

## **Trauma Talk:**

An Interview with Childhood Trauma Expert

Dr. Kirby Wycoff

*Carrie Champ Morera, PsyD, NCSP, LP*

PAR Project Director Carrie Champ Morera, PsyD, NCSP, LP, interviewed Kirby L. Wycoff, PsyD, EdM, MPH, NCSP, coauthor of *Essentials of Trauma-Informed Assessment and Intervention in School and Community Settings*. Dr. Wycoff is an associate professor and codirector of the school psychology program at Eastern University. Dr. Wycoff's current research program focuses on adverse childhood experiences (ACEs), intergenerational trauma, disparity and inequity, cultural disproportionality, and trauma-informed systems.

**PAR:** *What inspired you to write this book?*

**KW:** We were inspired to write this book by the students we serve. The vulnerable, marginalized, underserved youth who have experienced adversity and whose needs are not being met. Ultimately, our goal was to impact the experiences of the young people by providing the practitioners who serve them with a go-to resource on trauma, adversity, and resilience.

Many of our colleagues, graduate students, and professionals would reach out and ask where to get information about trauma. They were seeing these kids in their work and didn't have a go-to place to figure out how best to help them. Over the years, it became increasingly clear there was a lack of comprehensive, easily-digestible, jargon-free, practitioner-focused resources in the field. There are some phenomenal resources in the field that go into great depth about the neurodevelopment of trauma, understanding developmental trauma, psychotherapy and treatments for trauma, clinical assessments in trauma, and more. In fact, many of those incredible resources were referenced in this *Essentials* book. But the audience for those texts are often researchers, graduate educators, or clinicians who specifically focus their clinical practice on trauma.

A lot of what we did was translate the peer-reviewed literature and put it into language that was easy to understand and digest and didn't need a huge commitment of cognitive resources to read it. I know for myself, when I am reading a very technical or resource-dense research article, I need to take notes and often read it more than once to ensure I understood what the researchers did and what they found. Essentially, this book has done the legwork for people who don't have the time or are unable to access the peer-reviewed literature.

**PAR:** *How would you summarize this book?*

**KW:** To me, it is a little bit of a crash course in trauma. It is a resource that is meant to get folks thinking about the trauma-informed, trauma-responsive movement. We attempted to address some of the most fundamental questions that people have about this work. First of all, what do *trauma-informed*, *trauma-responsive*, or *trauma-aware* even mean? What is the history of this movement? In order to understand where we are as a field and where we want to go, we need to acknowledge and understand the history. This really frames the context of the conversation around trauma, adversity, and resilience. Then, we also wanted to address what this means for the folks who are doing the incredibly difficult work on the front lines.

For folks who need it or want it, the book includes the nuts and bolts of trauma. There are things in this book for folks who have never thought about trauma. But, then we take it one step further. There are things in this book for advanced practitioners who are deeply immersed in this field.

**PAR:** *Your book explores five sections (history of trauma, complex trauma, assessment, intervention, and ethical considerations). Which one was the most challenging to write and why?*

**KW:** The whole thing was hard because I felt I had a deep responsibility to get it right. I think the hardest to write was the first section. If I was going to take on the challenge of synthesizing all of this research and literature, then it was absolutely essential to understand and acknowledge all of the various people who have been a part of this conversation—not just as practitioners, but those whose lives have been impacted by trauma. I wanted to understand the history and understand the lived experience of trauma.

When you talk to communities who have experienced historic oppression and marginalization, trauma is not new to them. They have experienced inequity, racism, and trauma in their communities for generations. We have to remember that for many people this is not a new conversation. There are many communities who have experienced this and have been living this long before it became a movement and the rest of us started talking about it.

As a writer and researcher, I needed to be very true to honoring that history and deeply understanding how this movement has evolved, whose voices have guided the narrative, and whose voices have been excluded. I had to consider my own identity as a White, cisgender, heteronormative, able-bodied woman and all the privileges that accompany this, to understand how this impacts folks differently.

**PAR:** *Why is it important to assess trauma in the school and community settings?*

**KW:** Because it is there. We can either chose not to acknowledge it and continue to fall short in meeting needs or we can

acknowledge it is there and figure out how to help. We need to know how to effectively and ethically assess for its presence and then use assessment data to drive intervention planning. I was recently at a community meeting with one of my research partners talking about this very thing. We were discussing how trauma impacts our own county. We live in the one of the wealthiest counties in the entire state. When state and federal resources are dispersed down to the county level, there is an assumption that in a county like this, trauma does not happen. That is not true. Within this county, two zip codes or school districts right next to one another can have drastically different resources, access to health care, high-quality education, safe housing, and more. This happens all across the country. These inequities are present everywhere.

We need to understand where and how it is happening so we can shift the paradigm. Acting as though this is not a reality and burying our head in the sand does a great disservice to those we serve. This extends beyond just assessment at the individual level. We must also consider trauma in the context of the family system, the school system, the health care system, the judicial system, and more. We are not just talking individual trauma assessment, but also things like policies, practices, systems, and structures that are not trauma informed. This is why we must integrate an awareness of trauma and adversity into our assessments at every level.

