## SPECIAL SECTION

### ORGANIZATIONAL TRAUMA

"Our field is still young and relies on the dedication of a diversity of practitioners to take bold steps to deepen the ways we help organizations and systems to heal."

# Could an Organization Be Suffering from PTSD?

By Shana Hormann, Pat Vivian, Dimple Dhabalia, Mary Dumas, Susan M. Glisson

#### Abstract:

Organizational trauma cuts across all sectors, slamming organizations from without, erupting from within, or slowly poisoning the organizational culture over time. The authors share stories from their experiences as practitioners, leaders and consultants who have worked with organizations and teams to identify sources of trauma, understand the resulting destructive organizational patterns, and gain constructive strategies for organizational resilience and well-being.

Keywords: Organizational Trauma, organizational culture, workplace trauma, PTSD, Secondary Traumatic Stress, Vicarious Trauma, Compassion Fatigue, racism, critical incident stress, moral injury, brave spaces, conflict management, reflective practice, community conflict, inter-generational harm

Could an organization be suffering from PTSD? That question, posed in mid-1990s, started Pat Vivian and Shana Hormann on a quest to understand organizational trauma.

Beginning in the 1980s, volumes of materials were written about trauma, trauma response, PTSD, STS, vicarious traumatization, and compassion fatigue along with strategies for organizations to deal with individuals-clients or staffwho suffered from any of these maladies. "Regardless of their theoretical frameworks, all constructs refer to the negative reactions of helping professionals specific to their work with trauma survivors" (Bell, 2003, p. 514). A multitude of frameworks offered ways to understand trauma symptoms and how to address them. Strategies included individual self-care (Stamm, 1999; Violanti & Gehrke, 2004), team-based approaches, (Munroe, Shay, et al., 1995; Figley, 2002) and institutional responses (Catherall, 1995; Bell, 2003; Violanti & Gehrke, 2004). None of the thinking addressed the organization as a whole.

The *individual* remained the focus of the trauma impacts and interventions.

Using their disciplines of social work and systems psychology to understand what they were seeing in not-for-profit organizations, Vivian and Hormann began by asking one question: might organizations begin to exhibit the same symptoms as individuals? Using this as a starting point, they developed a framework for understanding traumatized organizations. They noticed patterns that first led them to the insight that an organization's culture was influenced by its mission and work (Vivian and Hormann, 2013) and that the culture was passed on from one generation of workers to the next (Schein, 1990; Diamond, 1993). An organization's culture was like an individual's personality, influenced by internal and external factors. Putting together their understanding of culture with observed evidence of trauma in organizations, Vivian and Hormann labeled this "organizational trauma." They were in close communication with a trusted colleague, Howard F. Stein, who

gave them the first definition of organizational trauma:

"Groups, for example workplace organizations, can experience traumas just as individuals and families can. We speak of September 11, 2001 as a 'national trauma,' not just metaphorically, but literally. The protective emotional membrane was penetrated, violated, perhaps destroyed. At any level, trauma is an experience for which a person-family-group is emotionally (not only cognitively) unprepared, an experience that overwhelms one's defensive (self-protective) structure and leaves one feeling totally vulnerable and at least temporarily helpless" (Personal communication, 9/28/04).

Since their groundbreaking paper Trauma and Healing was published (Vivian and Hormann, 2002), the work of practitioners and leaders to recognize and understand traumatized systems—and help them heal—has broadened and deepened. Most recently, the world has suffered from a deadly pandemic. In the United States the extra-judicial killing of George Floyd by a police officer in Minneapolis exposed a dangerous reality. The systemic unraveling of laws and policies protecting women and individuals in the trans community. Indigenous communities in Canada and the United States have made public the horrors of missing and murdered women and children as well as the experiences of Native boarding school survivors (https:// boardingschoolhealing.org). Unhealed trauma and traumatization, historic and current, is fatal to the health of people in Communities of Color and Indigenous Groups (Lebron, D., et al, 2015; Kirkinis, K., et al, 2018; Kleinman, B. Russ, E. 2020; Gameon, J. A. and Skewes, M. C., 2021).

