PSDP–Resources for Managers of Practice Supervisors:

A spotlight on organisational trauma: the system as the 'client'

Introduction

Although relatively new in this country, thinking of organisations as being able to hold trauma is an increasingly influential school of thought which informs our understanding of workplace culture.

This tool was written by Dr Karen Treisman, a clinical psychologist, trainer, organisational consultant and author who specialises in trauma. Its content was drawn from her direct practice, and from a 2019 Winston Churchill Fellowship trip during which she met with over 100 people from 14 cities across the USA.

The focus of this research was to learn from best and innovative practice around organisational and system change to become more informed about / responsive to trauma, adversity and workplace culture. You can read more about Dr Triesman's findings in her latest book, 'A Treasure Box for Creating Trauma-Informed Organizations: A Ready-to-Use Resource for Trauma, Adversity, and Culturally Informed, Infused and Responsive Systems'.

This tool is an extracted and adapted contribution from that book. It has been developed for middle leaders in children's social care who have a strategic focus within the organisation, and for practice supervisors with line management responsibilities.

Sections one and two of the tool provide information about different aspects of organisational trauma, followed by reflective questions. In section three, you have the opportunity to review the history and journey of your organisation's relationship with trauma, and to reflect on what actions or conversations you might want to initiate as a result.

Please note, this tool is an important but small piece of the overall organisational trauma picture. It is intended to act as a spotlight and a way of beginning to think about this area of work, other aspects of which include:

> cultural humility

> organisational triggers

> organisational adverse experiences.

To develop a more comprehensive understanding of the full impact of organisational trauma, you will need to do further reading and gather more information.

Section one: what do we mean when we talk about organisational trauma?

Just like people, organisations are alive. They're always developing and adapting, and can be equally vulnerable to stress. Loss, dissociation and toxic stress can spread like contagion throughout an organisation. When this happens, it can become traumatised, unhealthy and distressed, which can result in practices that induce (rather than reduce) trauma, resulting in a trauma-driven culture.

In order to protect themselves from painful feelings, organisations often respond to trauma in the same way as people, i.e. by operating in survival mode. When this happens, all that unacknowledged pain, stress, anxiety and dissociation get passed down and pushed deeper into the fabric of their workings. In such cases, you may find that people, teams, or the culture of the organisation itself, can become:

> reactive or crisis-driven

> avoidant, numb, detached or dissociated (either emotionally or from the organisational mission, or both)

> polarised in its thinking e.g. them vs us / good vs bad etc. (this includes 'othering' and splitting processes)

> unreflective or lacking in trust

> too busy to think or feel

> defensive

> on edge and hyper-vigilant

> physically and emotionally unwell

> confused, lost, alone and disoriented

> dysregulated

> chaotic

> frozen and frustrated

> rigid and inflexible (which includes striving for perfectionism)

> mournful and grief-stricken

> helpless and depressed

> disconnected, disintegrated, incoherent and fragmented.

On top of organisational trauma, many practitioners carry their own adversity and stress, which can compound existing factors, as exemplified by this classic quotation from Remen (1994, p. 96):

'The expectation that we can be immersed in suffering and loss daily and not be touched by it, is as unrealistic as expecting to be able to walk through water and expecting not to get wet.'

That's why we need to name, acknowledge and explore the impact of phenomena like secondary trauma, vicarious trauma, compassion fatigue, and burnout, as well as being curious about wider team and organisational dynamics. This is fundamental to our own and to other people's wellbeing.

Wellbeing is not only essential for the work itself, but has a ripple effect on decision-making, relationship-based practice, staff satisfaction, sickness, and so on.

The information you have read in Section 1 is adapted from Dr Treisman's Winston Churchill Fellowship **report on adversity, culturally and trauma informed, infused and responsive organisations**. If you are citing any of this content please be sure to reference this report.

So, thinking more about the notion that an organisation can operate in survival mode and be impacted by trauma, this also means that an organisation, like a person, can become consumed, flooded and overwhelmed by trauma, adversity and stress. For example, the organisation itself, or a team within it, can become 'trauma-organised' and 'trauma-soaked', meaning it can be dominated by survival needs and the forces of organisational culture.

Dr Sandy Bloom, a trailblazer and leader in this field, defines the term trauma-organised in her Sanctuary book series: 'When an individual, family, organisation, system, or culture becomes fundamentally and unconsciously organized around the impact of chronic and toxic stress, even when this undermines its adaptive ability' (2013).

What we might see and feel when this is the case is that trauma, loss, dissociation, dysregulation and toxic stress can spread like a contagion or a wildfire throughout an organisation. It can interrupt the organisation's flow, the ripple effects can be felt throughout the system's multiple layers and if it isn't attended to it can continue to spread and intensify.

