



1-1-2023

Trauma Education In Social Work Curricula: An Innovative Approach To The Teaching Of Trauma-Informed Care

Jennifer M. Schlinger

[How does access to this work benefit you? Let us know!](#)

Follow this and additional works at: <https://commons.und.edu/theses>

Recommended Citation

Schlinger, Jennifer M., "Trauma Education In Social Work Curricula: An Innovative Approach To The Teaching Of Trauma-Informed Care" (2023). *Theses and Dissertations*. 5702.
<https://commons.und.edu/theses/5702>

This Dissertation is brought to you for free and open access by the Theses, Dissertations, and Senior Projects at UND Scholarly Commons. It has been accepted for inclusion in Theses and Dissertations by an authorized administrator of UND Scholarly Commons. For more information, please contact und.common@library.und.edu.

TRAUMA EDUCATION IN SOCIAL WORK CURRICULA:
AN INNOVATIVE APPROACH TO THE TEACHING OF TRAUMA-INFORMED CARE

By

Jennifer Marie Schlinger
Bachelor of Science in Social Work, University of North Dakota, 2000
Master of Social Work, University of North Dakota, 2004

A Dissertation

Submitted to the Graduate Faculty

of the

University of North Dakota

in partial fulfillment of the requirements

for the degree of

Doctor of Education
Educational Practice and Leadership

Grand Forks, North Dakota

December
2023

Copyright 2023 Jennifer Schlinger

Name: Jennifer Schlinger
Degree: Doctor of Education

This document, submitted in partial fulfillment of the requirements for the degree from the University of North Dakota, has been read by the Faculty Advisory Committee under whom the work has been done and is hereby approved.

DocuSigned by:
Deborah Worley
Deborah Worley

DocuSigned by:
Radomir Ray Mitic
Radomir Ray Mitic

DocuSigned by:
Kathy Smart
Kathy Smart

DocuSigned by:
Julie Grabanski
Julie Grabanski

This document is being submitted by the appointed advisory committee as having met all the requirements of the School of Graduate Studies at the University of North Dakota and is hereby approved.

DocuSigned by:
Chris Nelson
Chris Nelson
Dean of the School of Graduate Studies
12/7/2023

Date

PERMISSION

Title Trauma Education in Social Work Curricula:
 An Innovative Approach to the Teaching of Trauma-Informed Care

Department Educational Practice and Leadership

Degree Doctor of Education

In presenting this dissertation in partial fulfillment of the requirements for a graduate degree from the University of North Dakota, I agree that the library of this University shall make it freely available for inspection. I further agree that permission for extensive copying for scholarly purposes may be granted by the professor who supervised my dissertation work or, in her absence, by the Chairperson of the department or the dean of the School of Graduate Studies. It is understood that any copying or publication or other use of this dissertation or part thereof for financial gain shall not be allowed without my written permission. It is also understood that due recognition shall be given to me and to the University of North Dakota in any scholarly use which may be made of any material in my dissertation.

Jennifer M. Schlinger
December 7, 2023

TABLE OF CONTENTS

LIST OF FIGURES	vii
LIST OF TABLES	viii
ACKNOWLEDGEMENTS	ix
ABSTRACT	x
INTRODUCTION	1
ARTIFACT I: PROBLEM OF PRACTICE	2
Overview of the Problem	4
Social Work Curriculum.....	6
Review of Relevant Research and Practitioner-Based Literature.....	7
Common Approaches to Addressing the Problem	15
Linking Possible Solutions and Barriers to Theoretical Foundations	17
Summary	21
ARTIFACT II: RESEARCH APPROACH NARRATIVE	22
Purpose of the Study.....	22
Description of the Research Questions.....	22
Research Approach	23
Research Methods	24
Narrative Explaining Results of Inquiry/Findings	34
Summary of Findings	44

ARTIFACT III: IMPLEMENTATION OF SOLUTION	46
Final Product	46
Summary	55
CONCLUSION.....	56
Suggestions for Future Inquiry/Next Steps in Research	57
APPENDICES	60
APPENDIX A: <i>Understanding Trauma in Social Work Practice</i> Course Syllabus.....	60
APPENDIX B: Course Schedule, Readings, Learning Objectives, and Assignments	69
APPENDIX C: Suggested Introduction to Trauma Slide	74
APPENDIX D: Suggested ACEs Slides	75
APPENDIX E: Suggested Mindfulness Activity Slide	77
APPENDIX F: Suggested Self-Care Slides	78
APPENDIX G: Grading Rubric for Self-Care Plan and Journal	81
APPENDIX H: Grading Rubric for Crisis Intervention Assessment Assignment.....	82
APPENDIX I: Grading Rubric for Mindfulness Group Activity.....	83
APPENDIX J: Grading Rubric for Current Event Reaction Paper.....	84
APPENDIX K: Grading Rubric for Research Presentation	85
REFERENCES	86

LIST OF FIGURES

Figure 1: Syllabi Analyzed from 29 States	27
Figure 2: Trauma Course Offered to BSW, MSW, and DSW Students	34
Figure 3: Number of Credits.....	35
Figure 4: Textbook Titles Required Five or More Times.....	36
Figure 5: Co-Occurrences with the Word Trauma in Course Descriptions	37
Figure 6: Major Categories Found in Course Titles and Course Descriptions.....	38
Figure 7: Stand-Alone Trauma Course	41
Figure 8: Semester the Course is Offered	42

LIST OF TABLES

Table 1: Number of Textbooks Required.....	35
Table 2: Frequency of Categories Found in Course Learning Objectives, Assignments, and Topics.....	39
Table 3: Categories from 12 Non-Trauma Social Work Courses.....	43

ACKNOWLEDGEMENTS

I wish to express my sincere appreciation to the members of my Dissertation Committee for their guidance and mentorship so I may accomplish my educational goal at the University of North Dakota. Thank you also to the Social Work Department at UND for your insight as I researched this topic so we may better serve our students and the profession.

Words simply cannot convey my deepest love and gratitude to my family and friends for their incredible support. I am extremely grateful for my mom, who has always believed I can accomplish anything I set my mind to and constantly and generously offers her encouragement. To my kids, Ella and Nicholas, without whom this endeavor would not have been possible. They continue to amaze and inspire me. I also appreciate them doing homework alongside me. To my husband, Damian, who believed in me all along and knew I had the strength and determination to accomplish this dream. To my best friend Jeri who is always just a phone call away and faithfully offers her steadfast and unwavering support. Her friendship has always been a source of inspiration. Thank you to Leah for the frequent check-ins and for keeping my motivation high. To Tina for being a person I can turn to and lifting me up during this rewarding experience. To all my family and friends not specifically mentioned, please know how grateful I am for your care and support.

This Dissertation is dedicated to those who have experienced trauma and those entering or practicing in the social work profession. Thank you for the important work you do to help individuals, families, groups, communities, and organizations.

ABSTRACT

Many professionals, especially social workers, work with individuals who have a history of or are experiencing trauma. If students understand the trauma their clients have experienced, they are better suited to meet the individual where they are and help them work towards their goals. Social work professors must prepare their students by instructing them about different types of traumatic experiences, the impacts, assessment tools, and various intervention strategies. I used a qualitative research approach and document analysis to understand how social work programs incorporate education related to trauma and trauma-informed practice into their curricula. This method allowed me to gain a deep and nuanced understanding of how social work programs educate their students about trauma. This dissertation discusses the need for trauma education in social work curricula based on the research findings. The practical application of the research lends itself to developing a course to be offered to students at the University of North Dakota (UND). This course, *Understanding Trauma in Social Work Practice*, will be offered as an elective in the Master of Social Work (MSW) program and will provide basic, foundational knowledge and awareness of trauma. Exploration of factors known to promote resilience and self-care are examined and emphasized throughout the course.

Keywords: social work, trauma, trauma-informed care, social work curriculum

**TRAUMA EDUCATION IN SOCIAL WORK CURRICULA:
AN INNOVATIVE APPROACH TO THE TEACHING OF TRAUMA-INFORMED CARE**

Introduction

Trauma does not discriminate. People of all ages, color, race, religion, ability, gender, geographic location, economic status, and/or sexual orientation experience the impacts of trauma. Trauma can range from one incident to ongoing exposure. The National Council for Mental Wellbeing estimates that at least 70% of the adult population in the United States has experienced at least one traumatic event in their lifetime (2022).

In this dissertation, I identified the lack of trauma education in social work curricula as a significant problem of practice for social work academic programs. The literature review included scholarly works that somewhat address models used in undergraduate and graduate social work education. These models include person-centered practice, intersectionality, and the life course perspective. Also, I reviewed the common approaches and links to possible solutions to address the problem. In the second artifact I explained the purpose of the study to include research questions, research approach, and the findings of my study. In the third artifact I presented an implementation of a solution to the problem of practice. My solution is a fully developed master's level course on trauma education. The components of the course consist of a fully developed syllabus, including the course description and objectives, course outline, textbook, topics covered, and assignments. In a final section, I reviewed how all the artifacts address the problem of practice and offer suggestions for future inquiry and research.

Artifact I: Problem of Practice

The problem of practice is related to the lack of trauma-informed education in the Social Work Department at the University of North Dakota (UND), a midwestern research university. Social work students are not offered specific education surrounding trauma or how to work with clients who have experienced trauma. The study aimed to understand how social work programs incorporate education related to trauma and trauma-informed practice into their curricula. I identified best practices to integrate trauma-informed practice in the social work curriculum and discussed how this will benefit future social workers. If students understand the trauma their clients have experienced, they are better suited to meet the individual where they are and help them work towards their goals.

Many professionals, especially social workers, work with individuals who have a history of or are experiencing trauma. American Psychological Association (APA) defines trauma as “an emotional response to a terrible event” (American Psychological Association, 2022, para. 1) and according to the Centers for Disease Control and Prevention (CDC), a traumatic event is an event, or series of events, that causes moderate to severe stress reactions and can have “a physical, cognitive, and emotional response” (Centers for Disease Control and Prevention, 2022, para. 3). Adverse Childhood Experiences (ACEs) can include traumatic events such as domestic or community violence, sexual exploitation, family-related stressors, etc. According to Substance Abuse and Mental Health Services Administration (SAMHSA), over “two-thirds of children reported at least one traumatic event by age 16” (SAMHSA, 2022c, para. 2).

The traumatic event is just one of the three Es when understanding the concept of trauma. In addition to understanding what kinds of events may be described as traumatic, SAMHSA also addresses experience and effects (SAMHSA, 2014). The perception of a traumatic event varies among individuals because “a particular event may be experienced as traumatic for one individual and not for another” (SAMHSA, 2014, p. 12). Finally, the effects that the event has on a person are critical and “may occur immediately or may have a delayed onset” (SAMHSA, 2014, p. 12).

Post-traumatic stress disorder (PTSD) is the result of experiencing something traumatic. The National Center for PTSD states that six percent of the population will develop PTSD at some point (Veteran Affairs, 2018). The National Institute of Mental Health divided the level of impairment adults experience because of PTSD. Kessler et al. reported that 36.6% of adults in the United States had experienced serious impairments in the previous year due to PTSD (2005).

Social workers work with people of all ages and from diverse backgrounds. They are the “largest mental health profession treating trauma survivors” (Case Western Reserve University, 2022, para. 3). Yet, there is great variation in how social work students access information and specific educational resources surrounding trauma and how to work with clients who have experienced trauma. The study aimed to understand how social work programs incorporate education related to trauma and trauma-informed practice into their curricula.

In this artifact, I provided an overview of the problem of practice related to the lack of trauma-informed education for social work students, and why it is important to address this problem. I used evidence-based literature to cite and support the need for addressing the problem of practice, along with current trends and best practices in how we currently address the problem. Finally, I discussed possible solutions and barriers to theoretical foundations.

Overview of the Problem

Historically, education around trauma was very specific. For example, students may have learned how to specifically serve survivors of intimate partner violence or victims of child abuse or neglect. This trauma education “failed to take into account the broader context of the trauma or the fact that there are many overarching themes that exist no matter what type of trauma occurred” (Getz, 2013, p. 18). It is important to examine how any type of trauma impacts a person so social workers are prepared to meet their needs. For instance, if a person is exposed to prolonged trauma, it can lead to maladaptive behaviors and responses throughout their life (Perry & Winfrey, 2021).

Getz (2013) further notes that, “over the years, social work programs have infused some elements of trauma education, but the need for greater emphasis on trauma training has become evident” (p. 18). Many social work programs teach from a generalist perspective, and students are prepared to work in a variety of settings with diverse populations. Since trauma can impact any person at any stage in their life, it is likely that social workers will “encounter clients who have experienced trauma.” (Getz, 2013, p. 18). Recently, “trauma education has

vastly evolved, and frequent mass violence, natural disasters, and other tragic events amplify its importance in social work curriculum.” (Getz, 2013, p. 18).

Social work programs across the nation experience external pressure to incorporate changes and enhancements due to the nature of the profession. According to the National Association of Social Workers (NASW), an ethical principle is for social workers to “develop and enhance their professional expertise” (NASW, 2023, para. 30). As the field of social work changes to meet the demands of its constituents, social work programs need to stay abreast of the needs and be proactive in adequately preparing students to work with clients who have experienced trauma. A key issue that has gained much attention in the field of social work is the effects of trauma on a person’s physical and mental health. In 2015, the Council on Social Work Education (CSWE) released resources to help implement the Educational Policy and Accreditation Standards (EPAS). CSWE provided a guide specifically related to trauma-informed social work practice to address the implementation of trauma in social work education. By expanding their knowledge on the topic of trauma, “social workers continually strive to increase their professional knowledge and skills and apply them in practice” (NASW, 2023, para. 31). Newly educated and seasoned social workers alike need to have the most up-to-date information and training available to them so they may meet the needs of individuals and society.

Social workers work with various populations across the lifespan. When working with clients, it is important to understand a person’s history to include culture, beliefs, practices,

traditions, family structure, etc. In a person-centered approach, social workers focus on the individual as the center of care or service and understanding the whole person. Providing person-centered care “puts individuals in control of decisions about their care” (Lines, et. al, 2015, p. 561). This holistic approach emphasizes a person’s “social, mental, emotional, and spiritual needs, as well as an individual’s strengths, weaknesses, preferences, and values” (Lines, et al., 2015, p. 561). The person-centered holistic approach considers where a person has come from, where they are now, and where do they want to go. When looking at a person’s history, if they have experienced trauma in their life, it is important to recognize and understand trauma and its impact on the individual.

Social Work Curriculum

The University of North Dakota Social Work’s mission statement states their education “advances social, economic and environmental justice, and enhances human well-being and quality of life” (University of North Dakota, n.d., para. 6). The curriculum for a social work program is designed to prepare students for a career to address various issues that impact individuals, families, groups, communities, and organizations.

Baccalaureate and Master's level students in social work undertake a curriculum designed to establish a solid grasp of the profession's history, values, and ethical principles. Their coursework includes subjects like Human Behavior and the Social Environment, Social Policy, and Social Work Research Methods. Additionally, students engage in practical courses such as Social Work Practice with Individuals and Families, Social Work Practice with Task and

Treatment Groups, and Social Work Practice with Communities and Organizations. To tailor their education, students have the option to choose from a range of elective courses pertinent to the field of practice. Towards the conclusion of their program, social work students complete an internship or field instruction in their final semester.

Review of Relevant Research and Practitioner-Based Literature

Assessing and treating victims of trauma is complex and requires knowledge and practice to effectively do so. According to Masiriri (2008), most behavioral health treatment is provided by social workers with a master's degree. To best meet the individual needs of their clients, clinicians will develop a person-centered intervention plan. Social work students are taught various skills and educated on several intervention models, such as person-centered practice, intersectionality theory, and the life course perspective.

Baccalaureate and some graduate social work programs teach a generalist curriculum, which is "grounded in the liberal arts and the person-in-environment framework" (CSWE, 2022, p. 17). Generalist social workers "use a range of prevention and intervention methods in their practice with diverse individuals, families, groups, organizations, and communities based on scientific inquiry and best practices" (CSWE, 2022, p. 17). While social work students learn a variety of prevention and intervention models, students also learn from the variety of theories and perspectives on which these models are based. The literature review provided an overview of these models as well as how they have been studied by researchers and applied by practitioners.

Person-Centered Practice

Person-centered practice is a focus of social work education as it places the person in the middle and enables them to make their own decisions. It is also known as patient-centered care, which stems from a medical model. The process of person-centered decision-making aims to have the individual “have control over their services, including the amount, duration, and scope of services, as well as choice of providers” (SAMHSA, 2022a, para. 1). This strength-based approach is critical in many disciplines in addition to social work. Medical providers, educators, therapists, etc. turn to person-centered practices to empower individuals to set their own goals. Working with individuals does not only include their medical needs. Therefore, there has been a shift to the person-centered approach to “encompass the entirety of a person’s needs and preferences, beyond just the clinical or medical” (American Geriatrics Society Expert Panel, 2016, p.15).

A person-centered approach is important for students to understand when they are entering any helping profession. By incorporating multiple models such as psychological, social, biological, etc., it “encourages prevention, resilience, and self-care” (Serlin et al., 2019, p. 14). Especially when people experience trauma, it is important to understand all aspects of how the trauma impacts a person, including the biological impacts to the brain. Some reactions may include “headaches, physical pain, numbness, withdrawal, hyperarousal, digestive problems, and fatigue” (Serlin et al., 2019, p. 15). Using a whole-person approach to working with a person

who has experienced trauma provides an opportunity to understand what a person might be experiencing ranging from short- to long-term effects.

Social workers frequently utilize the person-centered approach in various settings including hospitals, long-term care facilities, group homes, schools, and community mental health programs. A recent study examined the variation in “person-centered care across programs within community mental health clinics” (Choy-Brown et al., 2020, p. 907). Since this model is so popular among many disciplines to promote client self-determination its implementation varies based on “purposes, structure, and intensity” (Choy-Brown et al., 2020, p. 909). The study found many practitioners fell short in setting goals “beyond service participation and integrating natural supports” (Choy-Brown et al., 2020, p. 912). It was noted some areas in which they showed lower competence was when they were serving people with severe mental illness (SMI). The study concluded that the programs that “operationalized some person-centered practices” (Choy-Brown et al., 2020, p. 913) had the best outcomes in terms of the overall person-centered care planning and points to a “need for tailored training and support” (Choy-Brown et al., 2020, p. 913).