Our field is still young and relies on the dedication of a diversity of practitioners to take bold steps to deepen the ways we help organizations and systems to heal. This paper highlights the varied ways practitioners have used the ideas and framework of organizational trauma and healing. The authors are practitioners, leaders, and consultants who have worked

### Types and Sources of Organizational Trauma-

Туре	Source	Example
Single devastating event	External	Public shooting, loss of funding, severe weather destruction
Single devastating event	Internal	Suicide of leader, abusive behavior, violence, insider embezzlement
Ongoing wounding	External	Pandemics, threats or overt hostility directed at organization from the community
Ongoing wounding	Internal	Abusive or destructive leadership practices, harassment or sexual violence
Empathic nature of the work	Internal	Unclear boundaries, compassion fatigue, vicarious trauma
Redemptive nature of the work	Internal	Internalized judgment, guilt, depression, despair

\*Vivian & Hormann, 2013

Chart 1. Types and Sources of Trauma

with organizations and teams to navigate through organizational trauma, so that they may begin to make sense of their experiences and gain constructive ways of thinking about organizational dynamics. We are sharing stories from our experience to demonstrate the pervasiveness and sources of trauma in organizations as well as strategies for increased organizational resilience and well-being.

### **Background**

Organizational trauma may result from a single devastating event, from the effects of many deleterious events, or from the impact of cumulative trauma arising from the nature of the organization's work (Vivian and Hormann, 2015). Organizational trauma cuts across all sectors, slamming organizations from without, erupting from within, or slowly poisoning the organizational culture over time. Leaders often struggle to identify organizational trauma; the resulting destructive patterns are then misidentified as the fault of individuals or teams rather than systemic. Therefore, strategies to change the hurtful and negative organizational dynamics are largely unsuccessful. Chart 1 (adapted from Vivian and Hormann, 2013) describes types and sources of organizational trauma with examples.

Stories reveal the events, patterns of behavior, systems, and frameworks operating within the system (Kemeny, Goodman, Karash, 1994). Identified patterns often hold clues as to sources of trauma and sources for healing (Brown, 1997). Acquiring and understanding systemic information makes clear whether the organization is moving toward the existing anxiety and therefore toward healing, or constructing defenses against the anxiety (Hormann, 2007).

### **Reflection Prompts and Questions**

Prompts and Questions we used in the following stories to demonstrate how we approach our work and how we reflect on our practice:

» What made you think traumatization was occurring/had occurred? (This is a reminder that our practices have breadth that enables us to see from different perspectives. It is useful for other practitioners to know that they can use their entry frameworks to recognize symptoms of trauma/traumatization).

Describe how you helped the client (or your organization).

What key approaches/frameworks did you use?

- » Describe how you helped the client (or your organization).
- » What key approaches/frameworks did you use?
- » What were the outcomes?
- » What did you learn from this work?

# Story #1 Storytelling as an Intervention for Healing Organizational Trauma Dimple D. Dhabalia

For close to two decades I worked for a branch of US Citizenship and Immigration Services focused on asylum and refugee adjudications. Occupational mental health challenges including vicarious trauma, secondary traumatic stress, critical incident stress, compassion fatigue, and moral injury, were common experiences for our staff, but the stigma associated with mental health led people to suffer in silence for decades.

The work itself, while meaningful, was also fast-paced, high-stakes, and stressful. This stress combined with the politization of the work by different administrations, and the organization's perpetual unwillingness to acknowledge, let alone address, the corresponding mental health realities, created a frustrated staff who often felt unseen, undervalued, and disrespected, and a traumatized culture where exhaustion, burnout, isolation, and jadedness were the norm.

This was the culture within which we were operating in March 2020 when the COVID-19 pandemic began ravaging the world. Very quickly organizational leaders decided to pivot to 100% telework; however, their expectations of staff productivity remained the same with no consideration for how uncertainty, grief, and social isolation were impacting people. This lack of consideration only further exacerbated staff discontent and further traumatized the organizational culture.