The word trauma comes from the Greek *traumata*, which means 'to pierce'. This is entirely apt when thinking of trauma within organisations because it can wound, pierce and permeate individual, familial, organisational and societal layers. Erik de Soir (2015) talks about how the organisation's protective emotional membrane can be pierced by trauma. Trauma can also be absorbed and taken in while at the same time leaking and spilling out. Shohet and Shohet (2019) describe how, without reflection, processing and so forth, trauma can be experienced by the organisation as badly ingested food, swallowed and then regurgitated later.

Although these concepts can be applied to any organisation, they are especially important to acknowledge in places of work where practitioners have to deal with a lot of stress and trauma as a matter of course (e.g., children's social care, residential homes for children in care, prisons, services for those in emotional distress, etc.).

Section two: thinking about an organisation as being like a person alive with thoughts, feelings and values

The information in this section is made up of excerpts taken from 'A Treasure Box for Creating Trauma-Informed Organizations: A Ready-to-Use Resource for Trauma, Adversity, and Culturally Informed, Infused and Responsive Systems'.

Please read the following information with your own organisation in mind, while also considering how it might relate to organisations you have dealt with throughout your personal or professional life.

Organisations are emotional and relational places. They are made up of people who have come from their own families and from a variety of systems, including other organisational families (e.g. previous jobs, workplace climates, other sectors, and so on). Within this, systems and organisations, just like people, are not machines, computers, robots, or blank slates. Organisations can be, instead, helpfully and fundamentally viewed as being alive, and as having a collective brain.

Organisations develop. They grow, they change, and they adapt. Building on this, organisations, systems, and individuals are bi-directional, i.e. they are dynamic. They interact, influence, shape and flow with, to, through and between each other. Therefore, there are numerous mirroring, echoing and parallel processes that can occur, which we need to be mindful of and attempt to respond to.

Like a person, an organisation:

> has a personality, culture and different aspects of its identity

> uses skills, strengths and resources

> has values, attitudes, beliefs, biases, expectations and assumptions

> has a range of feelings – it (or a team within it) can feel anxious, vulnerable, happy, sad, stressed, confused, stuck, attacked, conflicted, angry, helpless, etc.

> has a memory, has travelled on a journey and has a history of experiences

> can be unwell, unhealthy, or have a compromised immune system

> can give off signals and signs when it's unwell, distressed, struggling or dysregulated

> can experience and be impacted by stress, trauma, distress, dysregulation and dissociation

> might be operating in survival mode and therefore have developed ways to cope and protect itself.

Now that you've read this section, please take a moment to pause and reflect on the following questions:

> How did it feel to read the phrase, 'an organisation is like a person'?

> What parallels and comparisons can you see between people and organisations? For example, take each of the points above and try and reflect on them in relation to your organisation. If you were going to describe the feelings of your organisation, or its personality in three words, what would you say? How does it make people feel? If the building could talk what would it say?

> Another example is around the organisational journey. What journey has the organisation been on? What events have shaped and influenced it including its origin, its history, its development, its ghosts and angels of the past and so on?

> How would you work with the organisation if it was a client (your therapeutic skills can be useful when thinking of the organisation as a person in this way)?

> What comes to mind when you reflect on these areas of your organisation? What are you interested in or surprised by? What resonates or helps things to make more sense?

Organisational and societal memory and amnesia

Like people, organisations also have their own influencing events, journeys, embedded stories, roots, and histories. Within this they can also have their own historical trauma, as well as their own ghosts (Fraiberg, 1975), haunters, scars, wounds and shadows of the past. And their own angels (Lieberman et al., 2005), guiders, lighthouses, inspirers and protectors of the past (e.g. inspirational leaders, changemaking decisions, sparkle moments within the work, best practice learning experiences etc.).

We need to find a way to honour and reflect on this history as it not only supports us to understand the cultural and wider context of the organisation, but also to learn from the past, inform the future, and honour the distance already travelled.

This is also important in organisations where there is a high turnover of staff, because crucial, tacit knowledge can easily be lost to devastating effect, as demonstrated by infamous cases like 'Baby P' (Peter Connolly) and Victoria Climbie, or by things like historical institutional abuse. These effects can also be caused by massive restructures, fear-based leadership styles, failed inspections, racism, a bullying culture, and redundancies.

A lack of learning and reflecting on the past can also feed into what many people refer to as 'organisational amnesia', or, as Sandy Bloom describes in her Sanctuary series, 'organisational learning disabilities'. In this case, we can see history repeating itself, and the same difficulties being repeated on a loop. For example, in many Serious Case Reviews, similar recommendations are repeated over and over again, or the way we go through stages of closing residential homes, then opening them, then closing them etc.

This organisational amnesia can also lead organisations to somehow 'forget' who they are and what they are here to do. Their mission and vision can become blurred and diluted. This is interesting as, much like a traumatised person can feel uprooted, ungrounded and experience a fragmented identity, so too can a traumatised organisation. This has been exemplified by many of the organisations Dr Triesman supports. For example, a head teacher in a place of distress told her, 'I came into this to make a difference, I loved kids, I wanted to inspire, I wanted to create a place where my teachers could do that too. But somehow we have lost our way, we are in a sea of firefighting, and paperwork, and the love and vision seem to have dissipated, or are hanging on by a thin thread'. Another organisation shared a similar sentiment, 'We started from a 'child's right' perspective and from a social justice lens, and somehow amidst all the noise, that centre point has gone down the drain.' A social worker said, 'I feel like I'm a mix of a police officer and a lawyer, which isn't what made me want to become a social worker'.

