



Trauma Sensitivity

Mitigating risk to researchers and
research participants



Our Story

BeDo is dedicated to the wellbeing of impact-driven professionals.

Born from first-hand experience of co-founders, our workshops and events address the unique mental health challenges facing researchers, activists, and humanitarians.

We seek to provide more holistic, practical, and accessible resources to help researches cope with high levels of stress and anxiety during and after fieldwork.



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Course Overview

Introduction

Trauma-informed research

Designing your methodology

A reflective approach

Closing reflections

Objectives

1. Develop knowledge of complex/single-incident and individual/collective trauma, and potential impacts on research processes and outcomes.
2. Cultivate a reflexive understanding of trauma, exploring risk for researchers and self-care as an essential aspect of trauma-informed research practice.
3. Share strategies for mitigating harm to research participants and managing risks of vicarious trauma for researchers.

A social justice approach

Discussions of trauma *must* be rooted in anti-racism and decolonization.

We strive to recognize the collective, intergenerational trauma caused by systemic oppression ([Resmaa Menakem](#))

We seek to honor and uplift alternative, non-clinical healing modalities.

Decolonial trauma theory ([YouTube](#))

01. Trauma-informed research

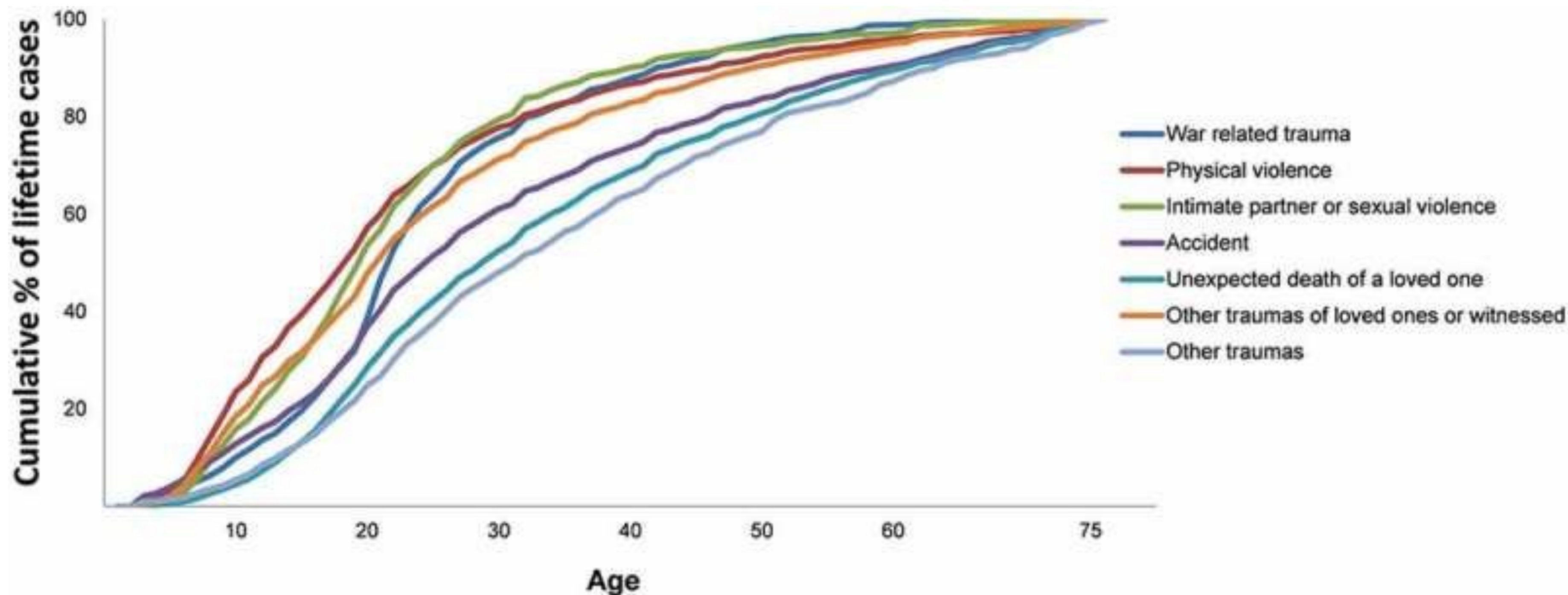
Definitions & context



The ubiquity of trauma

In a study spanning 24 countries, Harvard sociologist Ronald Kessler and colleagues ([2017](#)) found that 70.4% of respondents experienced lifetime traumas. Individuals averaged 3.2 traumatic events per capita.

