Secondary Traumatic Stress Core Competencies for Trauma-Informed Support and Supervision: Cross-Disciplinary Version

*Original/clinical version can be found at https://www.nctsn.org/resources/using-secondary-traumatic-stress-core-competencies-trauma-informed-supervision

Secondary Traumatic Stress-Informed Supervisors in any discipline will have:

1. Knowledge of the signs, symptoms, and risk factors of STS and support options for team members.

2. Knowledge and ability to self-assess, monitor, and address their own STS.

3. Knowledge and ability to help team members safely share the emotional experience of working with people impacted by trauma.

4. Ability to support the resilience of team members, individually, and collectively.
Defining Terms:

**Secondary Traumatic Stress (STS)**
- Secondary traumatic stress (STS) is a stress response that may occur in an individual after learning about the traumatic experiences of another person through any form of communication (e.g., hearing, reading, observing). STS symptoms can range from mild to severe and generally parallel traumatic stress symptoms (e.g., avoidance; changes in thinking, feelings, and reactions; unwanted thoughts or nightmares).

**Core Competencies**
- Overarching knowledge and skills that guide supervisors in providing secondary traumatic stress-informed support and supervision.
- There is no assumption that supervisors will possess all of these competencies. Rather, this tool helps identify areas for further development and guides the user to resources that strengthen those competencies.

**Benchmarks**
- Specific ways to implement the competencies.

**Supervision**
- Supervision is not the right word for every setting. Read this document using the term that best fits with the structure of organizational support and guidance in your setting (i.e., supervisor/supervisee; department head/team member; leadership team/staff; mentor/mentee; manager; consultant; coach; administrator; peer-to-peer, etc.).
- Supervisor: Any leader who provides support to team members.
- Team member: Anyone working at the organization who receives support and guidance from a leader or peer.
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Secondary Traumatic Stress-Informed Supervisors will:

1. Recognize the **signs of STS** in team members.
2. Describe STS-informed **services and support options** that are available, accessible, and culturally relevant, including formal and informal supports, both internal and external to the organization.
3. Help people struggling with STS access and make consistent use of services and supports in a non-judgmental way.
4. Act as an advocate within the organization for STS supports, training, and resources that can address the impact of STS and that are accessible and culturally relevant for all team members; call attention to policies or practices that may be contributing to STS.
5. Identify how culture, race, gender, other identities, lived experiences, systemic oppression, and implicit bias may impact how STS affects individuals and organizations.

### COMPETENCY

**Secondary Traumatic Stress-Informed Supervisors in any discipline will have:**

Knowledge of the signs, symptoms, and risk factors of STS and support options for team members.

### BENCHMARKS

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### Signs of STS may include:

- Unwanted thoughts or reminders: nightmares, unwanted memories or flashbacks of client’s trauma experiences
- Avoidance of things or people that are reminders of the traumatic experiences of others: isolating from peers and supports, avoiding certain cases, not showing up to work
- Changes in thinking: having negative expectations, exaggerated blame of self or others
- Changes in feeling: feeling negative all the time, unable to experience positive emotions, feeling isolated
- Changes in reactions: being irritable, jumpy, quick to anger, difficulty sleeping, trouble concentrating

### Formal supports may include:

- Employee Assistance Programs (EAPs)
- Mental health/substance abuse benefits and services
- Paid time off
- Regular supervision and/or consultation
- Peer support/mentorship programs
- Wellness programs/initiatives
- Training on STS and resilience
- Changes in job role or assignments
- Informal supports may include talking with peers, mentorship, time with friends/family/pets, and community resources (e.g., recreational, spiritual)
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COMPETENCY

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Secondary Traumatic Stress-Informed Supervisors in any discipline will have:

Knowledge and ability to self-assess, monitor, and address their own STS.

BENCHMARKS

Secondary Traumatic Stress-Informed Supervisors will:

1. **Recognize** how culture, race, gender, other identities, lived experiences, systemic oppression, and implicit bias may affect themselves, their own experiences of STS, and their supervisory relationships and practice.

