

Trauma-Responsive Clinical Supervision

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GOALS

1. Define trauma-responsive care.
2. Explain the importance of trauma-responsive clinical supervision.
3. Describe strategies for providing trauma-responsive clinical supervision.

A pair of black sneakers with white soles is positioned at the top center of the frame. The sneakers are standing on a dark, reflective surface, likely a wet pavement or a pool of water. The surface is highly reflective, creating a clear, dark mirror image of the sneakers below them. In the lower half of the image, the words "trauma-informed care" are written in a white, cursive, handwritten font. The text is centered horizontally and appears to be floating on the dark surface, with its reflection visible below it. The overall composition is simple and evocative, using the concept of reflection to connect the physical shoes to the abstract concept of trauma-informed care.

trauma-informed care

trauma.



trauma.

Directly experiencing, witnessing, or learning about an event of actual or threatened death, serious injury, violence, or threat to wellbeing.



trauma.

Event

Experience

Effects



vicarious trauma

Significant disruptions to a helper's sense of self, of others, and of the world. These disruptions result from trying to help another person who is suffering after a traumatic event.

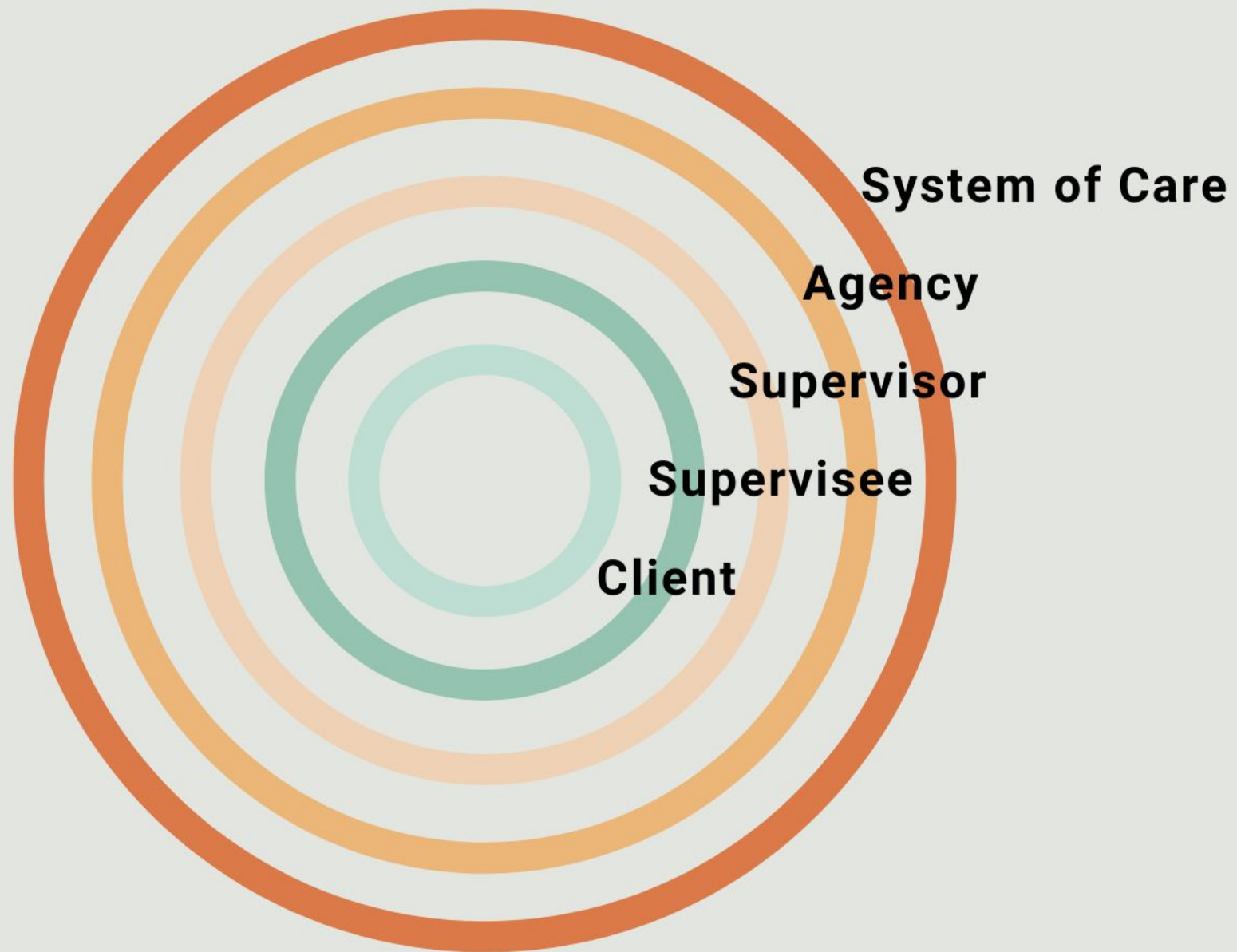


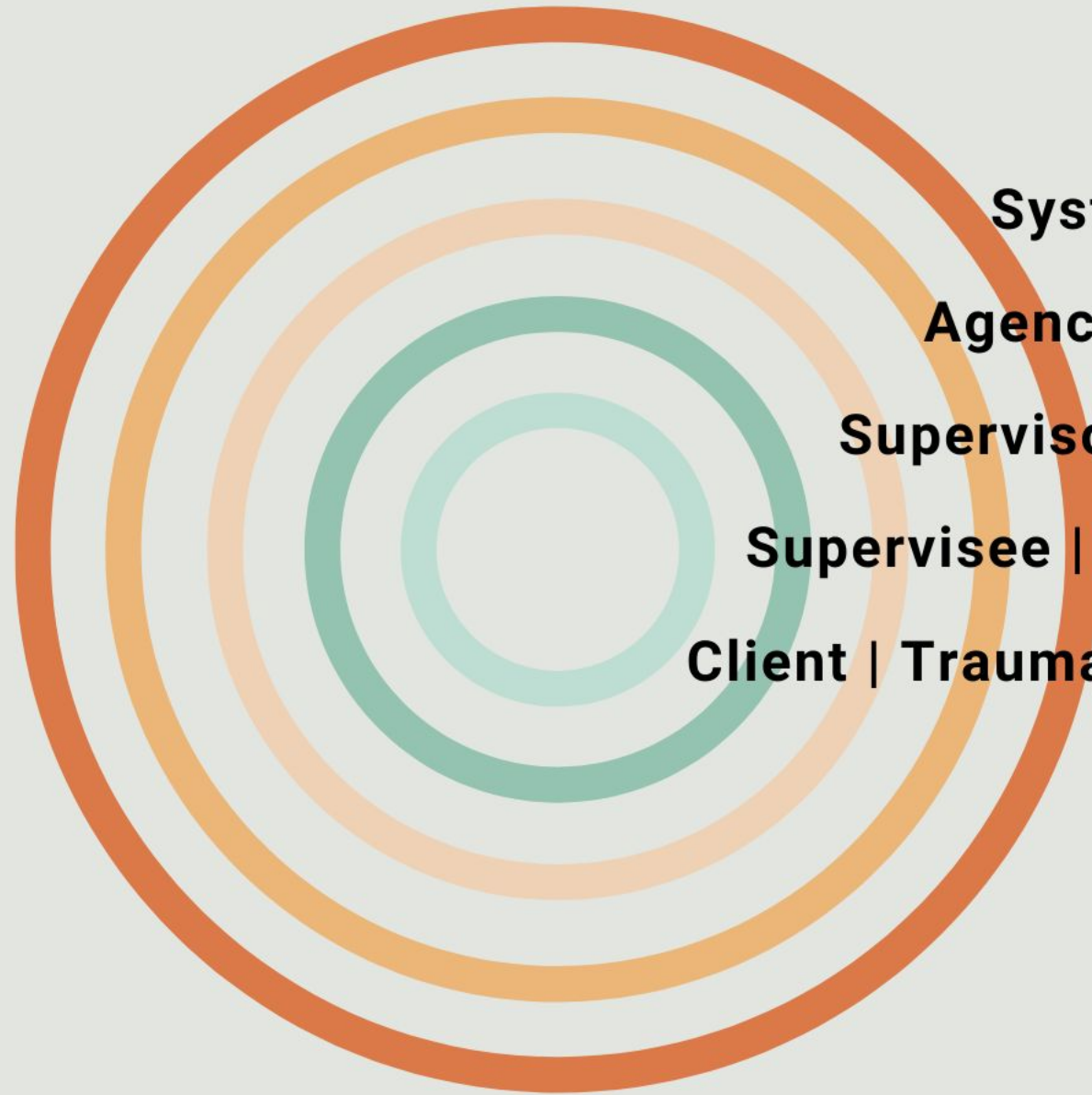
Source: Bride, B., Radey, M., Figley, C.R. (2007). Measuring Compassion Fatigue. *Clinical Social Work Journal*.



