

Beyond Trauma Informed Practices: Recommendations for Secondary Traumatic Stress in Educators

Twianie Roberts , Annette Murray 

Tennessee State University, Nashville, USA

Email: trober25@tnstate.edu

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Abstract

Trauma informed practices provide educators with the necessary tools to address the impact that traumatic experiences have on students. The common themes for professional development and resources related to trauma informed practices include building knowledge, shifting perspectives, building emotionally healthy school cultures and self-care for educators. Educators often experience burnout and leave the profession due to stress. More than a half-million teachers have left the profession since the start of 2020. This is in part due to secondary traumatic stress. Secondary traumatic stress is defined as emotional duress that is a result of an individual hearing about the first hand traumatic experiences of another. School districts across America have minimal ongoing trauma related professional development offerings that address educator needs. This paper examines increased educator trauma and current available resources. It provides the guidelines for a collaborative model between Mental Health Professionals and Educators to produce Professional Development based Trauma Protocols for Educators.

Keywords

Trauma, Trauma Informed Practices, Secondary Traumatic Stress, Trauma Protocols, Traumatic Experiences, Teacher Burnout, Post Traumatic Stress Disorder, PTSD, Stress Management, Coping Mechanisms, Self-Care

1. Introduction

Per the American Psychological Association, “Trauma is an emotional response to a terrible event like an accident, rape, or natural disaster. Immediately after the event, shock and denial are typical. Longer term reactions include unpre-

dictable emotions, flashbacks, strained relationships, and even physical symptoms like headaches or nausea” (American Psychological Association, 2021).

Trauma informed care received greater attention after the Vietnam War. Exposure to death, combat, inhospitable living conditions, and forced displacement were the traumatic events that potentially contributed to Post Traumatic Stress Disorder and other mental health problems (Young et al., 2021). In 1980, The American Psychiatric Association (APA), added Post Traumatic Stress Disorder (PTSD) to its Diagnostic and Statistical Manual of Mental Disorders (DSM-III) (Friedman, 2014).

2. Children and Trauma

Research indicates that children exposed to trauma have a higher risk of school failure (Larson et al., 2017). Adverse childhood experiences (ACEs), are potentially traumatic events. Childhood trauma can manifest through various events including:

- Psychological, physical, or sexual abuse;
- Community or school violence;
- Witnessing or experiencing domestic violence;
- National disasters or terrorism;
- Commercial sexual exploitation;
- Sudden or violent loss of a loved one;
- Refugee or war experiences;
- Military family-related stressors (e.g., deployment, parental loss or injury);
- Neglect;
- Serious accidents or life-threatening illness (Walsh, 2015).

In an effort to mitigate the impact that traumatic experiences have on students, trauma informed practices were developed. Approaches to trauma informed practices and resources vary greatly, but address the common themes of:

- 1) Building knowledge—understanding the nature and impact of trauma;
- 2) Shifting perspectives and building emotionally healthy school cultures; and
- 3) Self-care for educators (Thomas et al., 2019).

Educators across the United States, serve in communities with significant crime, drugs, homelessness and poverty issues. Exposure to ongoing stressful and traumatic events presents the need for educator trauma informed self-care based professional development. Educators need training on how to deal with trauma and how to manage their emotions so they do not become overwhelmed when they see, hear or experience traumatic events. The rationale for addressing this topic includes raising awareness regarding the mental health needs of educators and encouraging collaborations between educators and mental health professionals to develop ongoing professional development resources to address the needs of educators and mitigate stress and burnout.

The National Child Traumatic Stress Network (Self Care for Educators, n.d.) and The National Center on Safe Supportive Learning Environments (Handout

3: *Secondary Traumatic Stress and Self-Care Packet 1 Document Released for Pilot Purposes Only, n.d.*) provide tips on educator self-care. In addition to coping with the stress that is associated with teaching, educators are also impacted by Secondary Traumatic Stress. Secondary traumatic stress is defined as,

“...emotional duress that is a result of an individual hearing about the first hand traumatic experiences of another. This may occur when an educator hears about a student’s physical or emotional abuse. Educators can become overwhelmed at the thought that a student that they know is being harmed or neglected. This can lead to emotional duress. Sometimes, it is difficult for educators to leave these emotional stressors at work. They may carry these burdens home with them, adding stress to their personal lives.

