

Personal & Organizational Health

Tennessee Domestic Violence Shelter Best Practices Manual / Section II



"Organizational trauma is a collective experience that overwhelms the organization's defensive and protective structures and leaves the entity temporarily vulnerable and helpless or permanently damaged. Traumatic events can be sudden, shocking, and throw the organization into turmoil. Organizational traumatization may also result from repeated damaging actions or the deleterious effects of the nature of an organization's work." (*Organizational Trauma & Healing*, by Pat Vivian and Shanna Hormann)

Just like people, organizations can experience trauma. Organizations can be traumatized by single catastrophic events, ongoing harms, and by the nature of working with victims of trauma. This chapter will explore how organizational trauma occurs, how it affects people within the organization, and ways to build self-care into organizational culture.

Organizational Trauma

Trauma may be direct and acute, it may be direct and chronic, or it may be vicarious, created by constant exposure to clients' traumas. In any of these forms, trauma seeps into victim services and other caregiving organizations and affects not only those involved but the organizations as well. Unaddressed organizational trauma — whether sudden or cumulative — causes serious harm and can be catastrophic for organizations. It negatively affects service delivery, compromises work with clients, and weakens the organization's ability to respond to internal and external challenges. Over time, the unhealed effects of trauma and traumatization compromise the organization's fundamental health.

Especially in victim services or other caregiving organizations, traumas often manifest in being 'stuck' in a repetitive cycle of negativity. Change is happening (e.g. turnover, new clients, new grants or projects), but there is no sense of moving forward or moving past old traumas.

Organizational trauma is systemic; the effect of a trauma is broken connections; with colleagues, leadership, the purpose & passion of the organization, with the outside community and other stakeholders around the organization.

Roots of Organizational Trauma

Single Events

Trauma can occur because of a single acutely destructive event: leadership embezzlement, layoffs from the loss of a large grant, workplace violence, serious injury, death, or natural disaster. Such episodes erupt within caregiving organizations and not only affect those who experience them directly, but radiate out to other organization members.

Ongoing Harms

Trauma in caregiving organizations may also be cumulative and relatively more subtle. Although none of these patterns may erupt in a single traumatic event per se, their cumulative effects can induce traumatization over time within direct care staff and other organization members. Feelings of helplessness gradually arise over time rather than all of a sudden. Often organizations experiencing ongoing harms have multiple sources of harm happening at once.

Working with Trauma

Trauma in caregiving organizations also may be vicarious. Secondary traumatic stress affects caregivers who work with others in emotional pain and “soak up” such pain themselves. The empathic nature of the work means that direct care staff are constantly absorbing stories of pain and trauma, which results in this secondary stress, often called vicarious trauma.

While vicarious trauma originates in direct care staff, it will inevitably spread through the organization, as stories of clients are shared and staff attempt to process what they have absorbed.

Anti-violence organizations are at particular risk for organizational trauma caused by the redemptive and empathic nature of our work. Our daily work activities create an intense environment and passionate advocates are drawn to this work. Often, the organizational culture adds to the intensity through the demands of an advocate’s workload and the way staff communicate with one another. The intensity of this organizational culture is part of the organization’s strength, but it also creates risk for organizational trauma.

The toxicity of secondary traumatic stress for caregivers matches that of post-traumatic stress for the trauma victims themselves. If they are able to process the trauma, organizations and their members can integrate painful experiences into daily functioning, learning and growing from experiences without

The sources of ongoing harms are wide-ranging and include things like:

- Increased demands for productivity and larger workloads that ignore already existing tasks
- Lack of personal development and training for staff, inadequate time for supervision
- Staff turnover leading to loss of friendships, peer support, and organizational memory
- A director who routinely verbally berates and belittles staff
- A staff member who bullies and manipulates others, turning staff against each other
- Repeated lack of transparency about important organizational issues that leave staff feeling frustrated and insecure about the future of the agency
- A hostile relationship within the community that leaves an organization feeling hyper-vigilant and constantly under attack



being disabled by them. If they are unable to process the trauma, it seeps into the organization itself, causing disconnection. This is at once the most common type of organizational trauma that presents in direct services organizations, and the easiest type of organizational trauma to prevent.

Symptoms of Organizational Trauma

When an organization feels ‘stuck’ or trauma is ongoing/cyclical, it can feel never ending and it’s very easy for staff to feel trapped. Their financial situation, or often their sincere love for and obligation the work keeps them from leaving.

Two fundamental symptoms of traumatized organizations are a lack of transparency and breakdown of trust.

Unexpected Turnover is often symptomatic of organizational trauma. This may seem counterintuitive, but the reality is that staff tend to hang on until they reach a breaking point, so leaving seems sudden and unexpected.

