Trauma Informed Supervision: Transfer of Learning

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Trauma Informed Supervision: Transfer of Learning

Objective:

This transfer of learning (TOL) is designed to accompany the Trauma Informed Supervision in APS eLearning. It provides Adult Protective Services Supervisors with four activities that will help them to apply the Substance Abuse and Mental Health Services Administration's (SAMHSA)'s six trauma-informed principles in their supervisory practice.

How to Use:

These activities can be used individually, or in a group for those who have completed the eLearning. The four activities are independent of each other. These activities are created to deepen comprehension, promote discussion and encourage self-reflection on the SAMSHA concepts acquired from completing the eLearning. Self-care should always be kept in mind and further resources are provided at the end of this TOL.

Transfer of Learning (TOL) Contents:

Supporting Self-Awareness and Reflection in Trauma-Informed Supervision

Work Engagement Through Empowerment, Voice and Choice

The Protective Aspect of Team Cohesion

The Role of Positionality in Trauma Informed Supervision

Content Warning:

We recognize that APS work is both challenging and rewarding and APS professionals are whole human beings who have their own experiences before and during APS work. Questions and discussion may activate feelings based on personal or professional experiences, including secondary and/or vicarious trauma and we encourage everyone to manage their self-care in order to safely engage in this transfer of learning.

Supporting Self-Awareness and Reflection in Trauma-Informed Supervision

Purpose: To recognize the impact of pressures a supervisor can be under. To identify commonly felt emotions and consider how to manage those emotions.

Explanation: Being a trauma-informed supervisor takes self-awareness and reflection. This activity is designed to support APS supervisors and can be shared with APS professionals in recognizing opportunities to increase self-awareness and connection. It can be done individually, or in a group.

Instructions:

1. Read reflection prompts below and consider what resonates with you.
    a. What demands or responsibilities, listed below, are you balancing at this time:
        i. A strong commitment and intrinsic desire to be seen as competent and effective.
        ii. Feedback from your supervisor that felt discouraging.
        iii. Legal/Liability concerns.
        iv. Desire to appear confident and knowledgeable.
        v. Navigating situations that call for quicker decision making.
        vi. Experiencing moments where support feels limited.
        vii. Responding to time sensitive expectations.
        viii. Navigating a high-volume workload.
        ix. Other_____
    b. Know that protective emotions can surface during moments of stress or uncertainty.
        i. What emotions, listed below, do you identify with:
            1. *Anxious*: Physical and emotional response due to the sense that something might go wrong, even if you can't clearly identify the threat or explain why.
            2. *Fear:* Concern about consequences, mistakes, or impact to oneself for an identified threat.
            3. *Irritability:* Low tolerance, impatience, easily provoked. It can be created by stress, overwork, and time pressure.

4. *Shame:* Feeling inadequate, wrong, or "not enough." Shame's core message is that "something is wrong with me."
5. *Anger:* A secondary emotion and often covers up fear, shame, and anxiety.
6. *Tension:* Physical tightness in body. It can be part of survival mode: flight, fight, freeze.
7. *Dismissiveness:* Minimizing other's ideas and strategies to reduce one's own discomfort. Can come from unchecked anxiety.
8. *Hopelessness:* The expectation that no action taken will help, that one is powerless. Typically comes with the idea that one's voice hasn't been and won't be heard.
9. *Overwhelmed:* Confusion, Feeling pulled in multiple directions and finding it hard to prioritize, often when responsibilities are high or support is limited.

2. Review and practice the strategy provided:
    a. **Strategy:** Your first word is your breath (Fisher, *2025).*
    b. The purpose of this technique is to slow the breath down and regulate emotion before speaking. Controlling the breath has a physiological response that is calming and allows for more intentional action. This technique can be repeated throughout a conversation. It helps put breaks on nervous system activation.
        i. Breathe in two seconds and take another quick short breath, three seconds of breathing.
        ii. Exhale twice as long, six seconds. (If you breathe out through your mouth keep your lips partially closed which slows down the exhale).
    c. *When utilizing this ask yourself*; What do I need to accomplish? What is my best decision at this point?
    d. Note: Practice breathing this way, including during conversations which helps with focus and control. Controlling your breath is controlling your emotion. *Review the video demonstration link on Resource page.*

Work Engagement Through Empowerment, Voice and Choice

Purpose: To help APS supervisors use look at how they can use work engagement to increase empowerment, voice, and choice while balancing necessary structure with staff autonomy.

Explanation When APS professionals can share input, use their judgment, and have some autonomy in how they complete their work they are more likely to stay focused and invested. Supervisors support this by reducing unnecessary control, recognizing staff expertise, and setting clear and safe boundaries. Having voice, choice, and control also protects against trauma. It helps restore a sense of safety and reduces feelings of losing control and chronic stress in high-pressure environments.

(Bakker, 2017; SAMHSA, n.d.)