Overall, the literature suggests that person-centered practice is an essential approach for social workers and other professionals to build trusting relationships, promote self-determination, and enhance positive client outcomes. This approach is useful for practitioners to address a wide range of client needs, including those who have experienced trauma.

Intersectionality Theory

Practitioners look at various aspects of the people they serve using both person-centered and holistic approaches. It is important to understand intersectionality theory as that “recognizes that all of us are jointly and simultaneously members of a number of socially constructed identity groups, such as gender, race, ethnicity, social class, sexual orientation, age, religion, geographical location, and disability/ability groups” (Hutchinson, 2019, p. 26). This theory is important as we consider all the various aspects and key components that make up an individual.

Crenshaw (1991) wrote one of the earliest works on intersectionality where she discusses how black women may experience both racism and sexism. In particular, Crenshaw (1991) examines violence against women and how “women of color are frequently the product of the intersecting patterns of racism and sexism” (p. 1243). The article notes the importance of understanding intersectionality and taking social action to address the unique forms of violence that women of color face. In practice, this understanding means acknowledging that experiences of women of color, for example, are not adequately captured by solely addressing racism or sexism in isolation. It necessitates inclusive and comprehensive approaches that recognize the complex interplay of intersecting systems.

Intersectionality is used to “inform social action” (Collins, 2019, p. 2) and is not only used by social workers. Cole discusses questions research psychologists may ask including “what role does inequality play” (Cole, 2009, p. 1). Questions such as this may illuminate “privilege

and power” (Cole, 2009, p. 1) that may exist and lead to social and policy change. When analyzing social policy, intersectionality may be used to identify “how individuals are positioned within social hierarchies” (Cole & Duncan, 2023, p. 63) and develop or change policies to meet the needs of the target populations.

The literature on intersectionality has grown significantly over the years and scholars such as Matsuzaka, et al. (2021) and Simon et al. (2020) and activists have applied intersectionality to various fields and have used it to better understand the complexity of individuals and the societies in which they live. Intersectionality adds depth to understanding trauma by recognizing the complexity of individuals’ experiences shaped by multiple, intersecting identities.

Life Course Perspective

The life course perspective examines how “biological, psychological, and social factors act independently, cumulatively, and interactively to shape people’s lives from conception to death, and across generations” (Hutchinson, 2019, p. 5). Generally speaking, when students take the course, *Human Behavior in the Social Environment*, this perspective is leaned on heavily. Throughout this course, students also learn about protective and risk factors. Developmental risk and protection are experiences that have an impact on subsequent transitions and life events. These may either protect the life course trajectory or put it at risk (Hutchinson, 2019). A risk factor, such as trauma, is a “factor at one stage of development that increases the probability of developing and maintaining problem conditions at later stages”

(Hutchinson, 2019, p. 28). As students learn about various risk and protective factors, they learn that “negative experiences in childhood and the teenage years may put children at risk for chronic health problems, mental illness, and substance use in adulthood” (Centers for Disease Control and Prevention, 2021b, para. 1). While students touch on the subject of trauma and its impact on their life course trajectory, educational programs should offer additional learning opportunities about different types of trauma, various responses to trauma, and beneficial intervention strategies.

Glen Elder Jr. was the sociologist who first wrote about the life course perspective. He discussed how a person’s life course trajectory is impacted based on the “influence of historical events” (Walker, 2022, p. 907). He further discussed how the experiences along a person’s life course have an impact on a person’s overall physical and mental health (Walker, 2022). One of the key concepts of Elder’s life course perspective is that of *timing*, or the “age at which an experience occurs and how it is experienced” (de Wind, et al., 2016, p. 2). The theme of *timing* is a common thread through literature that discusses the life course perspective.

Walker (2022) offered examples of significant moments for individuals diagnosed with schizophrenia, including “deinstitutionalization and the discovery that antipsychotic medications could decrease symptoms” (p. 907). Another study conducted by de Wind et al. (2016) researched the timing of retirement and whether it was on or off time. The study examined various “factors influence working beyond retirement from a life course perspective” (p. 2). One conclusion from the study found that a person’s financial situation “predicted working beyond

retirement” (de Wind, et al., 2016, p. 9). The life course perspective teaches us to look at what has occurred across a person’s life that has led to their financial situation that could be the driving force behind the timing of their retirement.

The timing of negative events in a person’s life, such as trauma, results in different outcomes. Gerritsen, et al. (2015) found that when negative events impact the brain, the intensity of the effects “depends on the time when the events occurred, the strongest effects observed during the critical time periods of early and late life” (p. 1219). Dr. Bruce Perry, a child psychiatrist and neuroscientist, discusses at length the brain development that occurs during early childhood. He states, “early life experiences do have a very powerful impact on how we develop” (Perry & Winfrey, 2021, p. 78). Trauma can occur at any stage in a person’s life. Herrenkohl et al. (2020) address several forms of violence including “child maltreatment, violence in adolescence, and intimate partner violence and elder mistreatment” (p. 314). Depending on the timing and severity of the trauma that has occurred, it may place an individual at “high risk for a range of cognitive, health, and social impairments” (Herrenkohl et al., 2020, p. 319).

Overall, the life course perspective offered a useful framework for understanding how social and environmental factors shape individual lives over time. By examining how and when these experiences occur over the life course, social workers are able to identify appropriate interventions and offer support to improve their overall well-being across the lifespan. This theoretical framework considers the influence of individuals’ experiences and how those

experiences shape a person across all life stages. Since this theory focuses on factors across different life stages, patterns or relationships to the life course perspective are anticipated in the document analysis.

Literature Review Summary

Social work students are taught various theories, models, and approaches when working with clients. Students in a generalist social work program are presented with a multitude of tools to work with diverse clients in a variety of settings. Research and the application of a few of these models have been discussed here. While each has distinctive characteristics and have their use within the social work profession, many of the themes may overlap and have similar traits. It is critical to use a person's "history, lifestyle, unique experiences, values, preferences, and culture" (Walker, 2022, p. 908) when working with individuals, families, and groups. Social workers will be able to have a better understanding of their clients if they take a person-centered approach that will empower their clients to take charge of their goals based on their individual needs. Part of a person-centered approach is to realize individuals are simultaneously members of multiple groups that intersect over their entire life course. An individual's life is comprised of countless experiences that are interconnected and shaped by historical, social, cultural, and environmental factors over time. Abrams and Shapiro (2014) discuss the importance of integrating case examples into teaching methods. In particular, they note this teaching method is useful when "teaching trauma theory and practice" (Abrams & Shapiro, 2014, p. 409). They surmise that incorporating multiple case studies throughout the course "is

an effective method of preparing students for what they will encounter in the field” (Abrams & Shapiro, 2014, p. 409). Just like no two individuals are alike, no two cases or clients will be alike. Therefore, social work students need to be educated on various theories and models so they have the ability to apply them in practice with their unique clients.

Common Approaches to Addressing the Problem

There are a variety of training opportunities and continuing education programs for professionals working with people that have experienced trauma. The GAINS Center provides resources for criminal justice professionals and has recently offered a trauma-informed response training (SAMHSA, 2022b). (GAINS stands for gather, assess, integrate, network, and simulate.) Relias is a company that provides services, including continuing education, to healthcare providers. Their training focuses on the philosophy of trauma-informed care and boasts to not only help the patients and staff alike (Relias, 2022). The National Center on Safe Supportive Learning Environments offers technical assistance and resources that are “focused on improve school climate and conditions for learning” (NCSSLE, 2022, para. 1). One program they offer is trauma-sensitive training for educators in K-12 schools. Addressing the needs of people who have experienced trauma reaches across multiple disciplines.

Many disciplines, including social work, take a reactive approach to addressing the need of additional education relating to trauma and its impacts. These responses come in the form of continuing education, professional development, or other on-the-job resources. Some higher education programs have taken more of a proactive approach and offering courses or certificate

programs within their institution so students may learn this important information prior to entering the field. For example, Michigan State University's School of Social Work (Michigan State University [MSU], n.d.) offers a trauma-informed care certificate program that allows students and human service professionals learn about this important topic. The program discusses trauma across the life span, has an interdisciplinary emphasis, and shares various "techniques to improve their work with children, adolescents, adults, and families who have experienced trauma" (MSU, n.d., para. 1). The University at Buffalo's School of Social Work also offers a certificate program to help "work more effectively with trauma survivors" (University at Buffalo, n.d., para. 1) and offers information on the effects of trauma and various approach to address these effects.

In addition to specific disciplines and higher education institutions offering continuing education and training, other professional groups and organizations also offer trauma training. The Trauma Institute International (n.d.) offers various online certification programs, such as working with individuals and families. They also offer specific training relating to addiction and sex-trafficking and exploitation. The Trauma-Informed Care Training Center (n.d.) offers a certification to understand how adverse childhood experiences (ACEs) affect individuals, how to identify and heal from trauma, and learn how to reduce the risk of secondary trauma.

Some of the continuing education programs are certificate programs while others are certifications. It is important to note that a certificate program is a common format in university continuing education programs and "is a series of training hours on a topic area or treatment

method” (University at Buffalo, n.d., para. 2). The purpose of such a certificate program is to advance skills and knowledge. A certification is a program that is offered and assesses “both knowledge acquired, and competent implementation of the skills and knowledge taught” (University at Buffalo, n.d., para. 3).

Linking Possible Solutions and Barriers to Theoretical Foundations

The field of social work is an ever-changing profession. There is significant evidence that points to the importance of trauma-informed practices. Social work professors need to incorporate the teaching of these interventions to students so they are prepared to meet the needs of their clients who have experienced trauma (Vasquez & Boel-Studt, 2017). Due to the external environment having such a substantial impact on social work education, the University of North Dakota (UND) Social Work Department may incorporate several theoretical models to effectively change in response to external pressures.

Institutional theory is “an approach to understanding organizations and management practices” (Suddaby, 2013, p. 380) and recognizes the role of institutions in shaping and influencing the behavior of individuals and organizations. Institutional theory may be important when considering making changes within the Department because of external factors. Social workers are to abide by the National Association of Social Workers (NASW) Code of Ethics (2023). One of the ethical principles based on social work’s core values is to “strive to increase professional knowledge and skills and apply to practice” (NASW, 2023, para. 31). UND’s Social Work Department is accredited by the Council on Social Work Education (CSWE). While there is

not a mandate to incorporate trauma-informed education into the curriculum, there is a possibility CSWE may require this curriculum addition in the future. Institutional theory is an appropriate theory when considering the external influences from NASW, CSWE, and other stakeholders, but one of the weaknesses of is that it “overstates the power of institutional influences and understates the power of human innovation” (Manning, 2018, p. 122). The current faculty have incredible and diverse practice experience and the professional innovation of the curriculum additions may primarily stem from the expertise within the department and not solely external forces.

With the consideration of external influences such as the NASW and its Code of Ethics (2023), institutional theory discusses the ways in which these larger entities have an impact on higher education (Manning, 2018). Social work and its higher education teachings must “continuously change in response to a variety of forces” (Lunenburg, 2010, p. 2) and to do this, UND’s Social Work Department must address the increasing need to enhance social work education to appropriately address and understand individuals who have experienced trauma.

According to Lunenburg, organizational change is defined as moving “from its present state and toward some desired future state to increase its effectiveness” (2010, p. 1). This statement is critical when making changes to current curricula to prepare effective educators, and to increase the knowledge and preparedness of students. This model is extremely applicable in this case because it addresses both internal and external environments as well as factors that both support and may be resistant to change. When referring to this model, it will

be important to look at the proposed change and gain an understanding of both forces for the change and any resistive factors. Lunenburg (2010) provides an excellent overview of several factors and ways in which to overcome potential barriers. These approaches include: “education and communication, participation and involvement, facilitation and support, negotiation and agreement, manipulation and co-optation, and explicit and implicit coercion” (Lunenburg, 2010, p. 7).

To move forward or towards a desired change, Lewin’s Change Theory (Hussain et al., 2018) suggests a three-stage process: unfreeze, change, and re-freeze. When considering institutional or departmental change, this model utilizes broad steps to implement the change and involve necessary stakeholders. A strength of this theory is the simplicity of the three steps. These are broad and tangible stages in which to progress through change. A potential limitation of this theory is some may find the stages too broad with not enough specific guidance or incremental steps to move towards change.

Under Lewin’s Change Theory (Hussain et al., 2018), the attention turns to department leadership. A leader may turn to Lewin’s first stage of *unfreezing* by identifying the problem and discovering ways in which the problem may be addressed. This is where the faculty may be made aware of the benefits of enhancing the curriculum and producing examples of best practices.

Hussain et al. (2018) note once the group is ready to move into the next stage, the implementation of the *change* may occur. This is where the faculty offer ideas and suggestions

for curriculum, textbooks, methods of assessment, etc. Faculty should see quite a bit of free-flowing communication during this stage. This communication may be top-down and bottom-up. There should also be communication with stakeholders.

In Lewin's (Hussain et al., 2018) final stage, *refreezing* ensures sustainability for both the short- and long-term. This is significant because it is important for the implemented changes to remain in place, even if the leader or another key stakeholder is no longer involved in the project.

An improvement in social work education has widespread benefits and external pressures are in place to implement such additions to the curriculum, but there are several factors that must also be addressed when it comes to resistance to change. Lunenburg (2010) addresses several of these forces and notes the importance of "understand why people resist change" (p. 4). As I considered the faculty, staff, and administration of UND's Social Work Department, the most significant barrier to change is group resistance due to uncertainty. Lunenburg (2010) notes that faculty may resist change "because they are worried about how their work and lives will be affected by the proposed change" (p. 4). This may be a feeling of most of the faculty; therefore, the change may be met with group resistance.

In addition to identifying several ways in which resistance to change may be portrayed, Lunenburg (2010) also discusses ways in which to overcome resistance. As I imagined how the faculty and leadership from the Social Work Department may resist changes to the curriculum, I am confident that with effective communication, clear evidence and education, as well as strong

support and involvement, the Department may successfully move from Lewin's unfreezing stage to the change stage.

Summary

The problem of practice is related to the lack of trauma-informed education at the University of North Dakota (UND) in the Social Work Department. The purpose of the study is to understand how social work programs incorporate education related to trauma and trauma-informed practice into their curricula. Social workers work with various populations across the lifespan and if their clients have experienced trauma, it is important to understand the trauma so they may meet the individual where they are and help them work towards their goals.

To best meet the individual needs of their clients, clinicians will develop a person-centered intervention plan. Social work students are taught various skills and educated on several intervention models, such as person-centered practice, intersectionality theory, and the life course perspective. The literature in this artifact describes these methods and the application of them used in practice.

Education is a common approach to addressing the needs of clients who have experienced trauma. Some professionals learn how to work with victims of trauma by offering continuing education or professional development. Some social work programs also offer specific instruction on trauma. This approach is beneficial to social workers so they may learn this critical information prior to entering the field of practice.

Artifact II: Research Approach Narrative

In Artifact II, I reviewed the purpose and research questions that guided this study in an effort to respond to the problem of practice of social work students not receiving adequate education related to trauma and trauma-informed practice. Artifact II also contained my description and explanation of the selected research approach and design, the limitations, and the setting in which the research took place. In addition, I presented the findings of my study.

Purpose of the Study

The purpose of the study was to understand how social work programs incorporate education related to trauma and trauma-informed practice into their curricula. Offering training and education on trauma-informed approaches benefits future social workers. The training may be in the form of coursework, a minor, or certificate programs. If students understand the trauma their clients have experienced, they are better suited to meet the individual where they are and help them work towards their goals.

Description of the Research Questions

To understand how social work programs incorporate education related to trauma and trauma-informed practice into their curricula, I explored the following research questions:

1. How do social work programs teach and deliver education about trauma and trauma-informed practices?
2. What key concepts are addressed in trauma-related curricula?

3. How do social work programs integrate education on trauma and trauma-informed practice into their curricula?

Research Approach

Existing literature from the National Council for Mental Wellbeing (2022), Centers for Disease Control and Prevention (2022), and Substance Abuse and Mental Health Administration (2022), provide substantial information about trauma and the short- and long-term impacts on individuals but does not sufficiently discuss how social work programs are educating students, what key concepts are addressed in social work education, and how social work programs are integrating trauma and trauma-informed practice into their curricula. Qualitative research is best used when the researcher does “not know the variables” (Creswell & Guetterman, 2019, p. 16) of the problem of practice. This allows exploration of the problem by collecting data “based on words” (Creswell & Gutterman, 2019, p. 16). Another characteristic of qualitative research that benefits this study is “analyzing the data for description and themes using text analysis and interpreting the larger meaning of the findings” (Creswell & Gutterman, 2019, p. 16). I selected a qualitative research approach to understand how social work programs incorporate education related to trauma and trauma-informed practice into their curricula. I selected this method because it allows me to gain a deep and nuanced understanding of how social work programs are educating their students about trauma.

Research Methods

Rapley (2007) discussed many ways in which to approach qualitative research, one of which is document analysis. Rapley described the purpose and value of document analysis and addressed the practical applications of such analysis as do Creswell and Gutterman (2019), stating that, “A valuable source of information in qualitative research can be documents” (p. 223). Researchers may opt for document analysis to construct a meaningful and insightful understanding of their community, and in this case the community comprises of social work programs. Overall, the choice of the qualitative method of document analysis is based on the alignment of the purpose of the study, the nature of the research questions, and the specific context of the study.

Document analysis was best suited for this study because social work syllabi is the most beneficial source of information and data in order to study how trauma education is being delivered to social work students across the nation. This method was most appropriate to analyze and explore emerging themes or categories, which provided in-depth insights into the problem of practice. The following areas provided details of the specific steps I engaged in to complete this qualitative study via document analysis. The areas described below include site and material selection, data collection, data analysis, and trustworthiness.