Organisations, like people, also have their own memory and history which will inevitably shape and guide its workers and its culture, positively, negatively and everything in between. And the impact of painful memories or difficult histories is likely to be more damaging if left unacknowledged, unprocessed and unaddressed. When an organisation experiences things like child death, funding cuts, a mass staff exodus, serious allegations and so on, they can be like an 'elephant in the room', felt and clearly there but unarticulated. This mirrors what often happens with trauma, which is often silenced, unspoken, invalidated, ignored and avoided. We can see similar processes occur around culture, which is why cultural humility and responsiveness are so crucial and interwoven with these concepts.

When trauma is unspoken or silenced, which may be the experience of, for example, second-generation survivors of the Holocaust, or children whose parents have experienced abuse, it tends to seep out in other ways. A person may have strong feelings but not know why, become dysregulated or learn to minimise or shut down their own emotions. Or a person may know that something has happened because they sense and feel it but because they haven't had it confirmed their imagination may run wild and they may catastrophise or internalise it.

This echoes what can happen in an organisation when difficult memories or influencing factors that are brushed under the carpet end up being unconsciously present and imprinted into its fabric. This fragmented and unresolved memory can come out in other ways, like a fog in the organisation or through various survival processes, as discussed above and below.

This is also interesting when we think about wider society. What comes and goes or is forgotten and pushed underground, e.g. HIV, Covid-19, incest, famous people who have abused others, childhood sexual abuse, the abuse of people with disabilities, famines, war and so on.

Dr. Judith Herman (1992), a leader in the trauma field, writes: 'The knowledge of horrible events periodically intrudes into public awareness but is rarely retained for long. Denial, repression, and dissociation operate on a social as well as an individual level. The study of psychological trauma has an 'underground' history. Like traumatized people, we have been cut-off from the knowledge of our past. Like traumatized people, we need to understand the past in order to reclaim the present and the future. Therefore, an understanding of psychological trauma begins with rediscovering history' (p. 2).

Having read the information in this section please have a look at the reflective prompts below:

> What are your reflections around the ideas of organisational amnesia, organisational memory, and organisational learning disabilities? What resonates or doesn't? Can you see how these may relate to your own or to other organisations?

> Take an example like a restructure or serious harm (including the death) of a child. How do you think these could shape, influence and impact organisational memory, actions and culture?

> What ghosts, wounds, scars or shadows might there be in your team / organisation? What might the impact of these be? How might they show themselves or be bubbling under the surface?

> What about the angels, inspirers, guiders, lighthouses and protectors of the past?

> What is the story, history and journey of your organisation, including the wider sector such as social services or residential homes etc.?

Section three: drawing a lifeline of your organisation's history and journey

Having read the information in this tool, you can now think further about how these concepts apply to your work contexts by drawing the lifeline of your organisation's history and journey. Please spend a few minutes reflecting on and completing this task, using the template below as a guide.

WHAT HAVE BEEN SOME OF KEY SHAPING & SIGNIFICANT EVENTS IN THE HISTORY & JOURNEY OF THE ORGANISATION? (EG POSITIVE, NEGATIVE & ALL THE SHADES IN BETWEEN)

WHAT IS KEY TO HOLD IN MIND ABOUT THE WIDER CONTEXT & COMMUNITY OF THE ORGANISATION? (YOU MAY LIKE TO DRAW OR CREATIVELY EXPRESS THE ORGANISATIONAL TIMELINE, PATH OR JOURNEY).

DR KAREN TREISMAN SAFE HANDS AND THINKING MINDS

When you have completed this please spend a few moments looking back at your organisational lifeline to reflect on what themes or ideas strike you.

You may find it useful to organise your thoughts by responding to the following question, which asks you to shine a spotlight on organisational trauma and how to think about your workplace and its structures as a 'client'.

Having read the information presented in this tool, what are you going to stop, start or continue doing in order to promote wider discussion and understanding about the impact of trauma on the functioning of your organisation?

An additional tool '**Using visual metaphors to respond to stress and trauma**' has been developed for **the PSDP website**.

Other ways you can use this tool:

You might find it useful to share this with the practice supervisors you line manage, or to use the ideas presented within it to talk further about stress and trauma within your organisation.

You could talk with the practice supervisors you line manage about the ideas contained in this tool and ask for their views on how organisational trauma and memory are demonstrated in your work context.

Working with your peers or with the practice supervisors you line manage, map the lifeline of your organisation in order to acknowledge and find solutions for the impacts of organisational trauma and amnesia.

We want to hear more about your experiences of using PSDP resources and tools. Connect via Twitter using #PSDP to share your ideas and hear how other practice supervisors use the resources.

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