I oversaw a small staff focused on workforce well-being, and like everyone else, we didn't know much about the virus wreaking havoc around the world. However, we did understand the resulting experiences of fear, anxiety, grief, and social isolation our colleagues were trying to

navigate. In response, we launched a series of virtual storytelling circles we called "coffee chats," to create brave spaces for people to come together and openly share their experiences.

We call these "brave" spaces because this term, as noted by Beth Strano in her poem, An Invitation to Brave Space (2023), acknowledges that there is no such thing as a safe space since "we all carry scars and have caused wounds." It recognizes, and allows for, the imperfections of reality that pop up in moments of vulnerability in community, encouraging people to share pieces of themselves without minimization or fear of offending others.

Storytelling is a powerful intervention with tremendous potential because it not only acknowledges the complexity of our experiences, but it also soothes our hardwired need to connect with others, making us feel safe. Story circles are a vehicle for storytelling specifically designed to create brave spaces for individuals to express their emotions, and find solace, empathy, and understanding from those who can relate to their experiences, creating the conditions for transformative journeys of healing. Integrating story circles into the culture of an organization takes time, especially since we've been conditioned for so long to keep our thoughts and emotions to ourselves. Part of this process is helping staff and leaders understand that vulnerability doesn't require us to share our whole life's story, just our humanity.

We structured our coffee chats to last between thirty and forty-five minutes and limited them to no more than twelve people and a facilitator to ensure that everyone who wanted to would have a chance to speak. While we initially selected themes that related to issues with which we knew the workforce was struggling, as new issues arose—a potential furlough, the murder of George Floyd, the challenges of homeschooling children—the structure made it easy to pivot and create corresponding chats.

Within months of starting, we were offering eight to ten different coffee chats each week, facilitated by various levels of leaders. Feedback from staff told us that having their stories witnessed by others

who were experiencing similar challenges validated their own experiences and served as a reminder that they were connected to something bigger and weren't alone during a time when so many around the world felt disconnected and isolated. Since the chats were open to the entire workforce, people had an opportunity to get to know their colleagues from across the organization, which didn't often happen. In addition, by engaging senior leaders as facilitators, we gave our staff unique opportunities to get to know their leaders and vice versa on a human-to-human level.

While much of the healing through storytelling happens on an individual level, it's important to remember that we work in organizations made up of systems that were created by humans. If the humans are traumatized—and almost every human being has been—these systems will be, too. Using story circles to help individuals within the organizations heal, ultimately will contribute to healing the organization as well.

## Story #2 Mediation and Collaboration Mary Dumas

My work starts with the first call with the organization or agency. As a professional mediator and collaboration consultant, I am listening to learn from requests and questions. I make note of current conflicts and intergenerational issues. In this case, the director of a multicultural family court service for a rural county spoke to me about the complexity of cases and types of staff issues that can arise when serving families in crisis. Tensions were building given the mix of lived experiences, moral, and ethical outlooks of the staff. Differing professional responses and bystander impacts added friction. She hoped a resilience building initiative, conducted in her final year before retirement, might focus improvement conversations and build comradery. I noted that some events described could be big T and small t traumas, though these were not my observations to name

My observations did inform the design of a series of structured reflections (staff

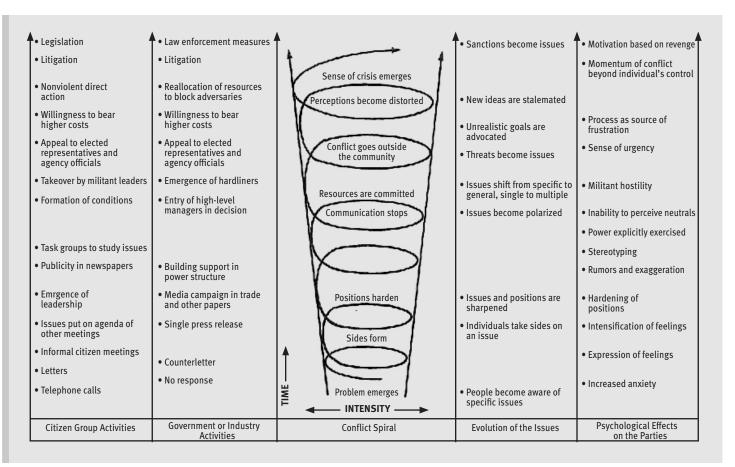


Figure 1. Spiral of Unmanaged Conflict (Carpenter, S. and Kennedy, W., 2001)