Site and Material Selection

The Council on Social Work Education (CSWE) is the programmatic accreditor for social work programs. In total, there are 929 baccalaureate- and graduate-level social work academic

programs accredited by CSWE (Council on Social Work Education, 2023). There is at least one program in every state that offers a Bachelor of Social Work (BSW), a Master of Social Work (MSW), and/or a Doctor of Social Work (DSW) degree (Council on Social Work Education, 2023).

The Council on Social Work Education maintains a directory of all social work programs that are “currently accredited or in candidacy or pre-candidacy status” (Council on Social Work Education, 2023, para. 1). The directory includes contact information for each program, including email addresses. Some social work departments include both BSW and MSW programs. I identified each social work department with either an accredited BSW and/or accredited MSW program(s) within its department and added the name of the college/university and contact information on a spreadsheet.

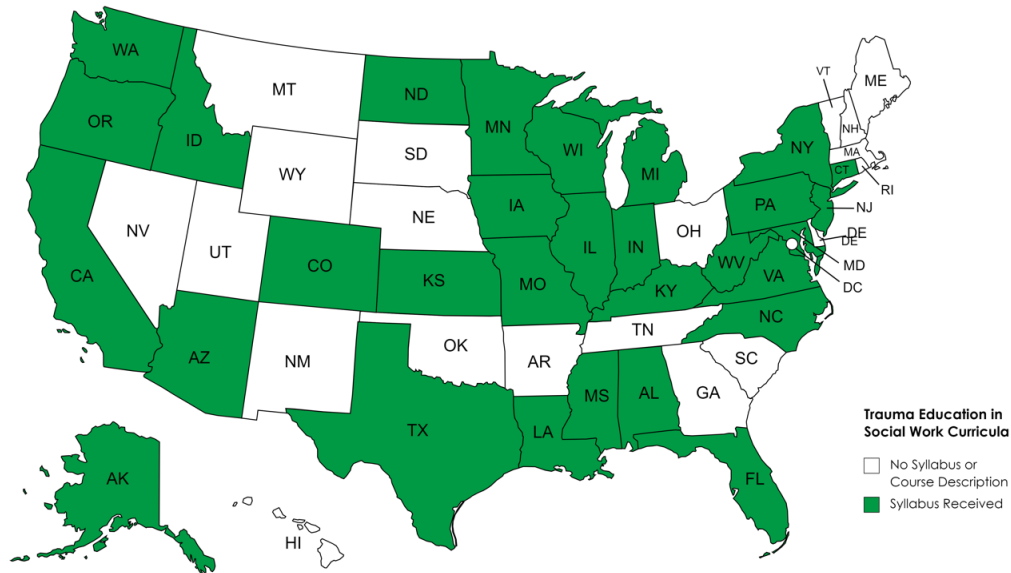
The United States Census Bureau divides the country into four regions and nine geographic divisions (United States Census Bureau, 2022). I set a goal to obtain a syllabus or course description from social work programs at institutions in at least 50% of the states, and at least one from each of the nine national divisions. Obtaining a representative sample nationwide is important to capture more diversity from all geographic regions. This diversity allowed for a more comprehensive understanding of the social work programs and helped avoid bias that may have arisen from a more limited or localized dataset. Furthermore, when analyzing syllabi from across the nation, it is more likely to represent all programs, which made it easier to generalize the findings and make informed decisions.

Data Collection

For this study, I emailed each social work department with either BSW, MSW, or accredited programs. I emailed 575 points of contact inquiring if their program offered trauma education in their social work curricula and if they would be willing to email the course syllabi to me for analysis. I received 133 responses from accredited social work programs; 71% or 94 programs indicated they offer a course on trauma and 29% or 39 do not. Using the spreadsheet that was developed to track the emails I sent requesting syllabi, I documented the responses on the spreadsheet indicating if they offer a trauma course. I documented a receipt date if they emailed a copy of their syllabi to me. Of the 94 programs that offer a course on trauma, I obtained 62 syllabi from accredited social work programs via email in response to my inquiry. Figure 1 illustrates the syllabi originated from 29 different states and covered each of the nine divisions.

Figure 1

Syllabi Analyzed from 29 States



In addition to the name of the college/university, contact information, date of initial email and date if a syllabus was received, other details are included on the spreadsheet. The spreadsheet is first organized alphabetically by state and the geographic region is also populated. Under each state, the specific college or university is listed in alphabetical order. The point of contact name and email address is populated after the name of each social work program. I recorded the date of the initial email inquiry after the point of contact. If a response was received, I documented the date of the response and whether it was via phone or email. The response recorded indicated whether their program offered a course on trauma. The

spreadsheet also included if the course was offered to BSW, MSW, DSW or any combination of social work students. The spreadsheet also indicated whether the course was offered as a stand-alone course or if the material was infused in other social work courses.

All syllabi were obtained via email. When I received a syllabus, I saved the document in a folder and the beginning of the file name was the state's abbreviation, followed by the name of the college/university, and then followed by the course title. Upon review of each syllabus, I continued to populate the spreadsheet with other details including the title of the course, the semester the course is/was offered, the education level of the professor, number of credits (see Figure 4), and if any of the courses are offered online. Furthermore, I highlighted other typical sections of the syllabi such as the number and title(s) of textbook(s), social work competencies or learning objectives, evaluation components and assignments, and topics covered in the course.

Data analysis

Data analysis is a crucial and intricate component of this research study that unveils the information drawn from various data sets. I received 62 syllabi from social work programs across the nation. When I received the syllabi via email, I populated a spreadsheet indicating the date the document was received and whether or not it is a stand-alone trauma course. The spreadsheet was organized in alphabetical order by state and then in alphabetical order by social work program. I also documented other key information such as the number of credits, if it is considered an elective or required course, if it is offered online or on campus, if it is offered

to BSW, MSW, or DSW students, the semester it is offered, the professor's level of education, and the textbook(s) required.

Once the spreadsheet was updated, I saved the document file to my computer. The document was saved with a name that started with the state abbreviation, followed by the name of the college/university, and then the title of the course. The next step in organizing the documents was to upload the document into MAXQDA, which is a qualitative data analysis software program that I used to analyze each syllabus and assign codes to document content. The documents were sorted under the document system in MAXQDA by courses offered to BSW students and courses offered to MSW students. The document name was the same as I saved it to my computer file (state abbreviation, college/university, course title).

Coding is an essential step in qualitative research that involves assigning codes to the data to identify themes or categories. Once the documents were uploaded into MAXQDA, I used codes developed a priori. A priori coding strategy requires the codes to be established and defined before the data collection process (Saldaña, 2013). I drew on my knowledge of concepts and on the theoretical frameworks to guide my coding process. Saldaña discusses the categorization of codes and indicates that pre-existing "theories can inform, if not drive, the initial coding process itself" (2013, p. 13). The codes themselves are not predetermined, they are derived from the literature review and examination of theories for this study. Using this coding strategy allowed for flexibility in the coding process. Flexibility in the coding process was important in qualitative data analysis as it allowed me to adapt to the dynamic and emergent

nature of the data. I was able to recognize and incorporate developing elements and insights into the coding process so the analysis adequately reflected the depth of the data.

I referred to Rapley's (2007) work in the area of document analysis. Based on his work, the next step in data analysis was to code the documents. I started to look for frequency and co-occurrences of key words and phrases in course titles and descriptions. The next step was to identify patterns and determine codes. The codes that emerged from this step were then applied to the course objectives, assignments, and topics. I identified frequency of key words and co-occurrences. Finally, I reviewed the course outlines to determine a general sequence of the material and topics being taught.

Funneling is a process in qualitative data analysis where the data is funneled to identify patterns and categories. I began this process by referring to the codes developed a priori based on the review of the literature and theories as well as my working knowledge as a social worker. After the individual documents were reviewed and patterns emerged, the codes are refined and condensed into more narrow categories. Averill and de Chesnay discuss the "outcome of this process is a new set of distinct codes created by a synthesis and integration of previous coding across all available data" (2015, p. 5). Funneling also involves identifying the "recurrent patterns and linkages between and among codes, emergent across all of the data" (Averill & de Chesnay, 2015, p. 6) where categories are created to address the research questions. For example, as I addressed the research question relating to identifying key concepts that are addressed in trauma-related social work curricula, I started with a pre-determined code using the word

trauma when analyzing course descriptions. After funneling the information derived from this initial analysis, several other codes and patterns emerged which were used to code the other parts of the syllabi such as course topics and assignments.

Researcher Reflection

Research reflection is a vital component of the research process as it allows researchers to critically examine the methods, choices, and experiences encountered during the research endeavor. Since I am a current faculty member in the Social Work Department at UND, it is of utmost importance to examine the data for validity and credibility. It is important to “be self-reflective” (Creswell & Guetterman, 2021, p. 261) about my role in the data collection and interpretation.

I have been a licensed social worker and practiced in the field for over 20 years. I have worked in various settings including a hospital, hospice, National Guard, and state government. I have worked with countless individuals across the lifespan who have survived trauma in their life so I am acutely aware of the need to understand how these experiences can impact a person. In the last two years alone, I have attended several trainings and webinars relating to this important topic. These trainings have been a combination of in-person or online and ranged from two hours to two days. The topics covered included the impacts of trauma, secondary trauma, compassion fatigue, substance use, and behavioral health.

Since I have prior knowledge of the social work curriculum as well as practice experience relating to trauma, using a flexible coding method was important. It allowed me to critically

examine my own assumptions throughout the coding process and reflected and refined the codes on an ongoing basis. Beyond recognizing my own positionality and knowledge in relation coding strategies, reflexivity is an important and ongoing process to address potential bias that may influence the research. Reflexivity is defined by Olmos-Vega et al. as continuous “practices through which researchers self-consciously critique, appraise, and evaluate” (2023, p. 241) their influence or bias on their research. A practice I implemented from the infancy stage of this study was discussing my reflections, insights, and emotions with peers. Seeking peer input allowed for additional insight into the study. I also acknowledged my personal feelings related to the research and reflected on aspects that induced strong emotions and considered how that might influence my data analysis. Finally, “engaging in a personal reflexive exercise can be a powerful learning experience; it can reshape a researcher’s practices” (Olmos-Vega et al., 2023, p. 244). As a result of this study, I uncovered new information and found myself eager to implement some of the course topics into the current courses I teach to social work students.

As a social work professor for 14 years, I have infused my practice experiences into my courses, particularly when I teach *Human Behavior and the Social Environment*, *Social Work Practice with Task and Treatment Groups*, and *Field Education Seminars*. While I incorporate the topic of trauma in these courses, a stand-alone trauma course is necessary to address my research problem of the lack of trauma education in social work curricula.

Trustworthiness

Trustworthiness in data collection and analysis is paramount to ensure the credibility of my study. Since I have been teaching social work students for over a decade and a practicing social worker for over 20 years, I know I must control my bias and one way in which I practiced this is by bracketing. I did so by critically reflecting on my work and recognizing I have a working knowledge of this field. As I analyzed the documents, I acknowledged I knew most of the terminology and language used in the syllabi. There is a column on the data collection spreadsheet where I noted if something is unfamiliar to me or something that stood out to me as unique or novel. To ensure I did not miss important information or skip over something because it seemed familiar, I analyzed each document at least twice. This second look forced me to take my time in my review and analysis and not take any information for granted.

Peer debriefing involves discussing methods, findings, and interpretations with peers who are not involved in the study. This is another way in which I worked to control my bias. I met with the administrative team from the Department of Social Work at UND and reviewed my research with them to enhance trustworthiness. After sharing my research findings, I discussed my final product of a newly developed trauma course to be offered to MSW students at UND. Based on my research findings, each member of the administrative team is in support of the proposed course addition.

Narrative Explaining Results of Inquiry/Findings

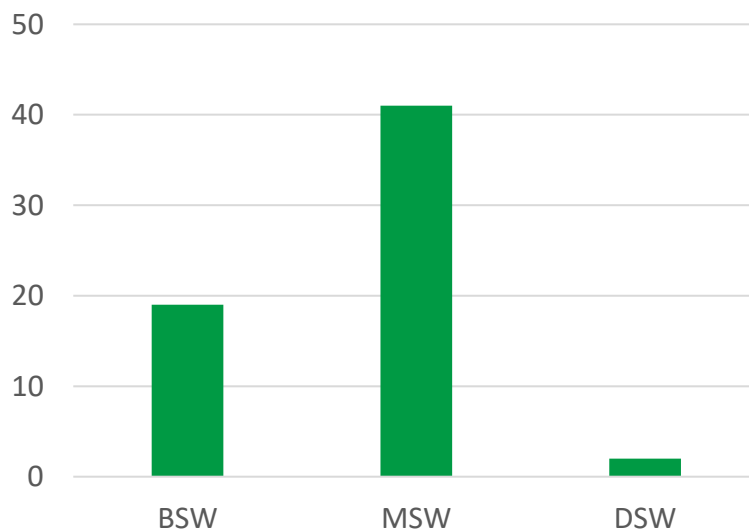
The findings section serves as the cornerstone of the study’s narrative, offering a structured account of the results obtained through the research process. In this section, I presented a comprehensive analysis of the data collected, unveiling patterns and insights that emerged. These findings are the culmination of the data analysis and provided answers to the research questions.

Research Question 1: How do Social Work Programs Teach and Deliver Education About Trauma and Trauma-Informed Practices?

The courses were offered to BSW, MSW, and DSW students (see Figure 2) and were primarily taught by professors with MSW or doctoral degrees (84%).

Figure 2

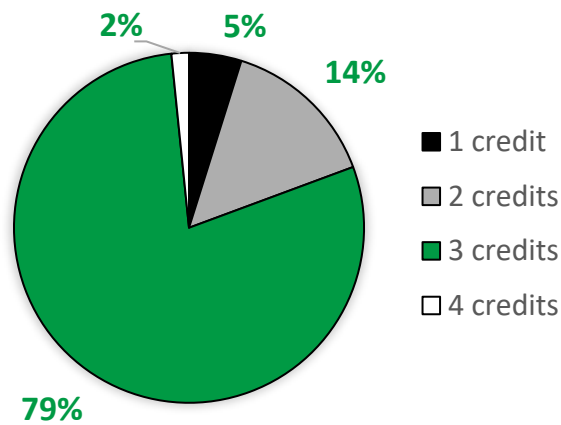
Trauma Course Offered to BSW, MSW, and DSW Students



A majority of the courses (71%) were offered in an online synchronous format with 63% offered online and 37% in person or on campus. Most of the courses (79%) were three credits, however the course credits range from one to four credits (see Figure 3).

Figure 3

Number of Credits



While some courses did not have any required textbooks, others required three or more (see Table 1).

Table 1

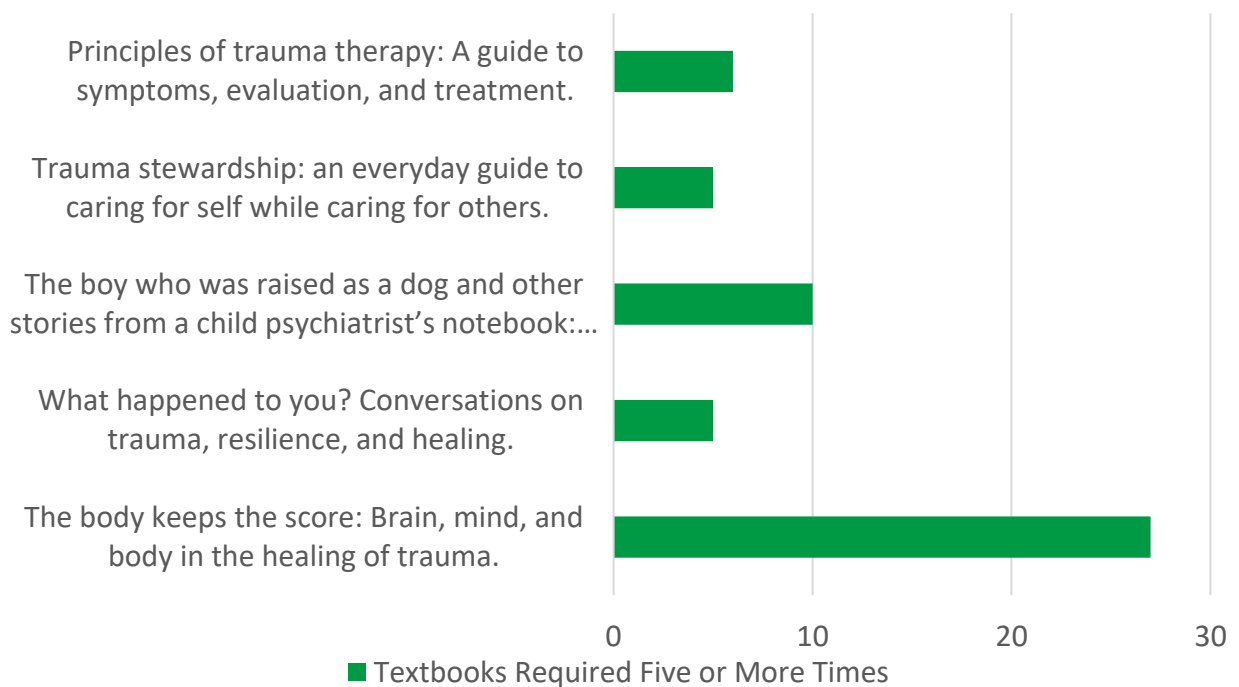
Number of Textbooks Required

Number of Textbooks	BSW	MSW	DSW	Total
0	3	2	0	5
1	6	11	1	18
2	6	18	1	25
3 or more	4	10	0	14

There were 50 different required textbooks across the 62 courses. Of those textbooks, five titles were used in five or more courses (see Figure 4).

Figure 4

Textbook Titles Required Five or More Times



Social work programs teach and deliver education about trauma in a variety of ways. The courses were offered to BSW, MSW, and DSW students and were typically three credits. There was great diversity in the number and titles of textbooks used in these courses, however there were five titles that were used most frequently.