2. Regularly assess how STS may be affecting their own functioning.

3. Seek to **address STS** when it starts to impact their personal and/or work life.

4. Actively seek support from other team members, their own supervisor, and/or other professional supports.

5. Model and engage in self-care practices and promote opportunities for team members to participate when possible.

Reflect upon the following questions:

- How have culture, race, historical trauma, systemic oppression, and/or implicit bias impacted you and your response to work-related trauma exposure?
- In what ways are you similar to your team members and in what ways are you different?
- How do these differences impact your relationships and interactions with team members?
- Have you assumed similarities or differences that may not be present based on external factors (e.g., both of you are of the same racial category or similar educational background)?
- What are some strategies for addressing these differences?

Strategies to address STS include:

- Practicing mindfulness and relaxation exercises
- Allowing yourself to feel a wide range of feelings (rather than avoiding feelings) without judgment
- Changing negative thinking patterns
- Appreciating what is good and how you positively impact the families you work with and the community where you are
- Taking breaks during the workday
- Maintaining healthy boundaries between professional and personal life
- Building healthy support systems inside and outside of work
### COMPETENCY

**Secondary Traumatic Stress-Informed Supervisors will:**

1. Work to **enhance emotional safety** when meeting with team members.
2. Use active listening skills to help understand and validate team members’ experiences.
3. Identify and build on team members’ strengths to help increase their self-awareness, competence, and resilience.
4. Discuss and **normalize common emotional responses** to working with people impacted by trauma.
5. Provide consistent emotional support to team members, considering their individual needs, histories, identities, and experience.

### BENCHMARKS

**Secondary Traumatic Stress-Informed Supervisors in any discipline will have:**

Knowledge and ability to help team members safely share the emotional experience of working with people impacted by trauma.

<table>
<thead>
<tr>
<th>Strategies to enhance emotional safety during meetings include:</th>
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<tbody>
<tr>
<td>● Ensuring physical safety</td>
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<td>● Being aware of potential threats to emotional safety (e.g., trauma reminders or discrimination)</td>
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<td>● Paying attention to group dynamics and safety in group supervision</td>
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<td>● Holding consistent and predictable meetings, related to both schedule and content</td>
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<td>● Minimizing distractions and multitasking</td>
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<td>● Accepting team members non-judgmentally</td>
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<td>● Making decisions with your team members instead of mandating next steps when possible</td>
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<tr>
<td>● Acknowledging your mistakes</td>
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<td>● Modeling curiosity by asking questions about team members’ experiences and reactions</td>
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<td>● Making time for debriefing and calming activities when emotions are high</td>
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<th>Strategies for normalizing common emotional responses to trauma work include:</th>
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<tr>
<td>● Identifying and sharing emotional responses you have experienced</td>
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<td>● Describing common reactions you have observed in others</td>
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<tr>
<td>● Referring to fact sheets, research articles, and other STS resources that list common responses</td>
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<tr>
<td>● Emphasizing that these are normal and expected responses to an abnormal event which is an occupational hazard and in no way suggests anything wrong with the team member for having these responses</td>
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#### COMPETENCY

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1. **Notice and encourage** when team members are using their understanding of trauma to be more effective in their role. Help them recognize their growing expertise.

2. Identify and develop team member’s strengths and help apply those strengths to job-related activities.

3. Offer opportunities for team members to connect with their team and other professional supports, in order to guard against isolation and develop a sense of shared responsibility to address difficult circumstances.

4. Promote the development of compassion satisfaction by:
   - **Supporting acceptance** of the complexity of the work and the things that cannot be changed
   - Helping team members recognize partial successes, their professional growth, and their increased skill levels
   - Engaging team members in creating a practice of noticing, acknowledging, and savoring positive moments within their role and the impact of their work
   - Reinforcing the benefits of engaging in restorative activities at work and off-hours

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**Questions that can help support acceptance include:**

- What can you do within the scope of your role?
- What can we do together to respond to this complex situation?
- What are some of the factors beyond your control?
- What can you do or say to yourself to cope with factors that are beyond your control?

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**You can support, notice, and encourage team members’ growing expertise by:**

- Sharing resources about trauma and its impact on child and family behavior
- Helping team members identify and use effective skills to manage trauma reactions in children and families
- Recognizing, pointing out, and encouraging when team members use these skills and/or show improvement in their ability to address trauma with children and families.