It is important to address and assess trauma because we need to use assessment to drive interventions. If we are wrong about why something is happening or what is going on in someone's life, then our recommendations and interventions will be ill informed and likely ineffective.

**PAR:** *What is a trauma-informed assessment framework and why is it important?*

**KW:** A trauma-informed assessment framework is a structure the provider or the clinician has around their awareness and their knowledge about the role of trauma and how it plays into the lives of children, adolescents, and their families. It is a way of thinking that allows us to be more aware of the possibility that something other than X, Y, or Z is causing someone's difficulties. It is a recognition and responsiveness to understanding the lived experience of another. Research tells us that different communities are disproportionality impacted by adversity. Because of the histories of inequity and structural racism (i.e., red lining) in these communities, the experiences of trauma are often attenuated and amplified. Trauma and adversity can occur anywhere, but historical trauma and intergenerational trauma absolutely cannot be excluded from the conversation. This means that in underserved, marginalized, and

minoritized communities, *we as providers* have more work to do to better understand the history of inequity. Knowing this, understanding this, acknowledging this, and integrating this into one's worldview—that is what having a trauma-informed way of thinking means to me.

**PAR:** *What is the top ethical consideration professionals should pay attention to when providing trauma-informed assessment and intervention?*

**KW:** We have to be thoughtful, mindful, and intentional about how we do this. We have to be intentional about how we gather this data, ask these questions, and approach this conversation. It is wildly unethical to dig into someone's trauma history and open up things they have pushed deep down inside themselves and go in there and activate that without any follow up. We can't leave folks hanging like that.

We absolutely cannot have a conversation about trauma without also having a conversation about resilience. I cannot do a screener—or even begin to talk about trauma—if I don't ever have a conversation about resiliency, strengths, resources, and hope. If I do not leave the individuals I interact with with a sense of hope, that their future can be what they want it to be and they can be successful in their lives and in their relationships, then why am I doing this work?

If being trauma informed becomes one more way to perpetuate historical inequities then we are doing it wrong. When we talk about doing this work ethically, this must be at the core of the conversation.

**PAR:** *What was the most surprising thing you learned when writing this book?*

**KW:** One of the things I didn't expect was that it would become such a personal journey. I don't think I expected it to change me as much as it did. Writing this book and becoming immersed in this world of trauma and building my expertise has changed my world view. While you can keep this very academic and very scholarly, it is also personal. The deeper I dug into this content and the more I learned about the history of oppression and marginalization, systemic and structural racism in our country, and the ways all of that connects to trauma, the more I grew.

All of this, this personal journey, the uncomfortableness of it, that surprised me. It had me thinking a lot about whose voices have been heard, whose stories have been told, whose perspectives have been privileged and prioritized, and whose had not. And then, how does that intersect with adversity and trauma? There are folks all across the country and the world who have ongoing, intergenerational experiences of oppression and marginalization. This is different

than my own experience. This awareness is increasingly a part of who I am both personally and professionally.

I can say, unwaveringly, that it is critically important for us as practitioners to think about history, our own identities, and our own privileges. This is an ethical imperative. My call to action to my colleagues is to begin the hard work around examining your own privilege, identity, and history because that matters.

**PAR:** *What do you hope your readers will take away from your book?*

**KW:** Different readers will take different things from it because it was intended to be a book you can pull off the shelf and go to whatever chapter you need. I imagine there are some people out there who own this book and who have never looked at some of the early chapters. They will get what they need in the later sections because we provide more sophisticated and advanced content later in the book for those who are further along in their learning journey. Aside from that, my hope is that readers will start to lean into the hard parts of the conversation, that they start to consider themselves, their identities, and their own privileges.

I know that practitioners in the field are feeling overwhelmed, burnt out, and like they do not always have the tools they need to be effective. As folks start to think more about their own identities and how this connects to trauma awareness, it also affords them the opportunity to use their voices differently. This is part of my hope for readers—that they start to think more about systems and policies and how they can use their voice, knowledge, and understanding to change things. My hope is that readers can use some of what they learned in this book to embark on their own journeys of growth and discovery and be thought leaders among their colleagues, peers, and in their districts and communities. My hope is that readers build on this and become truly trauma aware. Not trauma-aware professionals, but trauma-aware people, and they go and share that with others. This is the ripple effect; this is how things will change. My deepest hope is for change. I am humbled to think that anything I write could play even a small role in helping make change happen.



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Carrie Champ Morera, PsyD, is a licensed psychologist, nationally certified school psychologist, professional counselor, and board-certified telemental health provider with 19 years of experience in the mental health and education fields. She has provided psychological, supervision, and consultative services in schools and outpatient settings. At PAR, Dr. Champ Morera assists in driving product strategy, definition, and execution for PAR's clinical assessment product line. She serves as the primary content specialist, project manager, and psychometrician for the development of print and digital assessment products. Prior to joining PAR as a project director, Dr. Champ Morera led the admissions assessment function for a residential school in Pennsylvania in which she designed, implemented, and managed the evaluation and review of applicants to maintain a student body and school program.

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