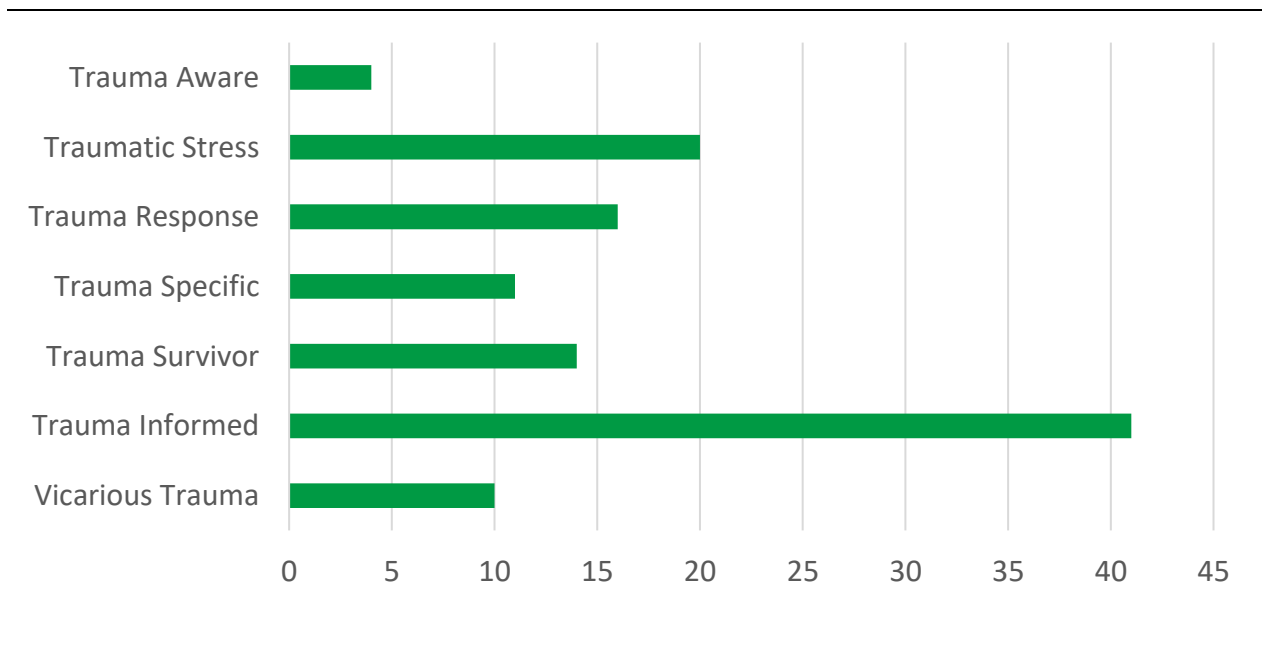
Research Question 2: What Key Concepts are Addressed in Trauma-Related Curricula?

The first step in identifying key concepts that were addressed in trauma-related social work curricula was to look for categories in course descriptions. The results of this data guided the data analysis of the rest of the major components of the documents including course titles, learning objectives, assignments, and topics.

The word “trauma” appeared 280 times in course descriptions and was included in 52 of the course titles. The term trauma was used on average of 62.2 times per syllabus. There were several co-occurrences of the word trauma in course descriptions as outlined in Figure 5.

Figure 5

Co-Occurrences with the Word Trauma in Course Descriptions



In addition to the co-occurrences with the word trauma, I identified other categories within course titles and descriptions that I used to code major components of the syllabi (see Figure 6) including learning objectives, assignments, and topics.

Figure 6

Major Categories Found in Course Titles and Course Descriptions



The categories were applied as codes to the 62 documents under the learning objectives, assignments, and topics (see Table 2).

Table 2*Frequency of Categories Found in Course Learning Objectives, Assignments, and Topics*

Categories	Learning Objectives	Assignments	Topics	Total
Adverse Childhood Experiences	12	13	41	66
Compassion Fatigue	37	0	7	44
Complex Trauma	6	12	15	33
Crisis Intervention	0	3	5	8
Ethics	43	4	4	51
Mindfulness	5	8	11	24
Resilience	24	0	17	41
Self-Care	18	12	30	60
Trauma Aware	1	1	1	3
Trauma-Informed Care	60	28	38	126
Trauma Response	1	0	1	2
Trauma Specific	1	0	0	1
Traumatic Stress	20	11	26	57
Trauma Survivor	10	0	10	20
Trauma Victim	10	0	8	18
Vicarious Trauma	23	6	25	54

After analyzing the categories, the course topics that were most prevalent were adverse childhood experiences, trauma-informed care, traumatic stress, and self-care. I found that the key concepts in learning objectives included trauma-informed care, ethics, compassion fatigue,

resilience, and vicarious trauma. The major assignments focused on trauma-informed care, adverse childhood experiences, complex trauma, and self-care.

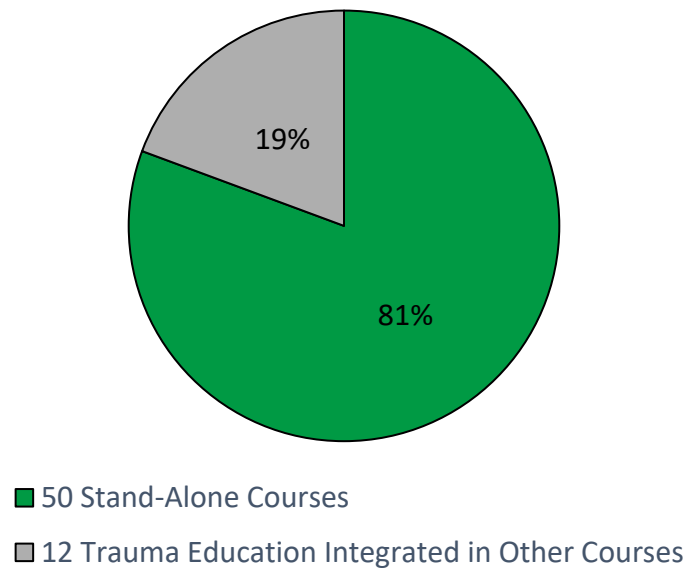
After identifying and coding categories, I analyzed the data for sequencing as related to assignments. This analysis helped me understand how the course topics were logically organized and delivered. The trauma-specific courses offered an overview or definitions of trauma early in the course outlines, followed by trauma assessment and interventions. The topic of self-care was discussed in 48% of the classes but there was not a clear pattern to when it is offered over the course of the semester.

Research Question 3: How Do Social Work Programs Integrate Education on Trauma and Trauma-Informed Practice Into Their Curricula?

Most of the programs (81%) offered a stand-alone course about the topic of trauma (see Figure 7) as opposed to the topic of trauma integrated in other courses. The courses were offered to BSW students (31%), MSW students (66%), and DSW students (3%).

Figure 7

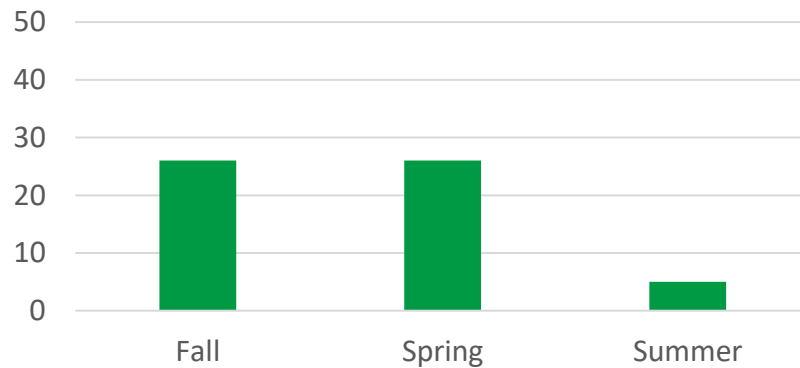
Stand-Alone Trauma Course



Many courses (45%) explicitly stated it was an elective course offered to students. It was interesting to see the analysis of the documents revealed an even distribution of the course offered in the fall and spring semesters (see Figure 8) while only 8% of the courses were offered during the summer semester.

Figure 8

Semester the Course is Offered



If the topic of trauma was not taught in a stand-alone course, my analysis found that the topic was integrated in other courses. Of the 12 syllabi I analyzed, I found the word trauma appeared in two of the course titles. Trauma appeared in 50% of the course descriptions. The courses not specifically addressing trauma were primarily offered to MSW students (75%).

Upon reviewing all 62 syllabi, I learned there are 50 different required textbooks across the courses. Of those textbooks, five titles were required more than others (see Figure 4). When I analyzed the course syllabi that are not stand-alone trauma courses, six of them required at least one of these five textbooks.

After analyzing the 12 courses that integrate the topic of trauma in a non-trauma social work class, I identified several categories regarding the specific topics that were delivered in

these courses (see Table 3). The most common topics discussed included trauma, self-care, crisis intervention, and trauma-informed care.

Table 3

Categories from 12 Non-Trauma Social Work Courses

Course Topics	% of Courses in Which Topic Appeared
Compassion Fatigue	50
Crisis Intervention	58
Mindfulness	33
Self-Care	92
Trauma	100
Trauma-Informed Care	58

Social work programs across the nation integrate education on trauma in their curricula either explicitly or implicitly. Explicit integration of trauma education is where the topic is clearly defined and most (81%) of the documents I reviewed were those of stand-alone trauma courses offered to MSW students. Implicit integration is more indirect, and the topic of trauma was embedded in other social work courses. In the documents I analyzed where the topic of trauma was implicit, the word trauma appeared in half of the course descriptions. Some (33%) of the courses utilized some of the same textbooks as the stand-alone trauma courses and were teaching some of the same topics.

Summary of Findings

The results of this study obtained through document analysis were very useful in providing insight to how social work programs teach and deliver education about trauma, what key concepts were addressed, and how it was integrated into their curricula. Most of the courses were stand-alone, elective courses offered to MSW students in an online, synchronous format. There were 50 different textbooks required in these 62 courses, with five titles used most frequently. The key concepts in learning objectives, major assignments, and topics included trauma-informed care, ethics, adverse childhood experiences, complex trauma, and self-care.

Complex trauma refers to multiple or chronic traumatic events that have enduring and cumulative effects on an individual. Complex trauma and intersectionality theory both recognize the importance of considering various factors when working with individuals. Complex trauma, along with the other major course topics, such as adverse childhood experiences, may be present and have an impact at any time during an individual's lifespan. The life course perspective is a theoretic framework acknowledging that individuals are influenced by historical events occurring throughout their lifetime and notes that traumatic events can have short- and long-term effects on an individual.

Getz noted that, "over the years, social work programs have infused some elements of trauma education, but the need for greater emphasis on trauma training has become evident" (2013, p. 18). According to Masiriri (2008) most behavioral health treatment is provided by

social workers with a master's degree. Therefore, upon reviewing 62 syllabi from social work programs across the country and after careful consideration, it is my proposal to implement a stand-alone trauma course in the Social Work Department at UND offered to MSW students. The course draws upon the results of the document analysis to develop a 16-week course as described in Artifact III.

Artifact III: Implementation of Solution

After thoroughly analyzing 62 syllabi from social work programs across the country, it was my proposal to implement a stand-alone trauma course in the Social Work Department at the University of North Dakota (UND) to be offered to MSW students. This artifact contained an overview of the proposed course as the final product of this dissertation. In addition, I included a narrative about how this course addressed the problem of practice.

Final Product

After the document analysis was complete, I discussed my findings with members of the Social Work Department at UND. All five members of the administrative team were in support of the addition of a trauma course. The BSW Program Director, Barb Kitko stated, “Trauma-informed care is foundational knowledge our students need to have. It considers the person in front of you and starting where they are at. The goal is not to re-traumatize” (personal communication, October 20, 2023). The Online Social Work Program Director, Stephanie Homstad stated, “We need to be trauma-informed just like agencies are. Many students come into the program with ACEs scores and we need to prepare the students for the fact they will be faced with trauma in the field and exposed to vicarious trauma” (personal communication, October 20, 2023). Dr. Isaac Karikari, MSW Program Director pointed out the importance of the “level of awareness and having it infused in the curriculum can help faculty support students” (personal communication, October 20, 2023). He continued, “We find students who are experiencing multiple stressors across multiple systems (school, family, employment) and need

support” (Karikari, I., personal communication, October 20, 2023). Bruce Reeves, Field Director talked about the importance of students being trauma-informed before entering their field placements. He said, “entering field with a trauma-informed lens is of critical importance as students are working with people who are and who have experienced trauma” (personal communication, October 20, 2023). Finally, the Social Work Department Chair, Dr. Bret Weber expressed his support for the additional course and noted, “our students need to have an understanding of this important topic so they are set up for success as they enter the field and work with clients who have experienced some sort of trauma in their lives” (personal communication, October 20, 2023).

The resounding support from the administrative team in the Social Work Department revealed they are moving from the *unfreezing* stage and entering the *change* stage according to Lewin’s (Hussain et al., 2018) Change Theory. In the *unfreezing* stage, I shared with the team about the need for trauma education in our social work curriculum. This strategy of bringing attention to the issue and communicating potential solutions are traits of this first stage. The actual change or implementation of a new course occurs during the second or *change* stage. Continued communication, support and leadership are crucial during this stage to manage any potential resistance and facilitate a smooth transition. In Lewin’s (Hussain et al., 2018) final stage, *refreezing* ensures short- and long-term sustainability. To move into this stage, the next step will be to forward the course proposal to UND’s College of Nursing and Professional Disciplines (CNPD) Curriculum Committee. The proposal will include the course title and

number, number of credit hours, BSW or MSW, course description, the rationale for the proposal, course objectives and outcomes, course topics, a copy of the syllabus, and the resources allocated to teach the course. Once the CNPD Curriculum Committee approves the proposal, it will be routed to CNPD's Dean and then onto the University Curriculum Committee. Once approved by that committee, it will be forwarded to the University Senate, the Vice President of Academic Affairs and finally to the Registrar's office.

The MSW elective course, *Understanding Trauma in Social Work Practice*, will be a three-credit course taught by a professor with at least an MSW degree. It will be offered online in a synchronous format. This is determined based on discussions with the Social Work Department administrative team and the data collected from the document analysis where 73% of trauma courses were three credits (see Figure 3) and 66% were offered to MSW students (see Figure 2).

Course Description and Objectives

Following the document analysis and in response to the problem of the lack of trauma-informed education in the Social Work Department, the course description and objectives (see Appendix A) provided an overview of the course, the intended outcomes, and reflected the implementation of social work competencies. The CSWE uses Educational Policy and Accreditation Standards (EPAS) when reviewing programs for accreditation and these standards consists of nine social work competencies. Accredited social work programs incorporate these competencies in their curricula when determining their specific course learning objectives. This course highlights four of the most applicable competencies to reflect the learning objectives.

Embedded within the course syllabus (see Appendix A) there are the four social work competencies that are implemented in this course, along with the assignments aligned with each competency.

Course Textbooks

There are 50 different textbooks that were required across the 62 courses and of the textbooks, five titles were used in five or more courses (see Figure 4). After identifying the five most frequently used texts, I reviewed each of them to determine if the scope of the textbooks was in alignment with the overall course structure of the MSW elective course, *Understanding Trauma in Social Work Practice*. I determined there was not one singular text that supports all course objectives so more than one textbook was needed. After a review of the learning objectives and course outcomes, I selected three titles from the list of the five most frequently used textbooks. One text addressed practical approaches of self-care, while another addressed how the mind and body are connected and impacted by trauma. In a final selection, the emphasis extended beyond the effects of trauma and encompassed post-traumatic healing and resilience.

Based on the frequency and content of these books, this course will require the following three textbooks: *Trauma stewardship: an everyday guide to caring for self while caring for others* (Lipsky & Burk, 2017); *What happened to you: Conversations on trauma, resilience, and healing* (Perry & Winfrey, 2021); and *The body keeps the score: Brain, mind, and body in the healing of trauma* (Van der Kolk, 2015).

Course Topics

Trauma impacts people across the lifespan and from all backgrounds and social workers may encounter people who have experienced trauma in any practice setting. The life course perspective theory suggests that life experiences can have a lasting effect on a person and their trajectories. Individuals may experience trauma differently based on their social identities. Intersectionality theory underscores how these intersecting identities can compound the impact of traumatic events. There were so many pertinent topics relating to trauma that were taught in the 62 course syllabi I analyzed. Some of the most frequent topics are found in the 16-week course outline (see Appendices A and B). These topics include defining and an introduction to trauma, instruction on adverse childhood experiences (ACEs), interventions such as mindfulness and regulation, and self-care. As anticipated, the analysis of the documents revealed a number of topics that educated students about what individuals may experience across different stages of life. The life course perspective is a dynamic framework that may be used when assessing the complexity of individual lives across the life course.

Introduction to Trauma

It is important to examine how any type of trauma impacts a person so social workers are prepared to meet their needs. Social work students are taught to work in a variety of settings with diverse populations and trauma can impact any person across their life course. The theoretical framework of the life course perspective points out the importance of understanding how life events can shape a person's life course trajectory and how interventions are to be

developed to support positive individual needs in the service delivery. “The need to address trauma is increasingly viewed as an important component of effective behavioral health service delivery” (SAMHSA’s Trauma and Justice Strategic Initiative, 2014, p. 2). Therefore, it is essential for social work students to have a foundational knowledge of trauma and its effects. This course topic will discuss the definition and key principles of trauma and address various types of traumatic experiences. Appendix C offers a sample of a slide that may be shared with students during this topic discussion.

Adverse Childhood Experiences (ACEs)

When a child experiences a traumatic event, it could “have lasting, negative effects on health, wellbeing in childhood and life opportunities, such as education and job potential, well into adulthood” (Center for Disease Control and Prevention, 2023a, para. 11). Learning about ACEs and its impacts will prepare social work students to work with children who are experiencing adversity as well as adults who have one or more ACEs score. The life course perspective is a theoretical framework that recognizes individuals are shaped by historical events occurring during their lifetime. If social workers are properly educated about ACEs, their clients “can successfully process adverse events and go on to thrive” (Crisis Prevention Institute, 2021a, para. 7). Furthermore, “ACEs and their associated harms are preventable” (Centers for Disease Control and Prevention, 2023b, para. 1). Gaining awareness and understanding of ACEs will help social workers prevent adverse experiences in their communities. See Appendix D for sample slides regarding ACEs.