Harris & Fallot

2001





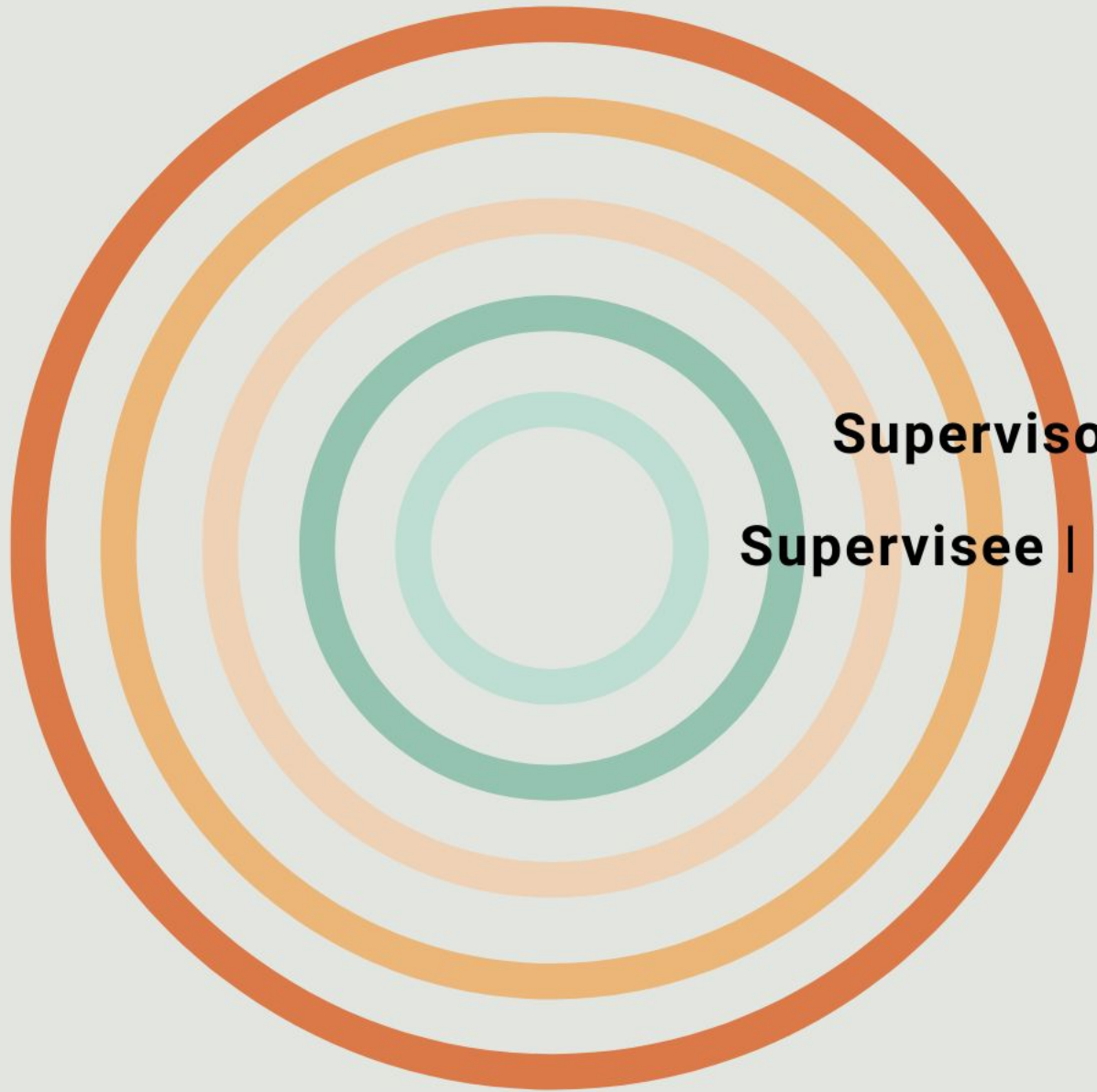
System of Care | Trauma-Informed Care

Agency | Trauma-Informed Organization

Supervisor | Trauma-Informed Leadership

Supervisee | Trauma-Informed Supervision

Client | Trauma-Informed Practice



Supervisor | Trauma-Informed Leadership
Supervisee | Trauma-Informed Supervision

A Continuum for Healing

Trauma-informed supervisors begin to recognize that being trauma informed is just the beginning!

| TRAUMATIZED | TRAUMA-INFORMED | TRAUMA-RESPONSIVE | HEALING |
|-------------------|-----------------------|---------------------------|-----------------------------|
| Safety & Survival | Knowledge & Awareness | Reflection & Anticipation | Collaboration & Proactivity |
| Individual | Client | Provider | System |
| Scarcity | Narrowed | Contextualized | Inclusive |
| React | Recognize | Prepare | Prevent |



WHY?

- Unsupportive organizational cultures increase the risk and effects of vicarious trauma.
- A validating and normalizing organizational culture mitigates the effects of vicarious trauma.
- Organizational and supervisory climates that promote personal well-being and emphasize organizational responsibility are associated with lower risk of vicarious trauma.