This ‘**trapped feeling**’ along with existent trauma and the need to shoulder the responsibilities of staff who have left, can also result in low energy levels and situational depression among those who stay behind. High stress makes people concentrate on their own emotional state and safety, and they find it difficult to focus on the task at hand. The American Psychological Association estimates that job stress, in the form of absenteeism, healthcare costs and productivity loss, costs US companies about \$300 billion a year.

In chronically stressed organizations, individual staff members - many of whom have a past history of exposure to traumatic and abusive experiences – may not feel particularly safe with their clients, with management, or even with each other. They are chronically frustrated and angry, and their **feelings may be vented on the clients.**

"Just as the lives of people exposed to repetitive and chronic trauma, abuse, and maltreatment become organized around the traumatic experience, so too can entire systems become organized around the recurrent and severe stresses...as a result complex interactions often occur between stressed staff, frustrated administrators and pressured organizations that result in service delivery that often recapitulates the very experiences that have proven to be so toxic for the people we are supposed to treat."

Organizational stress as a barrier to trauma-informed service delivery, Bloom, 2010

Often these frustrations emerge as escalations in punitive measures, the creation of **reactionary rules**- strict rules created out of, and to prevent, unique situations. For example, a client who returns to shelter drunk and belligerent may result in a harsh and unreasonable

curfew for all and the expulsion of any client who is suspected of drinking outside shelter.

In cases of severely traumatized agencies, uncertainty and threats originate from the organizational system and leadership, which creates a chronic level of hyper-arousal. Staff are always on edge and the environment becomes increasingly crisis-oriented. **Stress and crisis become normal and expected.**

Communication breaks down between staff members; as a result interpersonal conflicts increase and are not resolved. Team functioning becomes increasingly fragmented. As this happens, staff members are likely to feel overwhelmed, confused, and depressed. Emotional exhaustion, cynicism, and a loss of personal effectiveness lead to demoralization and burnout.

The staff members of traumatized service organizations are caught between the demands of the system and the needs of the clients. Organizations become completely focused on getting through the present while lacking energy and enthusiasm to plan for the future. **Crisis seems unending and there is no progress or positive change.**

In a traumatized organization, rumors run rampant and often take the place of official communication. **Traumatized organizations are notoriously bad at communicating in times of crisis.** Silence from leadership lets imagination run out of control, and anxiety levels run high. Communication and



Constant stress, lack of communication, and reactionary change create an erosion of trust among people within the organization and toward the organization as a whole.

transparency is lost, which leads to a continued lack of trust and resistance to any proposed changes.

Workers feel powerless. In most cases, decisions during crisis are made behind closed doors by a small minority, and most

workers do not have a voice in that process. This also leads to **chronic discouragement** of staff's creativity and ideas, fear or mistrust of trying something new in an environment that feels fragile and prevents innovation. There is a feeling that keeping things the same, 'the way we've always done it,' is protective- but instead it stifles growth and makes staff feel undervalued and unheard.

Chronically stressed organizations engage in **faulty and inadequate problem-solving**, usually reverting to old ways of doing things, even if old ways no longer work. Organizational thought processes are likely to become oversimplified, extremist and reactive because there is a constant feeling of having to make immediate decisions.

Traumatic events are highly polarizing, and can easily rupture long-standing good relationships, particularly hierarchical ones between workers and managers. People will align with those who they perceive to be in similar circumstances to themselves, (and therefore non-threatening) and erect emotional barriers against those who they believe are a threat, typically pitting staff and leadership against each other, and dividing peers into factions.



In chronically stressed organizations, staff often become progressively hopeless, helpless and demoralized about the work they are doing and the possibility of seeing significant change. Over time, **leaders and staff lose sight of the mission of their work**, and derive less and less satisfaction and meaning from the work. This presents as a loss of vision, purpose, and hope that the organization can make significant change toward its mission.

Creating Healthy Organizational Cultures

Leadership Must:

- **Bear witness to what occurred**
 - Recognize and acknowledge the trauma. Give people time to grieve and process the trauma. Depending on the severity of the traumatic situation, this could take days or weeks. Then staff can work towards integrating the trauma in affirming and meaningful ways.

- **Foster insight and empathic connections**
 - Assist the staff in understanding the trauma and making sense out of it, including what the trauma means to them personally and organizationally.
 - Connect with sister organizations, TA providers, and other systems in the state/community.
 - Provide opportunities for personal development.
 - Transparency and communication can do much to contain anxiety.
 - When organizational trauma is the result of cumulative vicarious trauma, providing education and structures to cope with vicarious trauma normalizes the experience and helps employees feel supported (see text box for suggestions).