Interventions

When social workers assist clients to meet their goals following traumatic experience(s), there are a number of interventions and strategies that may be used. Mindfulness is “a psychological state of awareness” (Davis, 2012, para. 6) and participating in mindfulness activities may reduce stress, increase focus, and “contribute to effective emotion-regulation strategies” (Davis, 2012, para. 8). Educating students about various mindfulness activities help them work with clients who are experiencing trauma so they may implement these practices in their lives. Moreover, mindfulness is a practice that may also benefit social workers as a self-care practice. See Appendix C for a sample slide on the topic of mindfulness that may be used to educate students.

Self-Care

According to the NASW Code of Ethics (2023), “Professional self-care is paramount for competent and ethical social work practice” (National Association of Social Workers, 2023, para. 16). Self-care practices will “improve both your physical health and mental health” (National Institute of Mental Health, n.d., para. 2). Educating students about the benefits and various practices help them achieve balance with their personal lives, school, and work. Implementing self-care practices as a student help them develop healthy habits as they enter the profession. See Appendix F for sample slides covering the topic of self-care.

Course Assignments and Evaluation of Course Objectives

In addition to the number of topics covered in these 62 courses, there were also purposeful assignments for students to complete that closely align with the course topics and objectives. I identified the assignments to be included in the course and they are described in this section. The course outline in Appendix A suggests the timeline for when each assignment should be submitted based on the topics covered. The assignments also serve as an evaluation of the course objectives and the alignment may be found in Appendix B. The grading rubrics for each assignment may be found in Appendices G - K.

Self-Care Plan and Journal

Students will develop a self-care plan that addresses physical, emotional, social, and spiritual care. Students will address their self-care plan throughout the semester and submit a written journal that addresses how their self-care plan has been implemented. See grading rubric in Appendix G.

Crisis Intervention Assessment Assignment

Students will conduct a crisis intervention assessment and create a treatment plan in the form of a progress note based on a case study listed in Blackboard. Students will provide a brief summary of the case study and identify risk and protective factors. Intersectionality helps identify specific risk factors for trauma as well as factors that contribute to resilience. Using a person-centered approach, students will critically evaluate and indicate appropriate assessments tools. Utilizing the person-centered theoretical framework emphasizes the

importance of understanding individuals and their unique experiences. Students will develop a treatment plan that notes potential actions steps that supports the client goals. Through the person-centered approach, social workers empathically understand their clients' perspectives and strive to foster a positive therapeutic outcome toward the clients' expressed goals. Finally, students will be assigned a partner and share their intervention assessment and will offer feedback to their partner. See grading rubric in Appendix H.

Mindfulness Group Activity

Students will be divided into groups and will select a mindfulness exercise to share with the class. Students will provide a few minutes of education to the class on what they will be teaching the class and then lead class participation in the mindfulness activity. See grading rubric in Appendix I.

Current Event Reaction Paper

Students will review a current or recent (within the last 30 days) traumatic event within their community, state, or beyond and provide a reaction. The introduction will include a short summary of the current event. Students will develop a central idea or thesis statement and support it with specific evidence. The reaction paper will include students' reaction(s) and a conclusion that ties the traumatic event to the concepts learned in class and why it is important to the social work profession. Students will address intersectionality by recognizing the interconnected nature of social issues. Intersectionality highlights how systemic inequalities

contribute to the prevalence and impact of traumatic experiences within certain communities.

This paper must be written in APA format. See grading rubric in Appendix J.

Research Presentation

Students will select a topic related to trauma such as child abuse, sexual abuse, intimate partner violence, elder abuse, military-related trauma, natural disaster, gun violence, historical trauma, sudden death, medical trauma, bullying, community violence, etc. Adopting an intersectional lens is crucial for capturing the diversity of experiences within different populations. Students will research the trauma-related topic, support with data, and why it is important for social workers to understand the issues surrounding the topic. A minimum of five professional resources are required and are to be listed in APA format on the last slide of the presentation. See grading rubric in Appendix K.

Summary

After analyzing 62 syllabi from social work programs across the country, my final product includes a proposed stand-alone trauma course, *Understanding Trauma in Social Work Practice*. The course will be offered to MSW students in the Social Work Department at UND and will be a three-credit elective course. The course description and objectives (see Appendix A) serve as the foundation for the course. This artifact also included the course textbooks I recommend using for the course as well as the topics to be covered. In a final section, the course assignments and evaluation of the course objectives are described, and the grading rubrics may be found in Appendices G - K.

Conclusion

The problem of practice of the lack of trauma education in social work curricula has been addressed by providing an overview of the problem, supported by data. The literature review touched on some of the models used in undergraduate and graduate social work education. Furthermore, some of the common approaches and links to possible solutions to address the problem were provided. Additionally, the overall purpose of the study was explained and included the research questions, approach, and results. The final section proposed a solution to address the problem of practice. This final product details a new MSW course and syllabus that includes the course description and objectives, course outline, textbook, topics, and assignments.

Through the data collection process, syllabi were received from 29 different states and across all nine geographic divisions of the United States, which allowed for generalizability of the study findings. Moreover, obtaining a representative sample from all geographic regions helped me avoid bias as opposed to collecting syllabi only from surrounding states or a smaller sample size. The data collection process also allowed me to make several connections across the nations' social work programs. These networking opportunities were valuable in the exchange of knowledge. A consideration for future research is to allow more time to discuss information and ideas. I responded to each of the 133 emails I received, regardless of whether they shared a syllabus with me. Many requested to set up a follow-up meeting to have further discussion

about educating social work students about trauma. This was an unintended positive consequence of emailing 575 social work programs.

The research successfully allowed me to analyze how and what other social work programs teach and deliver education about trauma. The key concepts were highlighted and how they integrated this education into their curricula. The results supported my effort to address the problem of lack of trauma education in the social work curriculum at UND and develop an elective course for MSW students.

Limitations

Data collection was not without challenges and this reflection served as a tool for personal and professional growth for future research endeavors. The first challenge I faced was to initially populate the names of the programs and contact information. In the future, I would reach out to find out if there is an existing listserv to make the initial process not as laborious. While I was content with the number of syllabi I received to analyze, a way to increase this number would be to send follow-up emails from the programs in which I did not receive responses.

Suggestions for Future Inquiry/Next Steps in Research

This has been an exciting topic to research and since the data shows how trauma impacts individuals, families, groups, communities, and organizations, there is more research to be done. Social work students need to be prepared to serve their clients who have experienced trauma and educators need to set students up for success by teaching them about trauma and

how to intervene. Since there is still more to learn about trauma and its effects, a future consideration would be to develop curriculum material to embed in social work research courses. One aspect of trauma-informed practice is to “avoid re-traumatization and minimize the potential for further harm to individuals” (Goodwin & Tiderington, 2022, p. 144). This same principle should be applied to research involving human subjects and would be beneficial to social work curricula. Goodwin and Tiderington offer excellent topics that could be added to social work courses including safety; trustworthiness; peer support, empowerment; and cultural, historical, and gender issues (2022).

Ongoing assessment is a critical component in higher education and conducting an assessment of the new course, *Understanding Trauma in Social Work Practice* is no exception. The School of Social Work at the University of Buffalo in New York offered “a greater learning opportunity for students to become proficient in using trauma-informed care approaches” (Wilson & Nochajski, 2016, p. 589) and conducted an evaluation of the efforts. I would recommend conducting a similar study to evaluate student learning and make necessary adjustments to the course.

A quote commonly associated with Henry Ford states, “if you always do what you’ve always done, you’ll always get what you’ve always got” (Henry Ford, as cited in Drake, J. 2008). The textbook recommendation for the new course is based on the titles most frequently used in current trauma education. However, if the trauma-related education in social work curricula is insufficient, a suggestion for future consideration is that of the textbook choices. If social work

programs continue to use the same textbooks and content, the results will continue to remain the same. Therefore, it is important to identify and utilize the most up-to-date materials so students are exposed to the latest information, research, and advancements relating to trauma.

A final recommendation is to broaden the audience that may receive trauma education. After the initial implementation of the MSW course, I suggest offering a course that may be opened up to students from other programs across campus such as early childhood, elementary, middle, secondary, and higher education; nutrition and dietetics; physical therapy; occupational therapy; athletic training; nursing; criminal justice; and counseling. A long-term goal may be to offer a certificate program to non-degree seeking students.

Appendix A: Understanding Trauma in Social Work Practice Course Syllabus

Course Syllabus: SWK ###: Understanding Trauma in Social Work Practice
Fall 2024: Tuesdays 6:00 – 8:30 pm CST: Zoom Link: <https://und.zoom.us/#####>

UND Land Acknowledgement Statement

Today, the University of North Dakota rests on the ancestral lands of the Friesonia and Red Lake Bands of Ojibwe and the Dakota Oyate - presently existing as composite parts of the Red Lake, Turtle Mountain, White Earth Bands, and the Dakota Tribes of Minnesota and North Dakota. We acknowledge the people who resided here for generations and recognize that the spirit of the Ojibwe and Oyate people permeates this land. As a university community, we will continue to build upon our relations with the First Nations of the State of North Dakota - the Mandan, Hidatsa, and Arikara Nations, Sisseton-Wakarusa Oyate Nation, Spirit Lake Nation, Standing Rock Sioux Tribe, and Turtle Mountain Band of Chippewa Indians.

Professor Contact Information

Jennifer Schlinger, LMSW
 Assistant Professor
 Phone: (701) 391-6815
 Email: jennifer.schlinger@und.edu
 Office Location: via Zoom or phone
 Office Hours: by appointment via phone or email

Course Description and Requisites

SWK ###: Understanding Trauma in Social Work Practice: 3 credits. Prerequisite: SWK 527 (Advanced Generalist Human Behavior and the Social Environment I) or consent of instructor.

Relevance and Relationship to Curriculum

SWK ### (Understanding Trauma in Social Work Practice) This course will provide basic, foundational knowledge and awareness of trauma. Exploration of factors known to promote resilience and self-care will be examined and emphasized throughout the course.

Course Learning Objectives

At the end of this course, students should be able to:

- Identify trauma and determine appropriate assessment tools
- Develop a self-care plan and summarize a mindfulness activity
- Illustrate examples and synthesize literature relating to trauma

Required Readings

Perry, B. D. & Winfrey, O. (2021). *What happened to you? Conversations on trauma, resilience, and healing*. New York, NY.
 van der Kolk, B. (2015). *The body keeps the score: Brain, mind and body in the healing of trauma*. Penguin Books.
 van Demoot Lipsky, L. (2009). *Trauma stewardship: An everyday guide to caring for self while caring for others*. Berrett-Koehler.

Additional readings assigned and other supplementary resources will be posted in Blackboard.

Social Work Competency Descriptions

Course Competency	Council on Social Work Education (CSWE) Educational Policy and Accreditation Standards (EPAS) Social Work Competency Description	Assignment(s)
Competency I: Demonstrate	Social workers understand the value base of the profession and its ethical standards, as well as relevant policies, laws, and regulations that	Self-Care Plan and Journal

<p>Ethical and Professional Behavior</p>	<p>may affect practice with individuals, families, groups, organizations, and communities. Social workers understand that ethics are informed by principles of human rights and apply them toward realizing social, racial, economic, and environmental justice in their practice. Social workers understand frameworks of ethical decision making and apply principles of critical thinking to those frameworks in practice, research, and policy arenas. Social workers recognize and manage personal values and the distinction between personal and professional values. Social workers understand how their evolving worldview, personal experiences, and affective reactions influence their professional judgment and behavior. Social workers take measures to care for themselves professionally and personally, understanding that self-care is paramount for competent and ethical social work practice. Social workers use rights-based, antiracist, and anti-oppressive lenses to understand and critique the profession's history, mission, roles, and responsibilities and recognize historical and current contexts of oppression in shaping institutions and social work. Social workers understand the role of other professionals when engaged in interprofessional practice. Social workers recognize the importance of lifelong learning and are committed to continually updating their skills to ensure relevant and effective practice. Social workers understand digital technology and the ethical use of technology in social work practice.</p> <p>Social workers:</p> <ul style="list-style-type: none"> a. make ethical decisions by applying the standards of the National Association of Social Workers Code of Ethics, relevant laws and regulations, models for ethical decision making, ethical conduct of research, and additional codes of ethics within the profession as appropriate to the context; b. demonstrate professional behavior; appearance; and oral, written, and electronic communication; c. use technology ethically and appropriately to facilitate practice outcomes; and d. use supervision and consultation to guide professional judgment and behavior. 	<p>Crisis Intervention Assessment Assignment</p> <p>Mindfulness Group Activity</p> <p>Current Event</p> <p>Research Presentation</p>
<p>Competency 3: Engage Anti-Racism, Diversity, Equity, and Inclusion (ADEI) in Practice</p>	<p>Social workers understand how racism and oppression shape human experiences and how these two constructs influence practice at the individual, family, group, organizational, and community levels and in policy and research. Social workers understand the pervasive impact of White supremacy and privilege and use their knowledge, awareness, and skills to engage in anti-racist practice. Social workers understand how diversity and intersectionality shape human experiences and identity development and affect equity and inclusion. The dimensions of diversity are understood as the intersectionality of factors including but not limited to age, caste, class, color, culture, disability and ability, ethnicity, gender, gender identity and expression, generational status, immigration status, legal status, marital status, political ideology, race, nationality, religion and spirituality, sex, sexual orientation, and tribal sovereign status. Social workers understand that this intersectionality means that a person's life experiences may include oppression, poverty, marginalization, and alienation as well as privilege and power. Social workers understand the societal and historical roots of social and racial injustices and the forms and mechanisms of oppression and discrimination. Social workers understand cultural humility and</p>	<p>Crisis Intervention Assessment Assignment</p> <p>Mindfulness Group Activity</p> <p>Current Event</p> <p>Research Presentation</p>

	<p>recognize the extent to which a culture's structures and values, including social, economic, political, racial, technological, and cultural exclusions, may create privilege and power resulting in systemic oppression.</p> <p>Social workers:</p> <ol style="list-style-type: none"> demonstrate anti-racist and anti-oppressive social work practice at the individual, family, group, organizational, community, research, and policy levels; and demonstrate cultural humility by applying critical reflection, self-awareness, and self-regulation to manage the influence of bias, power, privilege, and values in working with clients and constituencies, acknowledging them as experts of their own lived experiences. 	
<p>Competency 4: Engage in Practice-Informed Research and Research-Informed Practice</p>	<p>Social workers use ethical, culturally informed, anti-racist, and anti-oppressive approaches in conducting research and building knowledge. Social workers use research to inform their practice decision making and articulate how their practice experience informs research and evaluation decisions. Social workers critically evaluate and critique current, empirically sound research to inform decisions pertaining to practice, policy, and programs. Social workers understand the inherent bias in research and evaluate design, analysis, and interpretation using an anti-racist and anti-oppressive perspective. Social workers know how to access, critique, and synthesize the current literature to develop appropriate research questions and hypotheses. Social workers demonstrate knowledge and skills regarding qualitative and quantitative research methods and analysis, and they interpret data derived from these methods. Social workers demonstrate knowledge about methods to assess reliability and validity in social work research. Social workers can articulate and share research findings in ways that are usable to a variety of clients and constituencies. Social workers understand the value of evidence derived from interprofessional and diverse research methods, approaches, and sources.</p> <p>Social workers:</p> <ol style="list-style-type: none"> apply research findings to inform and improve practice, policy, and programs; and identify ethical, culturally informed, anti-racist, and anti-oppressive strategies that address inherent biases for use in quantitative and qualitative research methods to advance the purposes of social work. 	<p>Crisis Intervention Assessment Assignment</p> <p>Mindfulness Group Activity</p> <p>Current Event</p> <p>Research Presentation</p>
<p>Competency 7: Assess Individuals, Families, Groups, Organizations and Communities</p>	<p>Social workers understand that assessment is an ongoing component of the dynamic and interactive process of social work practice. Social workers understand theories of human behavior and person-in-environment, as well as interprofessional conceptual frameworks, and they critically evaluate and apply this knowledge in culturally responsive assessment with clients and constituencies, including individuals, families, groups, organizations, and communities. Assessment involves a collaborative process of defining presenting challenges and identifying strengths with individuals, families, groups, organizations, and communities to develop a mutually agreed-upon plan. Social workers recognize the implications of the larger practice context in the assessment process and use interprofessional collaboration in this process. Social workers are self-reflective and understand how bias, power, privilege, and their personal values and experiences may affect their assessment and decision making.</p> <p>Social workers:</p> <ol style="list-style-type: none"> apply theories of human behavior and person-in-environment, as well 	<p>Crisis Intervention Assessment Assignment</p> <p>Current Event</p> <p>Research Presentation</p>

	as other culturally responsive and interprofessional conceptual frameworks, when assessing clients and constituencies; and b. demonstrate respect for client self-determination during the assessment process by collaborating with clients and constituencies in developing a mutually agreed-upon plan.	
--	--	--

Assessments and Assignments

This course is made up of a series of assignments and assessments to assist you in achieving the course learning objectives and competencies.

Course Evaluation and Grading

90% - 100%	A (Excellence)
80% - 89%	B (Superior)
70% - 79%	C (Average)
60% - 69%	D (Passing but low)
0% - 59%	F (Failure)
Assigned only to the student who has been in attendance and has done satisfactory work up to a time within four weeks of the close of the semester, including the examination period, and whose work is incomplete for reasons satisfactory to his or her instructor.	Incomplete

Assignments for the Course

Self-Care Plan. 10% of the grade

According to the NASW Code of Ethics, (2022) "Professional self-care is paramount for competent and ethical social work practice". Students will develop a self-care plan that addresses physical, emotional, social, and spiritual care. Students will address their self-care plan throughout the semester and submit a written journal that addresses how their self-care plan has been implemented.