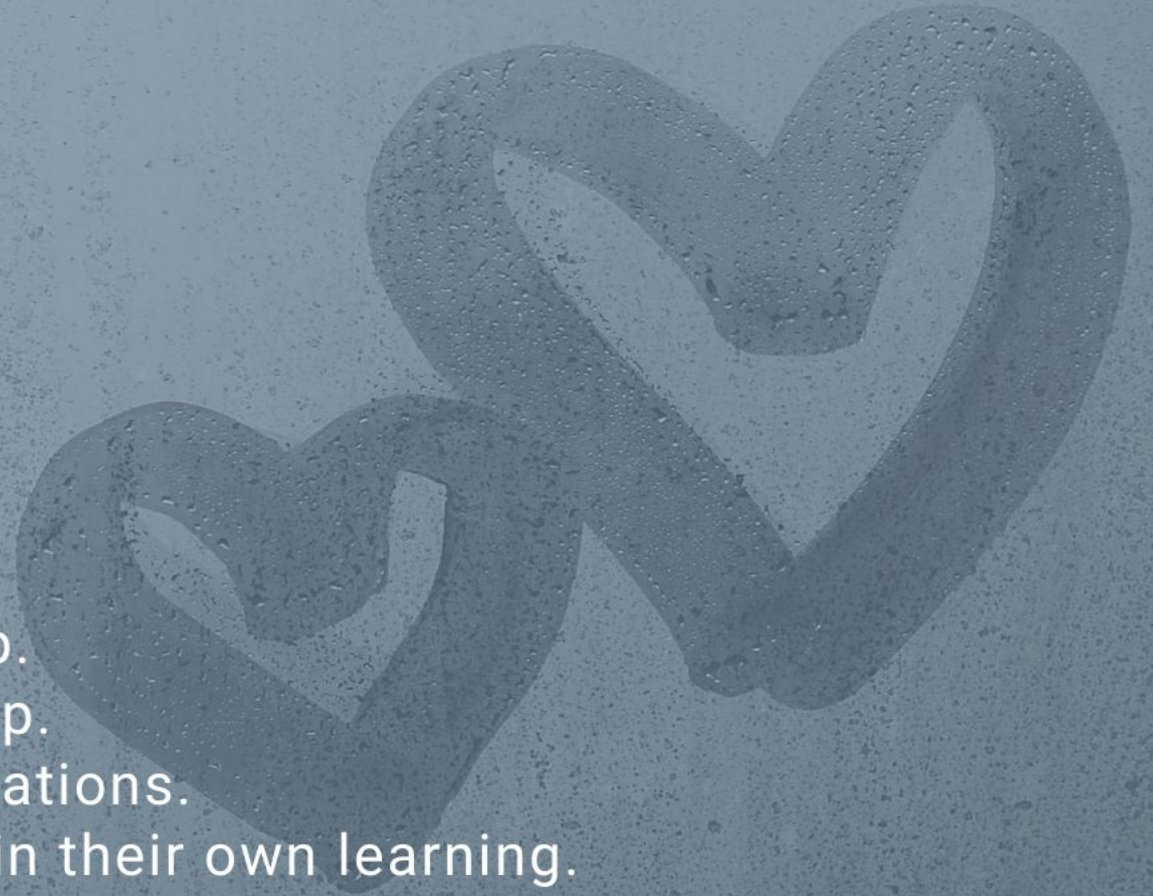
Six Commitments

1. Safety
2. Trustworthiness and Transparency
3. Peer Support
4. Collaboration and Mutuality
5. Empowerment, Voice, and Choice
6. Cultural, Historical, and Gender Issues

Source: Substance Abuse and Mental Health Services Administration (SAMHSA)(2023).
Practical Guidance for Implementing a Trauma-Informed Approach:
<https://store.samhsa.gov/sites/default/files/pep23-06-05-005.pdf>

safety

- Invest in the supervisory relationship.
- Attend to the supervisory relationship.
- Provide clear boundaries and expectations.
- Encourage supervisees to be active in their own learning.
- Help supervisees understand their reactions to the work.
- Normalize and validate the effects of vicarious trauma.