interviews, anonymous survey, private worksheets) and staff dialogue sessions to explore the input generated. Privately, staff reflected on the complexities of conflict (*Figure 1*) experienced at work. The initial all-staff retreat focused on ideas for improvements and concerns. Two subsequent sessions focused on collectively digesting new learning. Regular leadership coaching sessions were held parallel to the group sessions. There was no rush in the process of learning what to address now, next, or soon.

Over a six-month period, staff practiced wondering aloud when things didn't feel quite right, noticing and naming

known conflict patterns, and identifying pathways for resolution, healing, and repair. The practice of structured pauses for reflection and emerging insights, as well as silence in the sessions gave space for the unaddressed harms and impacts to arrive at the table. As staff identified and raised topics for discussion, multiple options for healing and repair were generated. Together their diverse experiences were translated into systems-focused actions on key issues identified. Shared metrics provided ongoing feedback check points to navigate momentum, failures, and emerging information. Together staff created a shared vocabulary and muscle

While much of the healing through storytelling happens on an individual level, it's important to remember that we work in organizations made up of systems that were created by humans. If the humans are traumatized—and almost every human being has been—these systems will be, too. Using story circles to help individuals within the organizations heal, ultimately will contribute to healing the organization as well.

memory on how to stay connected to each other, to access needed information, and to generate personal hope.

## Story #3 Healing Divided Communities Susan M. Glisson

Healing divided communities in order to create equitable and inclusive places is no easy feat. Having facilitated community dialogue processes in Mississippi communities with fraught racial histories, I have discerned key ingredients for acknowledging violent racist histories and changing mindsets to address the legacies of those histories. Where typical projects with goals for equity and justice often begin by identifying preferred outcomes, the work I engage in has been more effective not by beginning with a destination in mind but rather by focusing on practicing respectful dialogue to ground groups in trust and courageous conversations about difficult issues. Such dialogue takes place in a heart space more than in an intellectual space, and the resultant community trust

is necessary for purposeful, inclusive, and just social action.

### **Efforts to Shift the Community Narrative**

In 2004, local leaders in Neshoba County, MS, sought to honor the three victims of the civil rights murders on the 40th anniversary of their deaths on June 21, 2004. They invited me to facilitate that process. In the four decades since the murders, none of the over twenty suspects in the murders had ever been held accountable by the State of Mississippi.

At the first meeting, while all the attendees knew the details of the murders, and, largely, knew who the murderers were, the local community simply did not talk about them. Young people from the area who left Mississippi were shocked when people from outside of the state told them the story of their own hometown. The group described a pall that hung over the town, preventing advancement.

While participants shared similar hopes of improving the local community, they had different reference points of meaning for why and how to pursue that goal. Suggestions varied across a wide range; there was no consensus, except for cordiality in lieu of disagreement. The only commonality was that each idea focused on specific action steps. The traumatized community left too much unsaid; at that point, the participants did not have sufficient courage to be vulnerable enough to share what each person was thinking.

#### **Creating Safe Space for Dialogue**

At the next meeting the following week, we stopped focusing on outcomes. It was important just to get people to sit in a circle and to share their stories. Over the next several meetings, the group built a sense of trust through their stories and learned of the wide spectrum of consequences related to their shared histories.

Not only were the black participants frightened to live in their community and angry that the victims and their families had not received justice, they feared that the bold freedom of the known murderers reflected lingering racism and complicity among town whites and prevented access to opportunities for black citizens. They doubted that white residents cared about the murders.

