , 106(2), 223-229. Brisson, D., Holtzinger, C., Macur, R., Rossbert, L., Speer, S. R., & Wilson, J. (2023). Designing for healing, dignity, and joy: Iterating on the Trauma-Informed Design Framework (v2). Shopworks Architecture, Group 14 Engineering,	K, V, S, C/A	Week 6 and 7

	University of Denver Center for Housing and Homelessness Research, and Bryn Mawr College. Harris & Fallot (2001). Envisioning a trauma-informed service system: A vita paradigm shift. <i>New Directions for Mental Health</i> , 89, 1-22. SAMHSA (2014). SAMHSA's concept of trauma and guidance for a trauma-informed. SAMHSA (2014). Trauma-Informed Care in Behavioral Health Services. TIP 57. Pp. 1-58.		
6. Engage with Individuals, Families, Groups, Organizations, and Communities	<p>Final Presentation: The vignette presentation will use content from a module to analyze aspects of the case vignette included in the class materials. The case vignettes are available on Moodle. Students will work in groups of 4-6 individuals (assigned by the instructor) to address the prompts below. Each presentation should be no longer than 25 minutes including Q&amp;A.</p> <p><b>Case Vignette Presentation Prompts:</b></p> <ol style="list-style-type: none"> <li>1. Introduce the case by describing the source for the case and include the social identities and other influential biopsychosocial components of development and family context, the strengths, and the presenting problem(s).</li> <li>2. Identify a definition of trauma in the readings and use that specific definition to identify the traumatic experiences of Jack, Samuel, Dinah, or Paloma.</li> <li>3. Using the EcoBioDevelopmental model, describe factors associated with individual and community's paths to risk and resilience in the response to the traumatic experiences of Jack, Samuel, Dinah, or Paloma.</li> <li>4. Consult on a possible intervention for treatment.</li> </ol>	K, V, S, C/A	Week 13
7. Assess Individuals, Families, Groups, Organizations, and Communities	Lecture, readings, and discussion focused on cross cultural approaches to trauma assessment. Example reading: Roberts, A. L., Gilman, S. E., Breslau, J., Breslau, N., & Koenen, K. C. (2011). Race/ethnic differences in exposure to traumatic events, development of post-traumatic stress disorder, and treatment-seeking for post-traumatic stress disorder in the United States. <i>Psychological Medicine</i> , 41, 71-83. Patel, A. R., & Hall, B. J. (2021). Beyond the DSM-5 diagnoses: A cross-cultural approach to assessing trauma reactions. <i>Focus</i> , 19(2), 197-203. Hinton, D. E., & Lewis-Fernández, R. (2011). The cross-cultural validity of post-traumatic stress disorder: Implications for DSM-5. <i>Depression and Anxiety</i> , 28, 1-19.	K, V, S	Week 9
8. Intervene with Individuals, Families, Groups, Organizations, and Communities	<p>Pathways to trauma healing: Readings and discussion focused on best practices, common factors, and clinical interventions. Example readings: Zaleski, K. L., Johnson, D. K., &amp; Klein, J. T. (2016). Grounding Judith Herman's trauma theory within interpersonal neuroscience and evidence-based practice modalities for trauma treatment. <i>Smith College Studies in Social Work</i>, 86(4), 377-393; Briere, J. &amp; Scott, C. (2013). <i>Principles of trauma therapy: a guide to symptoms, evaluation, and treatment</i>, 2<sup>nd</sup> edition. Sage Publications: Thousand Oaks, CA. [Chapters 4 and 5]; Van der Kolk. (2014). <i>The body keeps the score</i>. New York: Penguin, 205-231.</p> <p>Research informed intervention with trauma exposed children. Readings and discussion of: Bernard, K., Hostinar, C. &amp; Dozier, M. (2015). Intervention effects on diurnal cortisol rhythms of child protective services referred infants in early childhood preschool</p>	<p>K, V, S</p> <p>K, S</p>	<p>Weeks 10-12</p> <p>Week 4</p>

	follow up. JAMA Pediatrics, 169(2), 112-119. doi:10.1001/jamapediatrics.2014.2369		
	<p>Final Presentation: The vignette presentation will use content from a module to analyze aspects of the case vignette included in the class materials. The case vignettes are available on Moodle. Students will work in groups of 4-6 individuals (assigned by the instructor) to address the prompts below. Each presentation should be no longer than 25 minutes including Q&amp;A.</p> <p><b>Case Vignette Presentation Prompts:</b></p> <ol style="list-style-type: none"> <li>1. Introduce the case by describing the source for the case and include the social identities and other influential biopsychosocial components of development and family context, the strengths, and the presenting problem(s).</li> <li>2. Identify a definition of trauma in the readings and use that specific definition to identify the traumatic experiences of Jack, Samuel, Dinah, or Paloma.</li> <li>3. Using the EcoBioDevelopmental model, describe factors associated with individual and community's paths to risk and resilience in the response to the traumatic experiences of Jack, Samuel, Dinah, or Paloma.</li> <li>4. Consult on a possible intervention for treatment.</li> </ol>	K, V, S, C/A	Week 13
9. Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities	The articles assigned for week 7 focused on evaluating capacity of organizations for trauma-informed service delivery. Sample articles include Bowen, E. & Murshid, N. (2016). Trauma-informed social policy: A conceptual framework for policy analysis and advocacy. <i>Perspectives From the Social Sciences</i> , 106(2), 223-229. Brisson, D., Holtzinger, C., Macur, R., Rossbert, L., Speer, S. R., & Wilson, J. (2023). Designing for healing, dignity, and joy: Iterating on the Trauma-Informed Design Framework (v2). Shopworks Architecture, Group 14 Engineering, University of Denver Center for Housing and Homelessness Research, and Bryn Mawr College.	K, S, V, C/A	Week 7