

Survivors of childhood trauma reveal the support needed from workplaces

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Childhood trauma affects 1 in 5 adults, with around 8.5 million people aged 18 to 74 years having experienced at least one form of child abuse before the age of 16 in the U.K. The response to this trauma is often

ongoing and impacts interpersonal relationships, which can negatively affect health and well-being throughout life.

Through a research project led by Nottingham Business School (NBS) and funded by The British Academy, a group of 20 survivors took part in interviews to share their [personal experiences](#) of dealing with work and organizational realities.

They revealed a lack of awareness and trust among managers and colleagues within their workplaces, which often led to feelings of anxiety and apprehension, and in many cases the sense of insecurity, vulnerability and of not belonging.

The survivors feared talking openly about the trauma in case it led to stigmatization and bias. They were also concerned about being perceived as the "troublemakers" and creating the perception that their trauma prevents them for doing their work.

Highlighting the support needed, the survivors did not want their organization to try to address the causes of trauma, but instead wanted them to empathize, talk confidently, actively listen to survivors and create the space to receive appropriate support based on individual needs.

Dr. Stefanos Nachmias, research lead and principal lecturer in the Department of Human Resource Management at NBS, also spoke to policymakers and employers as part of the study. He said: "Talking about trauma is difficult as it's a very sensitive topic for many of us. It's even harder for people who have experienced trauma to talk openly, and most importantly to ask for support from their own organizations.

"Survivors shared with me that [past experiences](#) and a lack of trust in the organizational approach to dealing with disclosures meant that they

would rather leave an organization than disclose their trauma, for fear of what the consequences might be.

"Workplaces need to be a psychologically safe space for survivors, but I found that there's confusion as to who is responsible for providing support. The organization itself, [health professionals](#) or the survivors themselves? However, the answer is straightforward. It is a collective effort to develop an approach that offers survivors an appropriate level of support."

Stephanie Hunter, a [social worker](#), author, trainer and therapist, took part in the research, having experienced trauma due to the deaths of her father and young brother. She said: "Trauma and [adverse childhood experiences](#) are in fact not uncommon. I know this from research and the national and international training I deliver and how many delegates seek me out in person and by email to share experiences. What is not available is a consistency in terms of responses to professionals, which are trauma informed and would lead to improvements in productivity and less time in workplace absence, but it is the human cost which pains me. More organizations absolutely need to be trauma informed.

"This research is a positive step forward. In terms of my experience contributing and, for the first time, acknowledging experiences in a professional arena, whilst those involved were warmth and empathic it was not without its sadness. I think we should all work towards enabling authenticity, safely at work and reduced shame cultures to strength based and relational practice models, enabling more recognition of courage and strength."

The study recommends that supporting trauma requires several organizational, operational and management actions to address individual needs. This support covers a number of complex areas including policy development, staff development, workload, disclosure, communication,

performance, and other wider employment practices.

A guide for workplaces has been produced following the study and outlines several practices that organizations should consider at different levels. These include:

- Place trauma into welfare and well-being agenda as a strategic dimension and not a single approach to manage welfare.
- Recognize the importance of supporting trauma survivors in the workplace and create the infrastructure for an integrated, individualized and targeted approach to support.
- Replace high reliance on HR policy and well-being strategy with a more personalized approach based on the individual needs.
- Address high level of anxiety to talk about the trauma and whether their organization offer a balanced support mechanism.
- Improve confidence to offer direct support to individuals who disclose trauma by effectively managing line management processes.
- Consider [legal requirements](#), however, this should be followed by extensive training and development on how to support survivors at different stages. This is because legal requirements only apply for those with a diagnosis. Many survivors do not have a diagnosis, but trauma manifests at work. The process should avoid re-traumatization.
- Seek external support when knowledge in the area is poor and identify best practices.
- Remove activities and avoid making decisions based on personal experience. Any decision to support trauma at work should be only delivered via professional knowledge emerged from specific training and development activities.

More information: The guide is available online:

[www.ntu.ac.uk/research/groups- ... uma-in-the-workplace](http://www.ntu.ac.uk/research/groups-...uma-in-the-workplace)

Provided by Nottingham Trent University

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