Allowing autonomy through work engagement is a protective factor against trauma because having voice, choice, and control restores a sense of safety and agency and reduces helplessness and chronic stress in high-pressure systems.

Two tenants of work engagement are Self-Management and Mobilizing Resources.

Instructions:

1. Read the information below and consider the questions.
    a. Self-Management (*Self-observation, self-analysis, self-goal setting)*
        i. When given the opportunity and encouragement from their supervisors, APS professionals can monitor and manage their own behaviors to be effective at their job and continue to grow. Self-management means the evaluation of one's own performance, which can be done with a supervisor who builds safety. It is about self-cuing; to-do lists, alarms, calendar reminders, post it notes, emailing oneself, and arranging one's schedule in the most supportive and effective way for one's natural workflow.
        ii. *Question*: What structure do my direct reports need from me, and where can I step back to allow them to self-cue, self-evaluate, and manage their workflow?

b. Mobilizing Resources: (Using personal resources to recover/recharge.)
    i. These are two different ways of coping:
        1. Distract and disengage to allow body and mind to calm down and regulate emotions.
        2. Seek to manage the problem or stressor through coaching, consultation or learning new skills. (Lazarus & Folkman, 1984; Skinner et al., 2003)
    ii. Research shows that using more than one coping strategy, called flexible coping, is the most effective approach. Problem-solving works best when your nervous system is regulated, meaning your body and mind are calm enough to think clearly. Being intentional about self-care, both during and outside of work, helps you stay grounded and able to do your job well.
    iii. *Question:* How can I support my team in using both recovery strategies (brief breaks, breathing, other short regulation practices) *and* problem-solving strategies so they can remain effective while managing the complex demands of APS work?
    iv. The Taking Care of Yourself checklist from The National Child Traumatic Stress network has many ideas.

Self-Reflection or Group Discussion Questions:

- How do you currently support empowerment, voice and choice?
- How can trauma informed practices be used to strengthen empowerment, voice and choice?

The Protective Aspect of Team Cohesion

Purpose: To help supervisors strengthen team cohesion by supporting collaboration and mutuality and by creating conditions of safety and trust within APS teams.

Explanation: Trauma-informed supervision relies on SAMHSA's principles of safety, peer support, and **collaboration and mutuality**, which means working together in a way that values shared input and shared responsibility. These principles help APS professionals stay engaged in complex work and support one another. When they are present, staff consult more often, raise concerns sooner, and draw on the team's collective strengths. When these principles are absent, teams may withdraw, speak less openly, and feel less connected. This activity focuses on helping supervisors identify when peer support and collaboration need attention in order to build trust and strengthen team cohesion.

This next activity can be done in a group, or individually.

Instructions:

1. Read the vignette's and answer the questions.

Vignette 1

At an APS staff meeting, the supervisor acknowledges the heavy caseloads everyone is carrying and thanks the team. She reminds them they are "in this together." When one team member talks about a case that has been difficult for him, the supervisor asks, "Does anyone else have thoughts about this?" Several team members offer differing perspectives, and the supervisor points out there are many ways to manage cases and that disagreement can lead to great solutions when done collaboratively and with respect.

Outside of staff meetings, the supervisor encourages peer support by giving her input but also pointing out other team members that have expertise or knowledge in the issue and suggesting consulting. She acknowledges and encourages this peer support during staff meetings. Staff learn the norm is to seek each other out for support and shared problem-solving which strengthens trust in peer support and ameliorates the impact of secondary trauma.

Questions:

- How did the supervisor balance authority with collaboration and peer support in this vignette?
- In what ways did this meeting structure support the trauma-informed principles of safety, peer support and collaboration?

Vignette 2

During an APS team meeting, a staff member raises a concern about managing risk in a complex case and begins to describe how overwhelmed they are feeling. The supervisor states the issue needs to be handled per policy and moves on. When another team member attempts to share a similar experience, the supervisor redirects the conversation, saying, "Let's not turn this into group discussion, I'll handle it offline." The supervisor provides a clear directive and moves the meeting forward, emphasizing efficiency and the need to stay on agenda.

Outside of meetings, staff learn that bringing concerns directly to the supervisor is the only acceptable path. When a worker mentions checking in with a peer about a difficult case, the supervisor reminds them that decisions should come from management to avoid confusion. Over time, staff stop consulting with one another and wait for directions, sharing less openly in meetings and managing stress privately. While expectations remain clear, opportunities for shared learning, mutual support, and collaborative problem-solving quietly diminish.

Questions:

- What moments in this vignette signal that peer support is being limited or redirected?
    - What trauma-informed principles could be used to provide opportunities to encourage peer support?
- In what situations do I default to control or directive responses rather than shared thinking?
    - How do I provide clarity and consistency in my role in order to support trauma informed principles of safety, peer support, collaboration and mutuality.

Self-Reflection Questions (Additional)

- In conversations about concerns, how do I support a collaborative approach rather than feeling I must have all of the answers.