- **Be respectful of negative emotions throughout healing process**
 - It may take longer for staff to ‘trust’ change and healing than leadership, because staff are not always involved in planning conversations and because two fundamental symptoms of traumatized organizations are lack of transparency and breakdown of trust. Leaders should take care not to be frustrated as staff express negative emotions (hurt, anger, frustrations, grief, anxiety) through the healing process.

- **Offer optimism, confidence, and energy.**
 - Champion organizational strengths and help employees reconnect to the mission of the organization.
 - Recognize good works in big and small ways.

- **Model trust**
 - Set expectations for ethical and direct communication. Ask for outside help when necessary, including perhaps hiring a consultant or bringing in a TA provider to help process the trauma.

Create opportunities for team building:

- **formal-** workshops, peer education and cross training, staff and team meetings, collaborative projects.
- **experiential-** dinner, movies, special interest groups (book club, exercise class), physical activity.

Prioritize opportunities for feedback and encouragement:

- team check-ins
- regular supervision
- staff sharing and networking opportunities

- **Build trust and short-circuit the rumor machine by being transparent.** Give employees frequent, detailed information about the changes affecting your organization.
- **Set priorities to move forward.**
 - Note that setting a plan for the future is the last step here. Many of the others will happen in various orders or simultaneously, but moving forward only happens successfully after we work to address the trauma itself.

Reconnect to Mission:

In traumatized organizations, it can be hard to reconcile the mission of the organization with the trauma we have experienced. Often the organization's mission statement has stayed the same as the organization has changed and evolved with the times.

When an organization has gone through trauma, there is a need for evaluating or changing its mission statement.

Too often, mission statements:

- Are not inclusive
- Do not reflect the organization's strategic plan or the real work you do
- Do not reflect the values systems from which the staff operate

Take the time to get staff buy-in

- Do not rush to define your values; if you rush you risk drafting a statement that no one will buy into and thus implement.
- Give staff opportunities for input and discussion.

Distill values into observable behavior

- Don't be wishy-washy or esoteric with your values; spell them out in simple, concrete terms that are easy to understand and carry out

Be true to your organization

- Make it work for your organization instead of what sounds good or what people would like to hear.

Keep it visible

- Once you have your list of values, print it out, put it up on walls, have handouts for every meeting. Talk about the values all the time.
- At staff or team meetings, save a few minutes on the agenda to discuss how you've seen your values being expressed in the past week and to share appreciation of one another based on the values you see in action.

Think About Integration

- Your values are completely useless if they are only a list on your website. Find a way to integrate them into everything. When you hire people, make sure candidates know your values and expectations around them. When you do performance evaluations, make sure you discuss organizational values. When you collaborate with other organizations, make sure you discuss and see if your values align.

Discuss & Adapt Regularly

- As new team members and leaders come along, values may sometimes change to incorporate their perspectives. This helps with ownership, which is very important. Your board and staff may want to figure out which values/behaviors are non-negotiable, though, and use those to guide who you bring into the organization.

Foster Self-Care:

“We cannot develop and implement visionary strategies for change in the long term if we are exhausted and burned out in the short term. To shift our work and movement culture, we need to care for ourselves and each other in a markedly different way so that as a movement we can move beyond surviving to thriving. By transforming ourselves, we will be able to engage in work that can actually transform our society.”

Move to End Violence Initiative

Organizational Self-Care Assessment

1. **Reflect on what the organization does to take care of itself.** Start from a place of strength and think about what your organization already does well to create a supportive environment. These are areas you can reinforce or supplement to create more self-care opportunities. For example, does everyone gather for lunch on a daily or a weekly basis? Do you have regular team meetings? Regular supervision?
2. **Understand that lack of care is systemic**, therefore, changing traumatized systems is the best way to assure that we are able to care for ourselves and each other. We can't address organizational self-care without also addressing organizational culture. Even if an advocate is caring for themselves outside of work, coming into a traumatized, stressed organization resets any personal progress made.
3. **Spend some time thinking about what your organization's cultural practices are and how they might be preventing self-care from happening.** Think critically about where there are barriers to care. Make a list of organizational practices that seem to block self-care.



Barriers to Organization Self-Care Include:

- Staff are off-site and cannot meet in person for weekly supervision/staff meetings
- There is no communal space for staff to share lunches or network
- Staff are overwhelmed with workloads and taking a break means more stress
- Staff are feeling pressure to say yes to every request regardless of their existing workload
- Staff are being given tasks at the last minute or leaving tasks until the last minute which creates a sense of urgency and stress
- There is no clear sense or priorities, so each assigned task is treated as if it must be completed immediately

4. Assess where energy is being spent-

- Have staff write out what they do in one day and one week
- Be realistic, include for instance ‘5 hours a week for paperwork’, ‘shopping for supplies 4 times per week’, organizing, cleaning, filing, research, etc.
- Pinpoint areas that can be delegated and recruit interns or volunteers. Reach out to community for help with repairs, cleaning, shopping, filing, etc.