For white participants, the events instantiated other, equally complex emotions. There was hope that the history would stay buried. There was shame and guilt that such horrific attacks occurred and that the white establishment had not held anyone accountable, especially when the names of law enforcement officials and Klansmen who committed the crime were known. There was anger and resentment that all Whites were somehow to blame for what many viewed as the actions of a few. And white participants received criticism from others in town who were still glad it happened.

Members from the Mississippi Band of Choctaw Indians broadened the group's understanding of the role race played for their tribe in the cauldron of black and white relations. Their experience of the murders and their aftermath did not fit neatly into the black/white paradigm.

Through that initial process to create a safe space, the group began to dispel myths about each other and, finally, to unpack one of the most notorious civil rights murders in American history that had happened in their backyards yet had essentially become a public secret in town, a secret that prevented healing and much needed community building in the town.

#### A Path Forward

On the 40th anniversary of the murders, the Philadelphia Coalition issued a call for action to join them in a show of power to pressure state officials to pursue the case. Members of the victims' families, local citizens, the state's governor, four congressmen, civil rights veterans, and 1,500 other stakeholders joined the Coalition at the public event. The event made international news and began the narrative shift the Coalition hoped to achieve.

Within seven months, the Coalition convinced the state attorney general and local district attorney to convene a local grand jury, which indicted Killen for the murders. Exactly forty-one years after the

murders, and one year after the community's call for justice, a biracial jury of his peers convicted Killen on three counts of manslaughter. A measure of justice achieved through healing and truth-telling provided a basis for substantial changes to unfold in the aftermath of the conviction.

### References

- Bell, H. (2003). Strengths and secondary trauma in family violence work. *Social Work*. 48(4), 513–522.
- Brown, E. H. (1997). Improving organizational health by addressing organizational trauma. *Journal of Organizational Change Management*. 10(2), 175–178.
- Carpenter, S. & Kennedy, W. (2001). Managing public disputes: A practical guide for government, business, and citizens' groups. Jossey-Bass, San Francisco.
- Catherall, D. R. (1995). Coping with secondary traumatic stress: The importance of the therapist's professional peer group. In B.H. Stamm (Ed.) Secondary traumatic stress: Self-care issues for clinicians, researchers, and educators. 80–92. The Sidran Press.
- Diamond, M. A. (1993). The unconscious life of organizations: Interpreting organizational identity. Quorum Books/Greenwood Publishing Group.
- Gameon, J. A. & Skewes, M. C. (2021). Historical trauma and substance use among American Indian people with current substance abuse problems. *Psychology of Addictive Behaviors*. 35(3), 295–309.
- Figley, C. (2002). *Treating compassion fatigue*. Routledge.
- Hormann, S. (2007). Organizational trauma: A phenomenological study of leaders in traumatized organizations. Antioch University. doi:10.1177/153476560501100302. https://aura.antioch.edu/ends/184
- Kemeny, J., Goodman M., & Karash, R. (1994). Starting with storytelling. In *The Fifth Discipline Fieldbook* (P. Senge, Ed.). Nicholas Brealey Publishing.
- Kirkinis, K., Pieterse, A. L., Martin, C., Agiliga, A. & Brownell, A. (2018). Racism, racial discrimination, and trauma: A systematic review of the social science

**Dr. Shana Hormann, MSW, PhD,** has been an organizational consultant for 40 years. She is Professor Emerita from Antioch University where she served as Professor and in several leadership roles. Her consulting and teaching areas include addressing organizational trauma, building organizational resilience, leadership development. Shana is the author of curricula and articles on responding to interpersonal violence and organizational trauma, including collaborating on the book *Organizational Trauma and Healing* with colleague Pat Vivian. She shares information about organizational trauma and may be reached at *www.organizationaltraumaandhealing.com*.

Pat Vivian is a consultant in private practice in Seattle. For more than 40 years she has worked with hundreds of nonprofit organizations and government entities across the United States. Since 2000 her work has focused on helping clients heal from trauma—whether from single events or ongoing harmful patterns—and create resilient and sustainable organizations. Her written works detail insights she has learned from her practitioner work. She is the co-author of *Organizational Trauma and Healing* and shares information about organizational trauma at www.organizationaltraumaandhealing.com.