Crisis Intervention Assessment Assignment 20% of the grade

Students will create a treatment plan in the form of a progress note based on a case study listed in Blackboard. Students will provide a brief summary of the case study and identify risk and protective factors. Using a person-centered approach, students will critically evaluate and indicate appropriate assessments tools. Students will develop a treatment plan that notes potential actions steps that supports the client goals. Finally, students will be assigned a partner and share their intervention assessment and will offer feedback to their partner.

Mindfulness Group Activity. 10% of the grade

Students will be divided into groups and will select a mindfulness exercise to share with the class. Students will provide a few minutes of education to the class on what they will be teaching the class and then lead class participation in the mindfulness activity.

Current Event Reaction Paper. 20% of the grade

Students will review a current or recent (within the last 30 days) traumatic event within their community, state, or beyond and provide a reaction. The introduction will include a short summary of the current event. Students will develop a central idea or thesis statement and support it with specific evidence. The reaction paper will include students' reaction(s) and a conclusion that ties the traumatic event to the concepts learned in class and why it is important to the social work profession. This paper must be written in APA format.

Research Presentation. 40% of the grade

Students will select a topic related to trauma such as child abuse, sexual abuse, intimate partner violence, elder abuse, military-related trauma, natural disaster, gun violence, historical trauma, sudden death, medical trauma, bullying, community violence, etc. Students will research the trauma-related topic, support with data, and why it is important for social workers to understand the issues surrounding the topic. A minimum of five professional resources are required and are to be listed in APA format on the last slide of the presentation.

Course Schedule

Subject to change to promote student learning.

Week #	Weekly Topic/Content/Activities	Readings	Learning Objectives	Assessment/Assignments
Week 1	<ul style="list-style-type: none"> Introduction to Trauma "What is Trauma?": https://www.youtube.com/watch?v=BJfmfkDQb14 Types of Traumatic Experiences Understanding Trauma Stewardship Self-Care NASW Code of Ethics: https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English 	"The Body Keeps the Score" Part 1 "Trauma Stewardship" Part 1	Identify trauma and determine appropriate assessment tools	
Week 2	<ul style="list-style-type: none"> Brain-Body Connections of Trauma Hierarchical Organization of the Brain History of Self-Care: https://isfglobal.org/what-is-self-care/a-brief-history-of-self-care/ Developing Self-Care Plan: https://socialwork.buffalo.edu/resources/self-care-starter-kit/developing-your-self-care-plan.html 	"The Body Keeps the Score" Part 2	Develop a self-care plan and summarize a mindfulness activity	
Week 3	<ul style="list-style-type: none"> The Minds of Children Adverse Childhood Experiences (ACEs) Screening for ACEs: https://www.camp.uscourts.gov/forms/ACEs_Assessment.pdf 	"The Body Keeps the Score" Part 3	Identify trauma and determine appropriate assessment tools	Self-Care Plan Due
Week 4	<ul style="list-style-type: none"> The Imprint of Trauma Crisis Intervention Trauma Exposure Response "Drowning in Empathy: The Cost of Vicarious Trauma": https://www.youtube.com/watch?v=ZsaorjIoLYc 	"The Body Keeps the Score" Part 4 "Trauma Stewardship" Part 2	Identify trauma and determine appropriate assessment tools	
Week 5	<ul style="list-style-type: none"> Making Sense of the World Regulatory Systems Effective Responses to Trauma: https://wvpbis.org/wp-content/uploads/Effective-Responses-to-Trauma.pdf 	"What Happened to You" Chapter 1	Identify trauma and determine appropriate assessment tools	
Week 6	<ul style="list-style-type: none"> Seeking Balance Mindfulness Physical and Emotional Health Regulation, Relationship, Reward 	"What Happened to You" Chapter 2	Develop a self-care plan and summarize a	Crisis Intervention Assessment Assignment

Week #	Weekly Topic/Content/Activities	Readings	Learning Objectives	Assessment/Assignments
	<ul style="list-style-type: none"> • "How Childhood Trauma Affects Health Across a Lifetime": https://www.youtube.com/watch?v=95ovlJ3dsNk 		mindfulness activity	Due
Week 7	<ul style="list-style-type: none"> • How We Were Loved • Neuroplasticity • Developmental Adversity • "Toxic Stress Derails Healthy Development": https://developingchild.harvard.edu/resources/toxic-stress-derails-healthy-development/ • Fight, Flight, Flock, Freeze 	"What Happened to You" Chapter 3	Illustrate examples and synthesize literature relating to trauma	
Week 8	<ul style="list-style-type: none"> • The Spectrum of Trauma • Therapeutic Interactions • "Power of Brief Relational Interactions in Changing our Brains and Behavior": https://www.youtube.com/watch?v=TlpIIOp1IA 	"What Happened to You" Chapter 4	Develop a self-care plan and summarize a mindfulness activity	Mindfulness Assignment Due
Week 9	<ul style="list-style-type: none"> • Connecting the Dots • Historical Trauma • "Beyond the Cliff": https://www.youtube.com/watch?v=uOzDGrcvms • Patterns of Stress • Sensory Input Through the Brainstem • Regulate, Relate, Reason": https://www.youtube.com/watch?v=LNgvy7FyEVk 	"What Happened to You" Chapter 5	Illustrate examples and synthesize literature relating to trauma	
Week 10	<ul style="list-style-type: none"> • From Coping to Healing • Creating Change from the Inside Out • Stress-Response Capability of Dissociation • "Dissociation in Psychiatric Disorders: A Meta-Analysis of Studies Using the Dissociative Experiences Scale": https://ajp.psychiatryonline.org/doi/10.1176/appi.ajp.2017.17010025 	"What Happened to You" Chapter 6 "Trauma Stewardship" Part 3	Identify trauma and determine appropriate assessment tools	
Week 11	<ul style="list-style-type: none"> • Paths to Recovery • "Emotional and Psychological Trauma": https://www.helpguide.org/articles/ptsd-trauma/coping-with-emotional-and-psychological-trauma.htm • "Growth After Trauma": https://hbr.org/2020/07/growth-after-trauma • "Recovering from Trauma": https://www.psychologytoday.com/us/articles/200111/recovering-trauma 	"The Body Keeps the Score" Part 5	Illustrate examples and synthesize literature relating to trauma	Current Event Reaction Paper Due
Week 12	<ul style="list-style-type: none"> • Post-Traumatic Wisdom • Resilience • ACEs Prevention: https://youtu.be/Sem-INpzU4g • ACEs Prevention CDC website: https://www.cdc.gov/violenceprevention/aces/index.html 	"What Happened to You" Chapter 7	Illustrate examples and synthesize literature relating to trauma	
Week 13	<ul style="list-style-type: none"> • Our Brains, Our Biases, Our Systems • Shaka Senghor's Story: 	"What Happened to	Identify trauma and	

Week #	Weekly Topic/Content/Activities	Readings	Learning Objectives	Assessment/ Assignments
	https://www.youtube.com/watch?v=GXyGFMIBWEs • Creating a Therapeutic Web • Implicit Bias: https://www.youtube.com/watch?v=BSound-tlkc	"You" Chapter 8	determine appropriate assessment tools	
Week 14	• Relational Hunger in the Modern World • Correlation Between Health and Connectedness • Social Media Connections: https://www.youtube.com/watch?v=sL3Trlv2dNs • "Screens May Affect Your Child's Brain Development": https://www.youtube.com/watch?v=adOB-vXwXqM	"What Happened to You" Chapter 9	Identify trauma and determine appropriate assessment tools	Research Presentation Due
Week 15	• What We Need Now • Neurosequential Model • Regulate, Relate, Reason • "Dr. Bruce Perry's Neurosequential Model: Regulate, Relate, Reason": https://www.youtube.com/watch?v=TpsK_fY2BpQ&t=44s	"What Happened to You" Chapter 10	Illustrate examples and synthesize literature relating to trauma	
Week 16	• Finding Balance • System Approach to Self-Care: https://isfglobal.org/what-is-self-care/self-care-the-systems-approach/ • Self-Care Review and Reflect	"Trauma Stewardship" Part 4	Develop a self-care plan and summarize a mindfulness activity	Self-Care Final Journal Due

Course Policies

Late Assignment Policy

Professional social work practice dictates that social workers are responsive and timely in their work with and on behalf of their clients. It is expected that all work will be submitted to Blackboard by 11:59 pm CST by the designated due date. Blackboard's submission time stamp on your assignment will be verification if your assignment is considered late. Assignments turned in late may result in a 20% deduction each day.

Absentee Policy

According to the UND handbook, Students are expected to attend all classes, precluding emergencies, and participate meaningfully in all learning opportunities.

<http://und-public.courseleaf.com/undergraduateacademicinformation/undergraduateacademicinformation/universityattendancpolicyandprocedure/>

Participation includes demonstrating both speaking and active listening skills during classroom activities. At least as important as speaking, active listening is a powerful and legitimate form of participation and includes screen presence (where applicable) and displaying positive nonverbal body language that reflects engagement with the learning process and respecting the person who is speaking. Speaking includes discreet and appropriate questioning, commenting, and sharing opinions regarding the classroom content.

Social Work is a professional degree program, and acquisition of professional values and ethics is reliant on participation in class discussions and activities. Participation cannot be made up outside of class. Any student who receives an insufficient attendance grade (less than 70%), for any reason (including illness or athletics) may receive a failing grade or be asked to withdraw from this course. As a general standard, it is not possible to earn attendance and participation points for missed classes.

If a student is required to isolate or quarantine due to illness or exposure, they need to notify the University through the proper documentation and guidance on the following website: <https://und.edu/covid-19/> as well as communicate the information to their instructors. Due to technological and resource realities, there is no option to offer a hybrid model (such as zoom) to our campus students.

Technology Requirements:

Laptops and other electronic devices are allowed in class for educational purposes only. All work and assignments are to be submitted electronically on Blackboard. Students are expected to regularly have access to technology to check email, access announcements and instructions in Blackboard, submit assignments, and engage in regular communication.

The UND Writing Center

<https://und.edu/academics/writing-center/>

UNIVERSITY OF NORTH DAKOTA POLICIES & RESOURCES

Scholastic Dishonesty

Academic integrity is a serious matter, and any deviations from appropriate behavior will be dealt with strongly. Students are expected to adhere to the NASW Code of Ethics and the Code of Student Life. Be aware the Department views cheating, plagiarism, and collusion as a serious matter. A student who attempts to obtain credit for work that is not their own will likely receive a failing grade for that item of work, and at the professor's discretion, may also receive a failing grade in the course. For more information read the [Code of Student Life](#), NASW Code of Ethics and the Department handbook. *A gatekeeping meeting will be held with the student, advisor, instructor and Program Director.*

Disability Statement

If you have emergency medical information to share with me, or if you need accommodations in this course because of a disability, please make an appointment with me. If you plan to request disability accommodations, you are expected to [register with the Disability Support Services](#) (DSS) office online, (180 McCannel Hall, 701.777.3425).

Resolution of Problems

Should a problem occur, you should speak to your instructor first. If the problem is not resolved, meet with the Program Director or a designee. If the problem continues to be unresolved, go to the department chair, and next to the college Dean. Should the problem persist, you have the right to go to the Provost next, and then to the President.

Notice of Nondiscrimination

It is the policy of the University of North Dakota that no person shall be discriminated against because of race, religion, age, color, gender, disability, national origin, creed, sexual orientation, gender identity, genetic information, marital status, veteran's status, or political belief or affiliation and the equal opportunity and access to facilities shall be available to all. Concerns regarding Title IX, Title VI, Title VII, ADA, and Section 504 may be addressed to: Donna Smith, Director of Equal Employment Opportunity/Affirmative Action and Title IX Coordinator, 401 Twamley Hall, 701.777.4171, UND.affirmativeactionoffice@UND.edu or the Office for Civil Rights, U.S. Dept. of Education, 500 West Madison, Suite 1475, Chicago, IL 60611 or any other federal agency.

Reporting of Sexual Violence

If you or a friend has experienced sexual violence, such as sexual assault, domestic violence, dating violence or stalking, or sex-based harassment, please contact UND's Title IX Coordinator, Donna Smith, for assistance: 701.777.4171; donna.smith@UND.edu; or visit the [Title IX webpage](#).

Faculty Reporting Obligations Regarding Sexual Violence

It is important for students to understand that faculty are required to share with UND's Title IX Coordinator any incidents of sexual violence they become aware of, even if those incidents occurred in the past or are disclosed as part of a class assignment. This does not mean an investigation will occur if the student does not want that, but it does allow UND to provide resources to help the student continue to be successful at UND. If you have been the victim of sexual violence, you can find information about confidential support services on the [Title IX webpage](#).

UND Cares Program

The [UND Cares program](#) seeks to educate faculty, staff, and students on how to recognize warning signs that indicate a student is in distress.

How to Seek Help When in Distress

We know that while college is a wonderful time for most students, some students may struggle. You may experience students in distress on campus, in your classroom, in your home, and within residence halls. Distressed students may initially seek assistance from faculty, staff members, their parents, and other students. In addition to the support we can provide to each other, there are also professional support services available to students through the Dean of Students and University Counseling Center. Both staffs are available to consult with you about getting help or providing a friend with the help that he or she may need. For more additional information, please visit the [UND Cares program Webpage](#).

UND Cares about Your Success

Important information is available to you through Starfish, which is an online system used to help students be successful. When an instructor observes student behaviors or concerns that may impede academic success, the instructor may raise a flag that notifies the student of the concern and/or refer the student to their academic advisor or UND resource. Please pay attention to these emails and take the recommended actions. They are sent to help you be successful!

COVID-19 Statement

UND is committed to maintaining a safe learning environment while providing quality learning experiences for our students. COVID-19's continued presence within our UND community may necessitate changes in classroom management as the academic year progresses. As such, UND asks students and instructors to be flexible when necessary to promote a safe environment for learning. Please do not attend an in-person class or lab if you are feeling ill, particularly if you are experiencing symptoms of COVID-19, or if you have been directed by health professionals to quarantine or isolate. If you are not able to attend class or lab, please notify your instructor as soon as possible and discuss options for making up any missed work in order to ensure your ability to succeed in the course. If you will have an extended absence due to serious illness or other uncontrollable circumstances, you may request an absence notification through the [Community Standards & Accessibility for Students](#). Similarly, if your instructor is ill they may need to cancel class or temporarily move your course to online delivery to ensure that you are able to complete the course successfully. Instructors may require students to wear masks in the classroom or in the laboratory as a preventative measure designed to facilitate uninterrupted classroom engagement and to facilitate health and safety in the classroom. If your instructor does require masks in class or in a laboratory, you are expected to comply with that request.

UND also strongly encourages all members of the University community, including students, to get vaccinated, seek out testing when needed, and model positive behavior both on- and off-campus to foster a healthy and safe learning environment for all students. Individuals who would like to discuss disability accommodations regarding masks should contact the Disability Services for Students (DSS) office at 701-777-2664 or UND.dss@UND.edu. Individuals who are unable to wear a mask due to a sincerely held religious belief should contact the UND Equal Opportunity and Title IX Office at 701.777.4171 or UND.EO.TitleIX@UND.edu.

Appendix B: Course Schedule, Readings, Learning Objectives, and Assignments

Week #	Weekly Topic/Content/Activities	Readings	Learning Objectives/ Assessments/ Assignments
Week 1	<ul style="list-style-type: none"> • Introduction to Trauma • “What is Trauma?”: https://www.youtube.com/watch?v=BJfmfkDQb14 • Types of Traumatic Experiences • Understanding Trauma Stewardship • Self-Care • NASW Code of Ethics: https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English 	<p>“The Body Keeps the Score” Part 1</p> <p>“Trauma Stewardship” Part 1</p>	<ul style="list-style-type: none"> • Identify trauma and determine appropriate assessment tools
Week 2	<ul style="list-style-type: none"> • Brain-Body Connections of Trauma • Hierarchical Organization of the Brain • History of Self-Care: https://isfglobal.org/what-is-self-care/a-brief-history-of-self-care/ • Developing Self-Care Plan: https://socialwork.buffalo.edu/resources/self-care-starter-kit/developing-your-self-care-plan.html 	<p>“The Body Keeps the Score” Part 2</p>	<ul style="list-style-type: none"> • Develop a self-care plan and summarize a mindfulness activity
Week 3	<ul style="list-style-type: none"> • The Minds of Children • Adverse Childhood Experiences (ACEs) • Screening for ACEs: https://www.canp.uscourts.gov/forms/ACEs Assessment.pdf 	<p>“The Body Keeps the Score” Part 3</p>	<ul style="list-style-type: none"> • Identify trauma and determine appropriate assessment tools • Self-Care Plan

Week #	Weekly Topic/Content/Activities	Readings	Learning Objectives/ Assessments/ Assignments
Week 4	<ul style="list-style-type: none"> • The Imprint of Trauma • Crisis Intervention • Trauma Exposure Response <p>“Drowning in Empathy: The Cost of Vicarious Trauma”: https://www.youtube.com/watch?v=Zsaorjlo1Yc</p>	<p>“The Body Keeps the Score” Part 4</p> <p>“Trauma Stewardship” Part 2</p>	<ul style="list-style-type: none"> • Identify trauma and determine appropriate assessment tools
Week 5	<ul style="list-style-type: none"> • Making Sense of the World • Regulatory Systems • Effective Responses to Trauma: <p>https://wvpbis.org/wp-content/uploads/Effective-Responses-to-Trauma.pdf</p>	<p>“What Happened to You” Chapter 1</p>	<ul style="list-style-type: none"> • Identify trauma and determine appropriate assessment tools
Week 6	<ul style="list-style-type: none"> • Seeking Balance • Mindfulness • Physical and Emotional Health • Regulation, Relationship, Reward • “How Childhood Trauma Affects Health Across a Lifetime”: <p>https://www.youtube.com/watch?v=95ovIJ3dsNk</p>	<p>“What Happened to You” Chapter 2</p>	<ul style="list-style-type: none"> • Develop a self-care plan and summarize a mindfulness activity • Crisis Intervention Assessment Assignment Due
Week 7	<ul style="list-style-type: none"> • How We Were Loved • Neuroplasticity • Developmental Adversity • “Toxic Stress Derails Healthy Development”: <p>https://developingchild.harvard.edu/resources/toxic-stress-derails-healthy-development/</p> <ul style="list-style-type: none"> • Fight, Flight, Flock, Freeze 	<p>“What Happened to You” Chapter 3</p>	<ul style="list-style-type: none"> • Illustrate examples and synthesize literature relating to trauma