Prior trauma history predicted both future trauma exposure and future PTSD risk.



Trauma is different for everyone

For some the structural trauma of poverty might have more obvious day-to-day impact on wellbeing than the acute trauma of sexual assault.

-Highly individual

At its core, trauma is the loss of autonomy and control.

“ Trauma is not what happens *to* you. Trauma is what happens *inside* you, as a result of what happens to you.

GABOR MATÉ

Definitions of trauma

Trauma pushes us beyond our ability to self-regulate. It affects our ability to find meaning and purpose.

- Single-incident (Type 1) trauma
- Complex (Type 2) trauma

→ See [this fact sheet](#) for further definitions and distinctions

Bodily-threatening vs. ego-threatening

Traumas we often invalidate

- Poverty
- Immigration
- Divorce
- Chronic illness
- Caring for a loved with one with illness or disability
- Infidelity
- Infertility
- Being unemployed

Be wary of hierarchies. Trauma is highly individual.

Trauma-informed care

Trauma- and justice-informed ethnography ([Winfield, 2021](#))

1. Self-awareness
2. Participant-centered approach
3. Recognition of social location
4. Attention to trauma
5. Knowledge of professional limits
6. Effective boundaries and self-care

Exercise

Written reflection

What kinds of trauma might you encounter in your own research?

- Type 1 vs. Type 2
- Single incident vs. complex
- Individual vs. collective
- Ego vs. bodily-threatening

The nervous system

Sympathetic vs. parasympathetic

Fight/flight/freeze vs. rest/digest/tend/befriend

The vagus nerve ([Porges, 2009](#))

PTSD

Hyper- vs. hypo-arousal

- Constantly on edge vs. total shutdown
- Window of tolerance





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02. Designing your methodology

It's not about avoiding trauma...

Asking hard questions as a matter of empowerment and agency.
We tend to overestimate the interpersonal costs of asking sensitive questions ([Hart et al, 2021](#))

'Negative' emotions not necessarily harmful ([Becker-Blease & Freyd, 2006](#))

Cathartic nature of sensitive interviews ([Elmir et al, 2011](#))

Talking about trauma

Requires safety & familiarity ([Campbell et al, 2004](#))

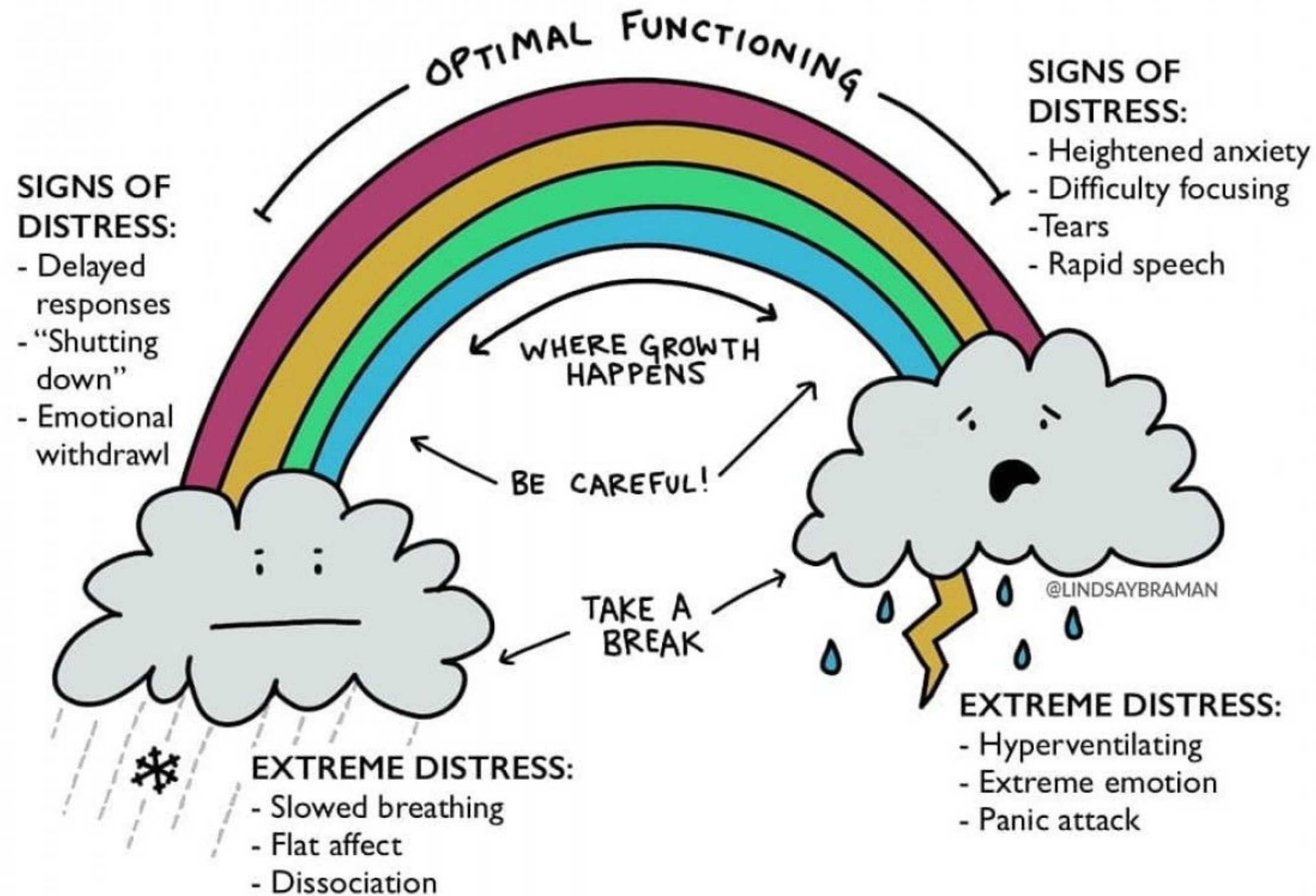
Requires trust ([Fernandez et al, 2020](#))