5. Facilitate an organization-wide discussion about what it would feel like if the organization had a culture of self-care, talking through questions like these:

- What would be different?
- What would you be doing more of or less of?
- How might you respond to one another’s requests differently?
- How might you make requests differently?
- How would you make reflection, resilience and renewal a priority?

Ways to Build Self-Care into Organizational Culture:

- Supervisors making work-life balance a standing check-in question as part of regular supervision meetings
- Incorporating meaningful self-reflection or self-care activities before the start of all staff meetings
- Leaders modeling boundary setting (e.g., not responding to email after work hours, not scheduling back-to-back meetings)
- Creating spaces for cross training and peer education
- Training staff in ethical communication and conflict resolution
- Having mutual accountability agreements and ways to hold each other accountable in loving ways
- Interrupting racism, sexism, homophobia, ableism, classism, transphobia and all other forms of oppression in the workplace
- Offering health care or self-care packages/monies which include access to mental health services
- Meetings purely devoted to self-care and vicarious trauma, where staff can put themselves on the agenda when need be
- Adding a self-care line item to your budget, with unrestricted funds, even if it’s really small in the beginning

A few Examples of Peer-to-Peer Self-Care

It’s often more fun to do things with other people. Chances are everyone in your office is as stressed as you are. At the next staff meeting, share and brainstorm ideas for self-care. Select a couple of them to implement. Don’t be overly ambitious- choose something simple and achievable, explore a new restaurant together for lunch once a month, go on a walk as a team once a week.

Encourage Participation in Self-Care

- Know that healthy stress management and appropriate self-care allows us to be more productive and effective in our work, and reduces burnout and turnover
- Use self-care as incentives
 - Reach out to board members and private donors for self-care items as giveaways for staff successes, or during particularly stressful periods

- Share and celebrate self-care at team and staff meetings
- Engage in self-care activities as a group (group lunches, walks, book club, activities to start off staff meetings, weekly meditation or other de-stressing workshops)- but be sure to remain inclusive as to not create cliques.
- Build in opportunities for self-care into the workday- make sure people are taking lunches and breaks, send out funny videos, inspiring songs and quotes.
- No meeting days, quiet rooms, closed-door days (where staff can have an uninterrupted day to catch up on a project or task), or work-from-home days.
- Provide healthy snacks, encourage staff to take walking breaks, as they would smoke breaks.
- Create ways for everyone to participate.
 - Think about people who are off-site.
 - Think about people with disabilities.
- Share self-care stories and ideas on a bulletin board.
- Make self-care a game or (non-mandatory) contest. Give points for engaging in self-care and offer rewards at the end of the month.
 - Have staff team up to encourage team-building (it can be a great way to bond across work groups by mixing up staff from different departments).
 - Prizes can be silly (medals from the dollar store, funny certificates, crowns for the ‘queen/king of self-care’).

Resources:

Trauma-informed Organization Assessment <https://www.thenationalcouncil.org/wp-content/uploads/2012/11/Is-Your-Organization-Trauma-Informed.pdf>

Organizational Trauma and Healing, By Pat Viavian and Shana Hormann, 2014 :
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Bert Hellinger Institute, Traumatized Organizations :
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<http://sanctuaryweb.com/Portals/0/Bloom%20Pubs/2010%20Bloom%20Organizational%20Stress%20as%20a%20Barrier%20to%20Trauma%20Chapter.pdf>

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<http://journals.sagepub.com/doi/pdf/10.1177/0021886303261954>

Protecting employees from organizational trauma, Darcy Jacobsen, 2012 :
<http://www.globoforce.com/gfblog/2012/protecting-employees-from-organizational-trauma/>

Organizational Trauma and Resilience, Resource Sharing Project, 2016:
http://www.resourcesharingproject.org/sites/resourcesharingproject.org/files/Organizational_Trauma_and_Resilience.pdf

Moving Away from a Scarcity Mindset <http://www.bethkanter.org/scarcity-mindset/>

Community Care <http://archive.organizingupgrade.com/index.php/blogs/b-loewe/item/729-end-to-self-care>

Organizational Self-care <https://www.compasspoint.org/blog/organizational-self-care-why-it-matters-and-what-it-could-look-your-organization>

Organizational Self-Care Assessments:

https://www.onelegacy.org/docs/SelfCare_SelfAssessmentTool3_Organizations.pdf

<https://www.healthcare.uiowa.edu/icmh/documents/CCTICSelf-AssessmentandPlanningProtocol0709.pdf>