Week #	Weekly Topic/Content/Activities	Readings	Learning Objectives/ Assessments/ Assignments
Week 8	<ul style="list-style-type: none"> • The Spectrum of Trauma • Therapeutic Interactions • “Power of Brief Relational Interactions in Changing our Brains and Behavior”: https://www.youtube.com/watch?v=TIpIII0p1IA 	<p>“What Happened to You” Chapter 4</p>	<ul style="list-style-type: none"> • Develop a self-care plan and summarize a mindfulness activity • Mindfulness Assignment Due
Week 9	<ul style="list-style-type: none"> • Connecting the Dots • Historical Trauma • “Beyond the Cliff”: https://www.youtube.com/watch?v=uOzDGrcvmus • Patterns of Stress • Sensory Input Through the Brainstem • Regulate, Relate, Reason”: https://www.youtube.com/watch?v=LNuxy7FxEVk 	<p>“What Happened to You” Chapter 5</p>	<ul style="list-style-type: none"> • Illustrate examples and synthesize literature relating to trauma
Week 10	<ul style="list-style-type: none"> • From Coping to Healing • Creating Change from the Inside Out • Stress-Response Capability of Dissociation • “Dissociation in Psychiatric Disorders: A Meta-Analysis of Studies Using the Dissociative Experiences Scale”: https://ajp.psychiatryonline.org/doi/10.1176/appi.ajp.2017.17010025 	<p>“What Happened to You” Chapter 6</p> <p>“Trauma Stewardship” Part 3</p>	<ul style="list-style-type: none"> • Identify trauma and determine appropriate assessment tools

Week #	Weekly Topic/Content/Activities	Readings	Learning Objectives/ Assessments/ Assignments
Week 11	<ul style="list-style-type: none"> • Paths to Recovery • “Emotional and Psychological Trauma”: https://www.helpguide.org/articles/ptsd-trauma/coping-with-emotional-and-psychological-trauma.htm • “Growth After Trauma”: https://hbr.org/2020/07/growth-after-trauma • “Recovering from Trauma”: https://www.psychologytoday.com/us/articles/200111/recovering-trauma 	“The Body Keeps the Score” Part 5	<ul style="list-style-type: none"> • Illustrate examples and synthesize literature relating to trauma • Current Event Reaction Paper Due
Week 12	<ul style="list-style-type: none"> • Post-Traumatic Wisdom • Resilience • ACEs Prevention: https://youtu.be/8gm-INpzU4g • ACEs Prevention CDC website: https://www.cdc.gov/violenceprevention/aces/index.html 	“What Happened to You” Chapter 7	<ul style="list-style-type: none"> • Illustrate examples and synthesize literature relating to trauma
Week 13	<ul style="list-style-type: none"> • Our Brains, Our Biases, Our Systems • Shaka Senghor’s Story: https://www.youtube.com/watch?v=GtXyGFMBWBs • Creating a Therapeutic Web • Implicit Bias: https://www.youtube.com/watch?v=BSguud-t1kc 	“What Happened to You” Chapter 8	<ul style="list-style-type: none"> • Identify trauma and determine appropriate assessment tools

Week #	Weekly Topic/Content/Activities	Readings	Learning Objectives/ Assessments/ Assignments
Week 14	<ul style="list-style-type: none"> • Relational Hunger in the Modern World • Correlation Between Health and Connectedness • Social Media Connections: https://www.youtube.com/watch?v=sL3Trlv2dNs • “Screens May Affect Your Child’s Brain Development”: https://www.youtube.com/watch?v=ndOB-vXwXxM 	<p>“What Happened to You” Chapter 9</p>	<ul style="list-style-type: none"> • Identify trauma and determine appropriate assessment tools • Research Presentation Due
Week 15	<ul style="list-style-type: none"> • What We Need Now • Neurosequential Model • Regulate, Relate, Reason • “Dr. Bruce Perry’s Neurosequential Model: Regulate, Relate, Reason”: https://www.youtube.com/watch?v=TpsK_fy2BpQ&t=44s 	<p>“What Happened to You” Chapter 10</p>	<ul style="list-style-type: none"> • Illustrate examples and synthesize literature relating to trauma
Week 16	<ul style="list-style-type: none"> • Finding Balance • System Approach to Self-Care: https://isfglobal.org/what-is-self-care/self-care-the-systems-approach/ • Self-Care Review and Reflect 	<p>“Trauma Stewardship” Part 4</p>	<ul style="list-style-type: none"> • Develop a self-care plan and summarize a mindfulness activity • Self-Care Final Journal Due

Definition of Trauma

- Definition of trauma
 - Difficult to define and therefore, it is difficult to understand the full scope
 - Traumatic event is subjective
 - Internal experiences vary from person to person and so do the long-term impacts
 - Substance Abuse and Mental Health Services Administration (SAMHSA) developed a group of academics and clinicians
 - Three Es to define trauma
 - Event
 - Experience
 - Effects
 - To become trauma-responsive requires a basic understanding of what trauma is and isn't. Explain why a balanced definition is crucial to our understanding of self and others we serve.



Appendix D: Suggested ACEs Slides

Adverse Childhood Experiences

- Adverse Childhood Experiences (ACEs) study (1998)
 - Ten questions about adversities
 - Does not account for other traumatic adversities
 - Score does not tell the whole story
 - Does not address timing, pattern or intensity
- National Survey of Children's Health (2016)
 - 46 percent of children in the US have had at least one significant traumatic experience
- US Centers for Disease Control and Prevention (2019)
 - 61 percent of adults in US report having at least one ACE
 - Nearly 25 percent report three or more ACEs



ACEs Questionnaire

Adverse Childhood Experience (ACE) Questionnaire
Finding your ACE Score © 1998-2012 CDC

While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household often ...
Swear at you, insult you, put you down, or humiliate you?
or
Act in a way that made you afraid that you might be physically hurt?
Yes No If yes enter 1 _____
2. Did a parent or other adult in the household often ...
Push, grab, slap, or throw something at you?
or
Ever hit you so hard that you had marks or were injured?
Yes No If yes enter 1 _____
3. Did an adult or person at least 5 years older than you ever ...
Touch or fondle you or have you touch their body in a sexual way?
or
Try to or actually have oral, anal, or vaginal sex with you?
Yes No If yes enter 1 _____
4. Did you often feel that ...
No one in your family loved you or thought you were important or special?
or
Your family didn't look out for each other, feel close to each other, or support each other?
Yes No If yes enter 1 _____
5. Did you often feel that ...
You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?
or
Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
Yes No If yes enter 1 _____
6. Were your parents ever separated or divorced?
Yes No If yes enter 1 _____
7. Was your mother or stepmother:
Often pushed, grabbed, slapped, or had something thrown at her?
or
Sometimes or often kicked, bitten, hit with a fist, or hit with something hard?
or
Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?
Yes No If yes enter 1 _____
8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
Yes No If yes enter 1 _____
9. Was a household member depressed or mentally ill or did a household member attempt suicide?
Yes No If yes enter 1 _____
10. Did a household member go to prison?
Yes No If yes enter 1 _____

Now add up your "Yes" answers: _____ This is your ACE Score

- Screening for ACEs
 - <https://www.canp.uscourts.gov/forms/ACEs%20Assessment.pdf>
 - As the number of ACEs increases, so does the risk for negative health outcomes

Appendix E: Suggested Mindfulness Activity Slide

Mindfulness Activities

- Bring awareness to your five senses
 - Focus on the present moment
 - Look
 - Listen
 - Taste
 - Touch
 - Smell



- Gratitude List
 - Focus on the things you are grateful for



Appendix F: Suggested Self-Care Slides

Self-Care

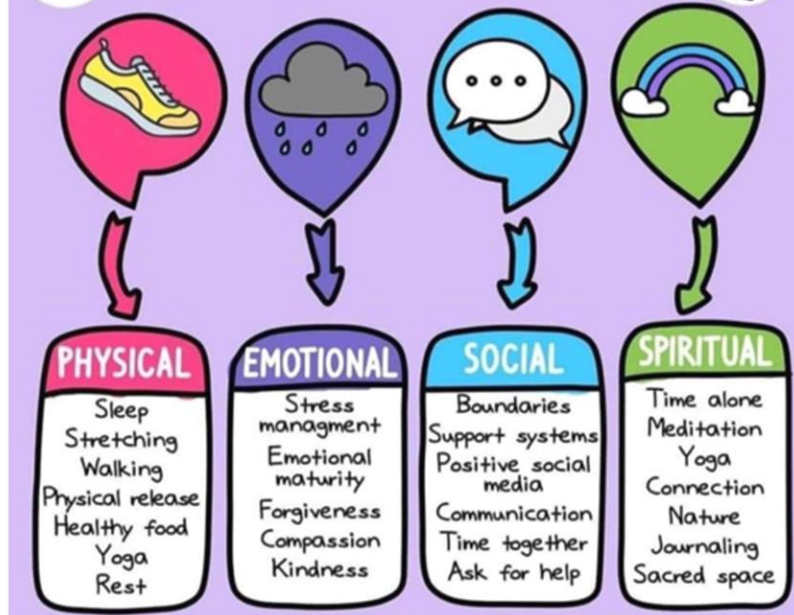
- According to the NASW Code of Ethics (2022) “Professional self-care is paramount for competent and ethical social work practice”.



Self Care

- Walking
- Breathing exercises
- Listening to music
- Dancing
- Cooking
- Reading
- Crafts
- Exercising
- Playing an instrument
- Yoga
- What do you do for self care?

TYPES OF SELF-CARE



Self-Care Resources:

Lifestyle Behavior Assessment

- Lifestyle behavior assessment

Is your lifestyle causing you stress?

The way you live your life can have a big impact on your health, well-being, and how well or poorly you handle stress. Below are lifestyle behaviors that affect stress levels. Please check the boxes that apply to you. Doing an honest assessment of how well or poorly you take care of yourself can help you manage your stress in the future.

Lifestyle Behaviors					
When you are under stress, do you:	Yes	No	When you are under stress, do you:	Yes	No
Smoke/use tobacco	<input type="checkbox"/>	<input type="checkbox"/>	Engage in physical activity at least three times a week for 30 minutes each day	<input type="checkbox"/>	<input type="checkbox"/>
Drink a lot of coffee or caffeinated drinks (more than 2-3 cups per day)	<input type="checkbox"/>	<input type="checkbox"/>	Get six to eight hours of sleep every night	<input type="checkbox"/>	<input type="checkbox"/>
Drink alcohol (more than recommended levels of 1-2 per day)	<input type="checkbox"/>	<input type="checkbox"/>	Maintain good eating habits	<input type="checkbox"/>	<input type="checkbox"/>
Overuse over-the-counter medications	<input type="checkbox"/>	<input type="checkbox"/>	Make time to relax	<input type="checkbox"/>	<input type="checkbox"/>
Overeat or under eat	<input type="checkbox"/>	<input type="checkbox"/>	Maintain a sense of humor	<input type="checkbox"/>	<input type="checkbox"/>
Spend too much money (e.g., do you have a lot of credit card debt and have trouble making payments?)	<input type="checkbox"/>	<input type="checkbox"/>	Play	<input type="checkbox"/>	<input type="checkbox"/>
Abuse/overuse tranquilizers or other over-the-counter medications	<input type="checkbox"/>	<input type="checkbox"/>	Maintain healthy rituals and routines	<input type="checkbox"/>	<input type="checkbox"/>
Watch too much television (more than 3-4 hours per day)	<input type="checkbox"/>	<input type="checkbox"/>	Be optimistic. Engage in positive thinking	<input type="checkbox"/>	<input type="checkbox"/>
Have angry outbursts	<input type="checkbox"/>	<input type="checkbox"/>	Spend time with family	<input type="checkbox"/>	<input type="checkbox"/>
Take illegal drugs	<input type="checkbox"/>	<input type="checkbox"/>	Spend time with friends	<input type="checkbox"/>	<input type="checkbox"/>
Withdraw from people	<input type="checkbox"/>	<input type="checkbox"/>	Make plans for the future	<input type="checkbox"/>	<input type="checkbox"/>
Ignore or deny stress symptoms	<input type="checkbox"/>	<input type="checkbox"/>	Figure out ways to manage stress	<input type="checkbox"/>	<input type="checkbox"/>
Engage in self-destructive relationships	<input type="checkbox"/>	<input type="checkbox"/>	Reward yourself for your accomplishments	<input type="checkbox"/>	<input type="checkbox"/>
These are negative self-care behaviors.			These are positive self-care behaviors.		



Appendix G: Grading Rubric for Self-Care Plan and Journal

Grading Rubric for Self-Care Plan and Journal			
Grading Criterion	Excellent	Good	Fair
Physical Self-Care	Thoroughly address and demonstrate an understanding of the physical aspects of self-care and share two or more examples	Address one physical aspect of self-care and demonstrate moderate understanding of the physical aspects of self-care	Do not address nor demonstrate an understanding of the physical aspects of self-care
Emotional Self-Care	Thoroughly address and demonstrate an understanding of the emotional aspects of self-care and share two or more examples	Address one emotional aspect of self-care and demonstrate moderate understanding of the emotional aspects of self-care	Do not address nor demonstrate an understanding of the emotional aspects of self-care
Social Self-Care	Thoroughly address and demonstrate an understanding of the social aspects of self-care and share two or more examples	Address one social aspect of self-care and demonstrate moderate understanding of the social aspects of self-care	Do not address nor demonstrate an understanding of the social aspects of self-care
Spiritual Self-Care	Thoroughly address and demonstrate an understanding of the spiritual aspects of self-care and share two or more examples	Address one spiritual aspect of self-care and demonstrate moderate understanding of the spiritual aspects of self-care	Do not address nor demonstrate an understanding of the spiritual aspects of self-care
Reflective Journal	Thoroughly reflect and demonstrate an understanding of all aspects of self-care	Minimally reflect and demonstrate an understanding of all aspects of self-care	Lack of reflection and do not demonstrate an understanding of all aspects of self-care

Appendix H: Grading Rubric for Crisis Intervention Assessment Assignment

Grading Rubric for Crisis Intervention Assessment Assignment			
Grading Criterion	Excellent	Good	Fair
Summary of Case Example	Thoroughly summarize case example and indicating main points	Minimally summarize case example and indicate many of the main points	Do not provide a summary nor note main points
Use of Person-Centered Approach	Thoroughly demonstrate an understanding of the person-centered approach, ensuring goals and language are person-centered	Minimally demonstrate an understanding of the person-centered approach by ensuring goals or language are person-centered	Do not demonstrate an understanding of the person-centered approach
Identify Assessment Tools	Appropriately identify assessment tools and sharing at least two examples	Minimally identify assessment tools by sharing one example	Do not identify or identify inappropriate assessment tools
Develop Treatment Plan	Critically construct a person-centered, solution-focused treatment plan	Moderately construct a treatment plan that is missing person-centered or solution-focused components	Do not develop a treatment plan that is neither person-centered nor solution-focused
Feedback to Peer	Offer respectful, thoughtful, and constructive feedback to peer	Minimally offer respectful, thoughtful, and constructive feedback to peer	Do not offer respectful, thoughtful, and constructive feedback to peer

Appendix I: Grading Rubric for Mindfulness Group Activity

Grading Rubric for Mindfulness Group Activity			
Grading Criterion	Excellent	Good	Fair
Selection of Mindfulness Activity	Appropriately select mindfulness activity that makes clear connections to course topics and readings	Mindfulness activity does not make clear connection to course topics or readings	Do not select a mindfulness activity
Explanation of Mindfulness Activity	Provide clear, concise explanation of the mindfulness activity and the relation to course topic and readings	Explanation of the mindfulness activity is not thorough and there is not a clear connection to the course topic or readings	Not a clear explanation of the mindfulness activity nor relation to course topic
Demonstrate Mindfulness Activity	Thoroughly demonstrate an understanding of the mindfulness activity	Minimally demonstrate an understanding of the mindfulness activity	Do not demonstrate an understanding of the mindfulness activity

Appendix J: Grading Rubric for Current Event Reaction Paper

Grading Rubric for Current Event Reaction Paper			
Grading Criterion	Excellent	Good	Fair
Selection and Summary of Current Event	Appropriately select and thoroughly summarize current event	Appropriately select and minimally summarize current event	Do not provide a summary of current event
Identify Central Idea	Appropriately identify central idea	Central idea is not clearly identified or explained	Do not identify central idea
Reaction to Current Event	Critically construct a reaction to the current event	Reaction lacks critical thinking	Do not construct a reaction to the current event
Connection to Course Material	Thoroughly connect the current event to relevant course materials	Connection of the current event to relevant course materials is unclear	Do not connect the current event to relevant course materials
Grammar and APA Format	The paper is free of writing issues and properly formatted according to APA formatting guidelines	The paper has minimal writing issues (1-3) and mostly formatted according to APA formatting guidelines	The paper has significant (4 or more) writing issues and is not formatted according to APA formatting guidelines

Appendix K: Grading Rubric for Research Presentation

Grading Rubric for Research Presentation			
Grading Criterion	Excellent	Good	Fair
Selection and Summary of Topic	Appropriately select and thoroughly summarize topic	Appropriately select and minimally summarize topic	Do not provide a summary of topic
Use of Evidence-Based Research and Data to Support Topic	Thoroughly provides appropriate evidence-based research and data to support topic by citing five or more sources	Cites fewer than five appropriate evidence-based research and/or data to support topic	Do not provide appropriate evidence-based research and data to support topic
Connection to Course Material	Thoroughly connect the research presentation to relevant course materials	Connection to course materials or readings is not clear	Do not connect the research presentation to relevant course materials
Connection to Social Work Profession	Thoroughly demonstrate an understanding of the connection of the topic to social work	Connection to the social work profession is unclear	Do not demonstrate an understanding of the connection of the topic to social work
Professional Resources	Appropriately cited minimum of five professional resources	Cited minimum of four professional resources	Cited three or fewer professional resources
Grammar and APA Format	The paper is free of writing issues and properly formatted according to APA formatting guidelines	The paper has minimal (1-3) writing issues and mostly formatted according to APA formatting guidelines	The paper has significant (4 or more) writing issues and is not formatted according to APA formatting guidelines

References

- Abrams, J. & Shapiro, M. (2014). Teaching trauma theory and practice in MSW programs: A clinically focused, case-based method. *Clinical Social Work*. 42, 408-418. DOI 10.1007/s10615-013-0472-z
- American Geriatrics Society Expert Panel. (2016). Person-centered care: A definition and essential elements. *Journal of the American Geriatrics Society*, 64(1), 15–18.
<https://doi.org/10.1111/jgs.13866>
- American Psychological Association. (2022). *Trauma and shock*.
<https://www.apa.org/topics/trauma#:~:text=Trauma%20is%20an%20emotional%20response,symptoms%20like%20headaches%20or%20nausea>
- Averill, J. B. (2015). Qualitative Data Analysis. In M. de Chesnay (Ed.), *Nursing research using data analysis: Qualitative designs and methods in nursing* (pp. 1–10). essay, Springer Publishing Company.
- Beck, J. (2017, June 8). *How the internet is changing friendship*. YouTube.
<https://www.youtube.com/watch?v=sL3Trlv2dNs>
- Briere, J. & Scott, C. (2020). *Principles of trauma therapy: A guide to symptoms, evaluation, and treatment*. Sigeuma Press.
- Burke Harris, N. (2015, February 17). *How childhood trauma affects health across a lifetime*. YouTube. <https://www.youtube.com/watch?v=95ovIJ3dsNk>

Case Western Reserve University (2022). *The center on trauma and adversity*.