- What does my team learn about voice and choice based on how I respond in meetings?
- How might my need to manage risk unintentionally limit peer support?
- What message does my supervision send about whether staff are expected to think together or wait for direction?

The Role of Positionality in Trauma-Informed Supervision

Purpose: To help APS supervisors understand how positionality shapes trauma informed supervision by looking at organizational pressures, social context, identity, and system forces.

Explanation: Positionality means the mix of our identity, background, and lived experiences that shapes how we see situations—and how others see us. It also includes our role in the system, such as the power, responsibility, and expectations that come with being a supervisor.

Understanding positionality helps supervisors notice how system pressures and cultural, historical, and gender factors influence reactions, communication, and decision-making. This awareness supports supervision that reduces blame, builds psychological safety, and uses authority in a thoughtful, not reactive, way.

Positionality can be thought of as seeing the full picture. When we understand more of the factors that shape ourselves and others, supervision becomes clearer, more relational, and more collaborative. It also helps supervisors apply all six trauma-informed principles by recognizing that people experience safety, trust, collaboration, peer support, empowerment, and cultural or historical issues differently based on where they sit in the system.

For the activity below, you will use the Positionality Mapping.

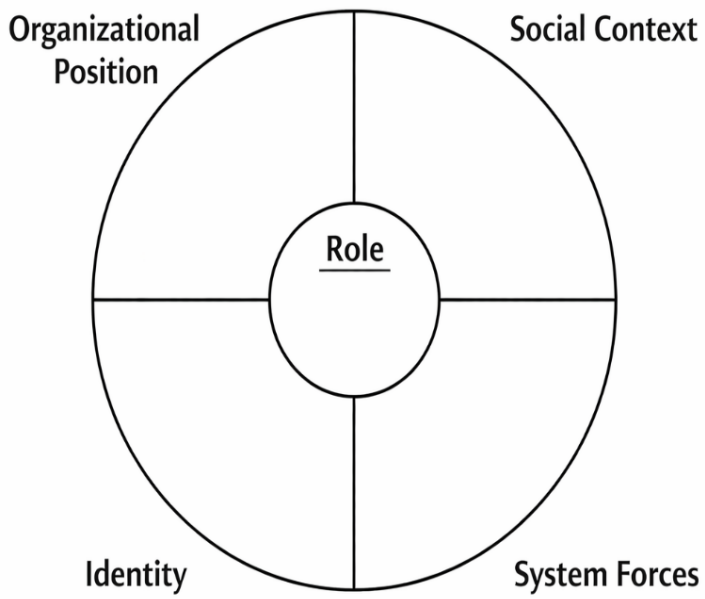
Instructions for Individual Use (Self-Reflection or Supervision Preparation):

1. Begin by writing your role in the center circle (Ex. *APS Supervisor*).
2. Use descriptors under each of the four quadrants to write words or short phrases that describe how you are positioned within the system:
    a. Notice where pressure feels high, support feels limited, or expectations feel unclear.
3. Reflect on how this positionality might influence communication, defensiveness, decision-making, or engagement in supervision.

Instructions for Group Use:

1. Pair up with one other participant.
2. Each person completes the positionality map for themselves, writing their role in the center and filling in each section.
    a. Share the parts of your map *that you feel safe* sharing with your partner and discuss the maps.
    b. What stands out about the pressures or expectations for the role?
    c. How might this positionality influence how a person supervises?

Note: This positionality map may be completed to reflect on your own role and experience, or, when preparing for supervision, to consider a supervisee's positionality to support effective and trauma-informed practice.



Positionality

Quadrant #1: Organizational Position (Job duties)

- Policies
- Audits/Reviews
- Deadlines
- Legal/Liability

Quadrant #2: Social Context (How are you seen?)

- Race/Ethnicity
- Cultural Norms
- Gender expectations/orientation
- Age

Quadrant #3: Identity (Who are you?)

- Lived Experience
- Personal Beliefs
- Competencies
- Professional Identity
- Experiences with Power

Quadrant #4: System Forces (What systems shape your work?)

- Public Policy
- Community Perception
- Structural Inequities
- Media Scrutiny
- Historical Trauma

Conclusion

These activities are designed to encourage supervisors to reflect and move trauma-informed supervision from concept to practice. By reflecting on defensiveness, positionality, work engagement, and peer support, supervisors strengthen their ability to create conditions of safety, collaboration, empowerment, and shared responsibility within APS teams. Rather than prescribing a single supervisory style, these exercises invite ongoing awareness, choice, and intentional use of one's position to provide supervision that is grounded in SAMHSA's six trauma-informed principles.

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Resources

Taking Care of Yourself from The National Child Traumatic Stress Network

Trauma-Informed Organizational Change Manual from the University at Buffalo School of Social Work - University at Buffalo

Free Healthy Minds Program App from Humin

Breathing Trick Technique to Regain Control from Jefferson Fisher Podcast

What is Trauma-Informed Care? from The University at Buffalo School of Social Work

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