- Identify strategies that support supervisee wellness.
- Understand the distinction between countertransference and vicarious trauma.
- Model transparency and vulnerability.
- Use check-ins to normalize the process of tuning in to supervisee experiences.



trust & transparency

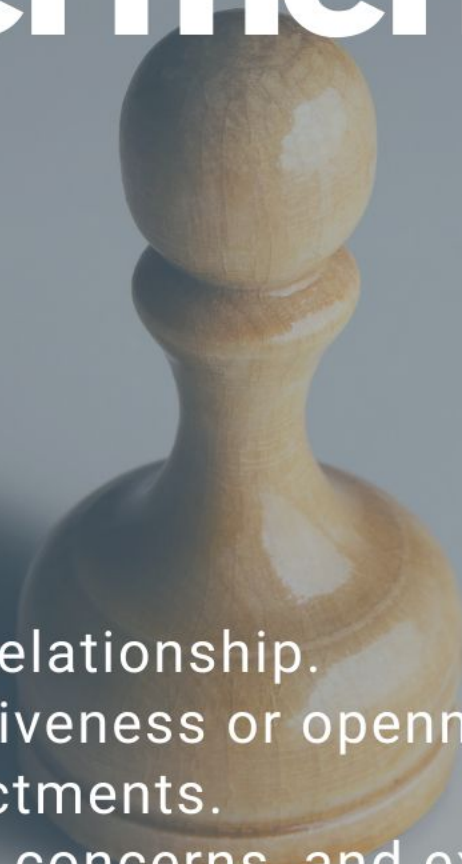
- Achieve competency in understanding trauma and its impact on survivors, clients, therapists, and organizations/systems.
- Help supervisees understand how trauma impacts clients' internal working models, including the therapeutic relationship.
- Address supervisee reactions while simultaneously clarifying and maintaining boundaries.
- Be clear that honesty is the expectation; not perfection.