<https://case.edu/socialwork/traumacenter/student-training>

Center for Disease Control and Prevention. (2018, April 5). *We can prevent ACEs*. YouTube.

<https://youtu.be/8gm-INpzU4g>

Centers for Disease Control and Prevention. (2021a). *Adverse childhood experiences (ACEs)*.

Centers for Disease Control and Prevention.

<https://www.cdc.gov/violenceprevention/aces/index.html>

Centers for Disease Control and Prevention. (2021b). *Risk and protective factors*. Centers for Disease Control and Prevention.

<https://www.cdc.gov/violenceprevention/aces/riskprotectivefactors.html>

Centers for Disease Control and Prevention. (2022). *Building trauma-informed communities*.

Centers for Disease Control and Prevention.

<https://blogs.cdc.gov/publichealthmatters/2022/05/trauma-informed/#:~:text=Often%20unexpected%20and%20shocking%2C%20it,affect%20people%20emotionally%20and%20physically>

Centers for Disease Control and Prevention. (2023a). *Fast facts: Preventing adverse childhood experiences*. Centers for Disease Control and Prevention.

<https://www.cdc.gov/violenceprevention/aces/fastfact.html>

Centers for Disease Control and Prevention. (2023b). *Prevention strategies*. Centers for Disease Control and Prevention. <https://www.cdc.gov/violenceprevention/aces/prevention.html>

- Center on the Developing Child at Harvard University. (2023, July 13). *Toxic stress derails healthy development*. <https://developingchild.harvard.edu/resources/toxic-stress-derails-healthy-development/>
- Choy-Brown, Stanhope, V., Williams, N., & Bond, L. (2020). Delivering Person-Centered Care in Community Mental Health Programs. *Research on Social Work Practice, 30*(8), 907–917. <https://doi.org/10.1177/1049731520944568>
- Cole, E. R. (2009). Intersectionality and research in psychology. *American Psychologist, 64*(3), 170–180. <https://doi.org/10.1037/a0014564>
- Cole, E. R. & Duncan, L. E. (2023) Better policy interventions through intersectionality. *Social Issues and Policy Review, 17*, 62– 78. <https://doi-org.ezproxylr.med.und.edu/10.1111/sipr.12090>
- Collins, P.H. (2019). *Intersectionality as Critical Social Theory*. Duke University Press. <https://doi.org/10.2307/j.ctv11hpkdj>
- Council on Social Work Education. (2022). 2022 EPAS. <https://www.cswe.org/accreditation/standards/2022/>
- Council on Social Work Education. (2023). Directory of accredited programs. <https://www.cswe.org/accreditation/about/directory/>
- Crenshaw, K. (1991). Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color. *Stanford Law Review, 43*(6), 1241–1299. <https://doi.org/10.2307/1229039>

- Creswell, J. W. & Guetterman, T. C. (2019). *Educational research: Planning, conducting, and evaluating quantitative and Qualitative Research (6th ed.)*. Pearson.
- Crisis Prevention Institute. (2021). *How trauma-informed schools help every student succeed*.
Crisis Prevention Institute. <https://www.crisisprevention.com/Blog/Trauma-Informed-Schools>
- Cunningham, A. (2016, April 15). *Drowning in empathy: The cost of vicarious trauma*. YouTube.
<https://www.youtube.com/watch?v=Zsaorjlo1Yc>
- Davis, D. M. (2012). *What are the benefits of mindfulness?* American Psychological Association.
<https://www.apa.org/monitor/2012/07-08/ce-corner>
- de Wind, A., van der Pas, S., Blatter, B.M. *et al.* (2016). A life course perspective on working beyond retirement—results from a longitudinal study in the Netherlands. *BMC Public Health*. 16 (499), 1-12. <https://doi.org/10.1186/s12889-016-3174-y>
- Drake, J. (2008, July). *Lessons learned from the CVMA*. The Canadian Veterinary Journal.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2430393/>
- Getz, L. (2013). *Trauma-informed social work education*. *Social Work Today*. 13 (2) p. 18.
Retrieved from <https://www.socialworktoday.com/archive/031513p18.shtml>
- Goodwin, J. & Tiderington, E. (2022). Building trauma-informed research competencies in Social Work Education. *Social Work Education*, 41(2), 143–156.
<https://doi.org/10.1080/02615479.2020.1820977>

Growth after trauma. Harvard Business Review. (2021, August 31).

<https://hbr.org/2020/07/growth-after-trauma>

Herrenkohl, T. I., Fedina, L., Roberto, K. A., Raquet, K. L., Hu, R. X., Rousson, A. N., & Mason, W.

A. (2020). Child maltreatment, youth violence, intimate partner violence, and elder mistreatment: A review and theoretical analysis of research on violence across the life course. *Trauma, Violence, & Abuse*, 23(1), 314–328.

<https://doi.org/10.1177/1524838020939119>

Hussain, S. T., Lei, S., Akram, T., Haider, M. J., Hussain, S. H., & Ali, M. (2018). Kurt Lewin's change model: A critical review of the role of leadership and employee involvement in organizational change. *Journal of Innovation & Knowledge*, 3(3), 123–127.

<https://doi.org/10.1016/j.jik.2016.07.002>

Hutchinson, E. D. (2019). *Dimensions of human behavior: The changing life course* (6th ed.).

Sage Publications, Inc.

International Self-Care Foundation. (2014a, August 6). *A brief history of self-care*.

<https://isfglobal.org/what-is-self-care/a-brief-history-of-self-care/>

International Self-Care Foundation. (2014b, June 24). *Self-care – the systems approach*.

<https://isfglobal.org/what-is-self-care/self-care-the-systems-approach/>

Kessler R.C., Chiu W.T, Demler O., Merikangas K.R., & Walters E.E. (2005, June). *Prevalence, severity, and comorbidity of 12-month DSM-IV disorders in the National Comorbidity Survey Replication*. *Arch Gen Psychiatry*. 62(6) 617-627.

Lipsky, L. van D. & Burk, C. (2017). *Trauma stewardship: an everyday guide to caring for self while caring for others*. Berrett-Koehler.

Lines, L. M., Lepore, M., & Wiener, J. M. (2015). Patient-centered, person-centered, and person-directed care: They are not the same. *Medical Care*, 53(7), 561–563.

<https://doi.org/10.1097/MLR.0000000000000387>

Lunenburg, F.C. (2010). Forces for and resistance to organizational change. *National Forum of Educational Administration and Supervision Journal*, 27(4), 1-9.

Lyssenko, L., Schmahl, C., Bockhacker, L., Vonderlin, R., Bohus, M., & Kleindienst, N. (2018).

Dissociation in psychiatric disorders: A meta-analysis of studies using the dissociative experiences scale. *American Journal of Psychiatry*, 175(1), 37–46.

<https://doi.org/10.1176/appi.ajp.2017.17010025>

Manning, K. (2018) *Organizational theory in higher education* (2nd edition). New York: Routledge.

Masiriri, T. (2008). The effects of Managed Care on Social Work Mental Health Practice. *SPNA Review*, 4(1), 82–98.

Matsuzaka, S., Hudson, K. D., & Ross, A. M. (2021). Operationalizing intersectionality in Social Work Research: Approaches and Limitations. *Social Work Research*, 45(3), 155–168.

<https://doi.org/10.1093/swr/svab010>

McGrath, E. (2016, June 9). *Recovering from trauma*. Psychology Today.

<https://www.psychologytoday.com/us/articles/200111/recovering-trauma>

Michigan State University. (n.d.) *School of Social Work*. <https://socialwork.msu.edu/continuing-ed/trauma-certificate-program.html>

National Association of Social Workers. (2023). Code of ethics.

<https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>

National Center on Safe Supportive Learning Environments. (2022). *Trauma-sensitive schools training package*. <https://safesupportivelearning.ed.gov/about>

National Council for Mental Wellbeing. (n.d.). *How to Manage Trauma*. National Council for Mental Wellbeing. <https://www.thenationalcouncil.org/wp-content/uploads/2022/08/Trauma-infographic.pdf>

National Education Association. (2021, June 22). *Implicit bias defined*. YouTube.

<https://www.youtube.com/watch?v=BSguud-t1kc>

National Institute of Mental Health. (n.d.). *Caring for your mental health*. National Institute of Mental Health. [https://www.nimh.nih.gov/health/topics/caring-for-your-mental-](https://www.nimh.nih.gov/health/topics/caring-for-your-mental-health#:~:text=Self%2Dcare%20means%20taking%20the,illness%2C%20and%20increase%20your%20energy)

[health#:~:text=Self%2Dcare%20means%20taking%20the,illness%2C%20and%20increase%20your%20energy](https://www.nimh.nih.gov/health/topics/caring-for-your-mental-health#:~:text=Self%2Dcare%20means%20taking%20the,illness%2C%20and%20increase%20your%20energy)

Northouse, P. G. (2019). *Leadership: theory and practice*. Eighth edition. Sage Publications, Inc.

Olmos-Vega, F. M., Stalmeijer, R. E., Varpio, L., & Kahlke, R. (2023). A practical guide to reflexivity in qualitative research: A mee guide no. 149. *Medical Teacher*, 45(3), 241–251.

<https://doi.org/10.1080/0142159x.2022.2057287>

Pepitone, J. (2018, May 17). *Screens may affect your child's brain development*. YouTube.

<https://www.youtube.com/watch?v=ndOB-vXwXxM>

Perry, B. (2017). *The boy who was raised as a dog: And other stories from a child psychiatrist's notebook--what traumatized children can teach us about loss, love, and healing*. Perseus Books Group.

Perry, B. (2020, April 2). *Regulate, relate, reason (sequence of engagement): Neurosequential Network Stress & Trauma Series*. YouTube.

<https://www.youtube.com/watch?v=LNuxy7FxEVk>

Perry, B. (2023, May 19). *Dr. Bruce Perry and the power of brief relational interactions in changing our brains and behavior*. YouTube.

<https://www.youtube.com/watch?v=TIpIIIop1IA>

Perry, B. D. & Winfrey, O. (2021). *What happened to you? Conversations on trauma, resilience, and healing*. Flatiron.

Rapley, T. (2007). *Doing conversation, discourse and document analysis*. Sage.

Relias (2022). *Solutions to support a trauma-informed approach to care*.

<https://www.relias.com/solutions/trauma-informed-care>

Richardson-Lauve, J. (2021, September 21). *Dr. Bruce Perry's neurosequential model: Regulate, relate, reason*. YouTube. https://www.youtube.com/watch?v=TpsK_fY2BpQ&t=44s

Robert Wood Johnson Foundation. (n.d.). Adverse childhood experiences ("ACEs")

questionnaire. <https://www.canp.uscourts.gov/forms/ACEs%20Assessment.pdf>

Robinson, L. (2023, June 6). *Emotional and psychological trauma*. HelpGuide.org.

<https://www.helpguide.org/articles/ptsd-trauma/coping-with-emotional-and-psychological-trauma.htm>

Saldaña, J. (2013). *The coding manual for qualitative researchers* (2nd ed.). Sage Publications.

Senghor, S. (2014, June 23). *Why your worst deeds don't define you*. YouTube.

<https://www.youtube.com/watch?v=GtXyGFMBWBs>

Serlin, I. A., Krippner, S., & Rockefeller, K. (2019). The Whole-Person Approach to Integrated

Health Care. In *Integrated care for the traumatized: A whole-person approach* (pp. 14–33). essay, Rowman & Littlefield.

Sheldon-Dean, H. (2023, February 16). What is complex trauma?

<https://childmind.org/article/what-is-complex-trauma/>

Simon, J. D., Boyd, R., & Subica, A. M. (2021). Refocusing intersectionality in social work

education: Creating a brave space to discuss oppression and privilege. *Journal of Social Work Education*, 58(1), 34–45. <https://doi.org/10.1080/10437797.2021.1883492>

Strand, V., Popescu, M., Abramovitz, R. & Richards, S. (2015). Building Agency Capacity for

Trauma-Informed Evidence-Based Practice and Field Instruction. *Journal of evidence-informed social work*. 13. 1-19. 10.1080/23761407.2015.1014124.

Substance Abuse and Mental Health Services Administration (2014). *SAMHSA's concept of trauma and guidance for a trauma-informed approach*.

https://ncsacw.acf.hhs.gov/userfiles/files/SAMHSA_Trauma.pdf

Substance Abuse and Mental Health Services Administration (2022a). *Person- and family-centered care and peer support*. <https://www.samhsa.gov/section-223/care-coordination/person-family-centered>

Substance Abuse and Mental Health Services Administration (2022b) *Trauma training for criminal justice professionals*. <https://www.samhsa.gov/gains-center/trauma-training-criminal-justice-professionals>

Substance Abuse and Mental Health Services Administration (2022c) *Understanding child trauma*. <https://www.samhsa.gov/child-trauma/understanding-child-trauma>

Substance Abuse and Mental Health Services Administration (n.d.) *What is Child traumatic stress?*
https://www.samhsa.gov/sites/default/files/programs_campaigns/childrens_mental_health/what-is-child-traumatic-stress.pdf

Substance Abuse and Mental Health Services Administration's Trauma and Justice Strategic Initiative. (2014). *SAMHSA's concept of trauma and guidance for a trauma-informed approach*. SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. <https://store.samhsa.gov/sites/default/files/d7/priv/sma14-4884.pdf>

Suddaby, R. (2013). *Institutional theory*. In *Encyclopedia of Management Theory* (Vol. 2, pp. 380-384). SAGE Publications, Ltd., <https://doi.org/10.4135/9781452276090>

Trauma-Informed Care Training Center (n.d.). Earn your *trauma-informed care practitioner's certificate online*. <https://traumainformedcaretraining.com/trauma-informed-care-certification/>

Trauma Institute International (n.d.). *Trauma-informed certification program*.
<https://traumainstituteinternational.com/>

United States Census Bureau (2022). *Regions and divisions - history*. Regions and Divisions.
https://www.census.gov/history/www/programs/geography/regions_and_divisions.html

University at Buffalo. (n.d.) *School of Social Work*. <https://socialwork.buffalo.edu/continuing-education/certificate-programs/trauma.html>

University at Buffalo School of Social Work. (2019, October 28). *Developing your self-care plan*.
<https://socialwork.buffalo.edu/resources/self-care-starter-kit/developing-your-self-care-plan.html>

University of North Dakota. (n.d.) *Department of Social Work*. <https://cnpd.und.edu/social-work/>

van der Kolk, B. (2015). *The body keeps the score: Brain, mind, and body in the healing of trauma*. Penguin Books.

van der Kolk, B. (2021, September 17). *What is trauma? the author of "The body keeps the score" explains*. YouTube. <https://www.youtube.com/watch?v=BJfmfkDQb14>

van Dernoot Lipsky, L. (2009). *Trauma stewardship: An everyday guide to caring for self while caring for others*. Berrett-Koehler Publishers.

van Dernoot Lipsky, L. (2015, April 23). *Beyond the cliff*. YouTube.

<https://www.youtube.com/watch?v=uOzDGrcvmus>

Vasquez, M. L. & Boel-Studt, S. (2017). Integrating a trauma-informed care perspective in baccalaureate social work education: Guiding principles. *Advances in Social Work, 18*(1), 1–24. <https://doi.org/10.18060/21243>

Veteran Affairs (2018). *How common is PTSD?*

https://www.ptsd.va.gov/understand/common/common_adults.asp

Walker, V. G. (2022). Elder's life course theory and person-centered research: A lens for conducting ethical nursing research and mental health nursing practice with older adults aging with the diagnosis of schizophrenia. *Journal of Psychiatric and Mental Health Nursing, 29*, 904–914. <https://doi-org.ezproxylr.med.und.edu/10.1111/jpm.12819>

West Virginia Positive Behavioral Interventions and Supports. (n.d.). *The 3 Rs: Reaching the learning brain*. Effective Responses to Trauma. <https://wvpbis.org/wp-content/uploads/Effective-Responses-to-Trauma.pdf>

Wilson, B. & Nochajski, T. H. (2016). Evaluating the impact of trauma-informed care (TIC) perspective in Social Work curriculum. *Social Work Education, 35*(5), 589–602.

<https://doi.org/10.1080/02615479.2016.1164840>