**Dimple D. Dhabalia** is a writer, podcaster, and founder of Roots in the Clouds, a boutique consulting firm specializing in using the power of story to heal individual and organizational trauma and moral injury. Dimple brings over 20 years of public service experience working at the intersection of leadership, mindful awareness, and storytelling. She is the bestselling author of *Tell Me My Story—Challenging the Narrative of Service Before Self* and the newsletter *dear HUMANitarian*. Her

podcasts, What Would Ted Lasso Do and Service Without Sacrifice—Conversations on Hope + Healing are available on all major podcasting platforms. She can be found @dimpstory across all social media platforms.

Mary Dumas is an independent conflict-management professional supporting individuals, community groups, government agencies, and non-governmental organizations to resolve complex or sticky problems through confidential mediation, consultation, and training. As President of Mary Dumas & Associates, Mary helps leaders and teams translate technical information and regulatory mandates into actionable information and meaningful pathways forward. With more than 30 years in practice, Mary is known for using a systems approach to co-create resilient teams and practices ready to address historic harms and generate healing, engagement, and information resources for ongoing learning and collaboration. Mary can be reached at mary@dumas-assoc.com.

**Dr. Susan M. Glisson** is founder and president of The Glisson Group, a consulting firm that cultivates healing and fosters fairness related to racism and difference. She also directs the Welcome Table Collaborative, a network of organizations born in Mississippi, now nurturing a movement for healing, reckoning and repair across the Southern region, especially in the eleven states of the former Confederacy. The Collaborative is committed to building bridges of belonging and justice for all. In 2013, *Southern Living* and *Time Magazine* called her a "hero of the new South in civil rights," for pioneering a community-based model of truth-telling and reconciliation, called "The Welcome Table™." She can be reached at *susanmqlisson@qmail.com*.

- literature. Ethnicity and Health, 1–22. https://doi.org/10.1080/13557858.2018.1514453.
- Kleinman, B. & Russ, E. (2020). Systemic racism can leave black people suffering from symptoms similar to PTSD. *Courier Journal* 12.
- Lebron, D., Morrison, L., Ferris, D., Alcantara, A., Cummings, D., Parker, G. & McKay, M. (2015). Facts Matter! Black Lives Matter! The trauma of racism. NY, NY: The McSilver Institute for Poverty and Research, New York University.
- Munroe J. F., Shay, J., Fisher, L., Makary, C., Rapperport, K., & Zimering, R. (1995). Preventing compassion fatigue: A team treatment model. In C.R. Figley, (Ed.), Compassion fatigue: Coping with

- secondary traumatic stress disorder in those who treat the traumatized. 209–231. NY: Brunner/Mabel.
- Schein, E. H. (1990). Organizational culture. *American Psychologist*. 45(2), 109–119. https://doi.org/10.1037/0003-066X.45.2.109.
- Stamm, B. H. (Ed.) (1999). Secondary traumatic stress: Self-care issues for clinicians, researchers, and educators. The Sidran Press.
- Stein, H. F. (1987). Encompassing systems: Implications for citizen diplomacy. *Journal of Humanistic Psychology, 27*(3), 364–384.
- Strano, B. (2023). Untitled Poem. Facing history and ourselves. Boston, MA. http://www.facinghistory.org

- The National Native American Boarding School Healing Coalition. https://boardingschoolhealing.org.
- Violanti, J. M. & Gehrke, A. (2004). Police trauma encounters: Precursors of compassion fatigue. *International Journal of Emergency Mental Health*, 6(2), 75–80.
- Vivian, P. & Hormann, S. (2015). Persistent traumatization in organizations. *OD Practitioner*. 47(1). 25–30.
- Vivian, P. & Hormann, S. (2013). *Organizational trauma and healing*. North Charleston, SC, CreateSpace.
- Vivian, P. & Hormann, S. (2002). Trauma and healing in organizations. *OD Practitioner*, 34(4), 37–42.