peer support

- Utilize group supervision.
- Promote opportunities for peer support/connection during team meetings.
- Provide access to and protect time for training/networking opportunities.
- Implement a mentoring/shadowing program for new clinicians.
- Highlight individual and group strengths to promote shared learning.

collaboration, mutuality, & empowerment

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- Acknowledge the impact of the supervisory relationship.
 - Model humility, vulnerability, and non-defensiveness or openness to feedback.
 - Attend to parallel process to highlight reenactments.
 - Use curiosity to clarify perspectives, discuss concerns, and explore challenges.
 - Be mindful of supervisor authority while fostering supervisee autonomy.
 - Maintain awareness of dilemmas involving organizational demands.

culture, diversity, & identity

- Explore the impact of social location, personal experiences, and cultural identities, including in:
 - Supervisory relationship
 - Supervisee's clinical work
- Model and promote personal reflection and awareness building related to blind spots and biases.
- Acknowledge power dynamics and differentials, including as related to issues of culture and diversity.





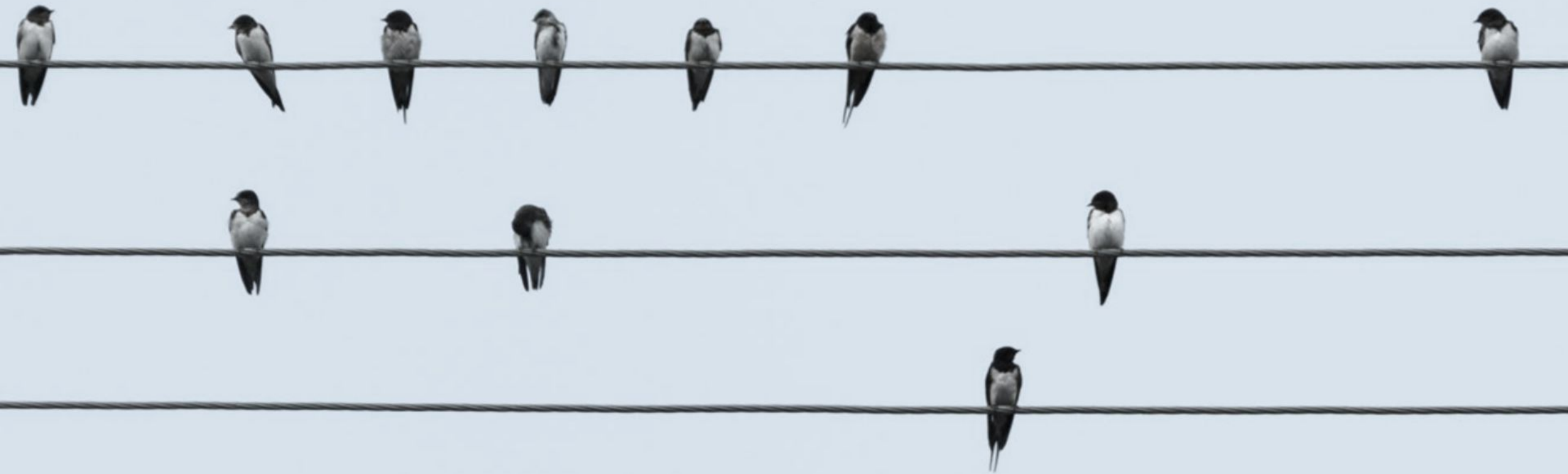
Five Takeaways

1. Make the supervisory relationship a safe space.
2. Be trustworthy and, where possible, transparent.
3. Facilitate peer supports for your supervisees.
4. Empower your supervisees.
5. Model and embrace conversations of culture and identity.

Source: Substance Abuse and Mental Health Services Administration (SAMHSA)(2023).
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“As in all things psychological, what one is told is a lot less impactful than what one is shown.”

Nancy McWilliams (2021), *Psychoanalytic Supervision*, p.132



let's stay connected.



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