Reinforces agency, choice, control

- Processes of informed and continual consent
- We are striving for mitigation of trauma, rather than elimination or avoidance

WINDOW OF TOLERANCE

(IN RAINBOW FORM!)



Signs of distress

Talking about trauma is a delicate but worthwhile exercise.

Hyper- vs. hypo-arousal

Tips for self- and co-regulation:

- Breathing techniques
- Self holds ([Peter Levine](#))
- Bipedal movement

Exercise

Scenario

Do you remember a time when you observed yourself or someone else verging on hyper- or hypo-arousal?

How did you respond?

Talking about sensitive subjects

Talking about sensitive subject matter requires:

Safety/familiarity

- *How can we, as researchers, promote safety for our participants?*

Trust

- *How can we build trust with participants?*

Agency

Exercise Scenario

You are interviewing a participant over Zoom, asking her about her experiences as a single mother during the pandemic. Halfway through the interview, she reveals that she is a victim of domestic violence. Her affect goes flat and she speaks in a monotonous voice while recounting a harrowing story of physical abuse by her ex-husband. You still have four more questions you want to ask before finishing the interview.

What do you do?

03. A reflective approach

Vicarious trauma

Researchers returning from the field with PTSD and other mental health challenges is a well-documented phenomenon ([Pollard, 2009](#))

Vicarious trauma is a process of change resulting from empathetic engagement with trauma survivors.

Boundaries: personal and interpersonal
→ *Not too hard, not too soft*

Identify and invest in restorative practices

Navigating triggers

Any word, person, experience, or moment that sets off a [disproportionate] emotional reaction ([Richo, 2019](#))

Might look like...

- Abruptly ending a conversation
- Dissociation or depersonalization
- Righteous anger, wanting to fix the unfixable

'Amygdala hijack' ([Goleman, 1996](#))

- *When it's hysteric, it's historic*

Crafting a skillful response

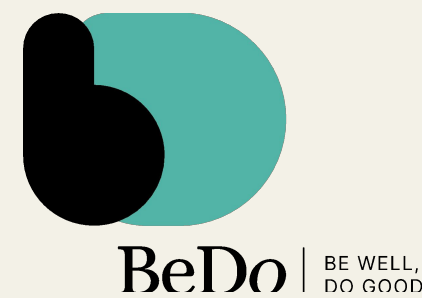
- Separating the event and the narrative

Mindfulness Exercise

Exercise

Written reflection

1. What stood out to you about this practice?
2. Did you notice if this practice opened the door for more compassion?
3. How do you know when you're in a triggered state?
4. What might be a skillful response to this trigger going forward?



Thank you!

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