Each year more than 10 million children in the United States endure the trauma of abuse, violence, natural disasters, and other adverse events. These experiences can give rise to significant emotional and behavioral problems that can profoundly disrupt the child’s life and bring them in contact with child-serving professionals. For teachers, principals, counselors, therapists, child welfare workers, case managers, and other helping professionals involved in the care of traumatized children and their families, the essential act of listening to trauma stories may take an emotional toll that compromises professional functioning and diminishes quality of life. Individual and supervisory awareness of the effects of this indirect trauma exposure is a basic part of protecting the health of the worker and ensuring that children consistently receive the best possible care from those who are committed to helping them” (Peterson, 2018).

In “Why Trauma-Informed Professional Development Is Necessary for All Educators”, the US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), outlined six key elements of a trauma-informed approach that include:

- 1) Safety;
- 2) Trustworthiness and Transparency;
- 3) Peer Support;
- 4) Collaboration;
- 5) Empowerment, Voice, and Choice;
- 6) Cultural, Historical, and Gender Issues (*Why Trauma-Informed Professional Development Is Necessary for All Educators, 2020*).

Trauma informed professional development raises awareness regarding the mental health needs of individuals and provides tools to address the needs.

3. Teacher Burnout

In “Teacher Burnout: Causes, Symptoms, and Prevention”, teacher burnout was described by Psychology Today as “a state of chronic stress that leads to physical and emotional exhaustion, cynicism, detachment, and feelings of ineffectiveness

and lack of accomplishment”. Teachers are usually high achievers who like to work hard and are always looking for ways to improve. These traits are commendable but can mean that educators fall prey to perfectionism and don’t leave enough time for rest and recuperation (*Teacher Burnout: Causes, Symptoms, and Prevention, 2020*). Implementing Trauma informed approaches and protocols help to give teachers the resources they need to help them to support students who have been affected by trauma. These resources include utilizing Social Emotional Learning programs that help students to process the emotions they are feeling and helps to mitigate negative student behavior. When teachers have the adequate resources that they need, this helps to alleviate the stress that many of them feel when trying to support their students who have experienced trauma (*Kim et al., 2021*).

“More than a half-million teachers have left the profession since the start of 2020” (*Greenblatt, 2022*). Included in the top five reasons are potentially the long-term effects of stress/trauma. They include inadequate preparation, lack of support and challenging work conditions (*Miller & Flint-Stipp, 2019; Carver-Thomas & Darling-Hammond, 2017*). This paper will:

- Examine increased educator trauma through societal events;
- Provide a detailed review of the top five reasons why teachers leave the classroom;
- Examine the largest 10 districts in the United States to determine if ongoing school or district based “Teacher Trauma PD” exists outside of counseling (medical) services;
- Introduce two (2) “ongoing” trauma protocols for individuals that remain in “Experientially Traumatic Positions/Roles”; and
- Call for Mental Health Professionals to collaborate with educators to produce a “Trauma Informed Support PD Model” for educators. The PD should be by grade band, related to the current school community reality/needs and be socially and culturally relevant.

This proposed model raises awareness regarding the connection between educator burnout, the mental health needs of educators and the need for ongoing trauma informed professional development that addresses educator stress/trauma.

This research has implications in academia, mental health, leadership and policy articulation.

4. Violence in America’s Schools: Increased Educator Trauma

During the 2020-2021 school year, there were 93 K-12 school shootings. In May 2022, nineteen children and two adults were killed in a shooting at Robb Elementary School in Uvalde, Texas. This event marked the 27th school shooting for 2022. In October 2022, a 19 year old killed a teacher and a student in a St. Louis, Missouri high school. The nineteen year old used an AR-15-style rifle and 600 rounds of ammo (*Salahieh et al., 2022*). In addition to mass violence

and school shootings, teachers grapple daily with COVID related issues, unsafe schools, lack of support and stress (Barton, n.d.). Educators may become traumatized after hearing about school shootings but continue to work in fear. They may fear for their own safety and the safety of their student's and co-workers.

In 2019, the Centers for Disease Control and Prevention administered a nationwide Youth Risk Behavior Survey (YRBS) to 13,677 high school students. The results indicated that:

- About 1 in 5 high school students reported being bullied on school property in the last year.
- Eight percent (8%) of high school students had been in a physical fight on school property one or more times during the 12 months before the survey.
- More than 7% of high school students had been threatened or injured with a weapon (for example, a gun, knife, or club) on school property one or more times during the 12 months before the survey.
- Almost 9% of high school students had not gone to school at least 1 day during the 30 days before the survey because they felt they would be unsafe at school or on their way to or from school (U.S. Department of Health & Human Services, 2019).

“Whether you’re a teacher, paraprofessional, counselor, or school resource officer, every staff member cares deeply about students. And that means being exposed to the traumas students bring into school every day, including poverty, grief, family problems, racism, drug abuse. The emotional and physical toll is often severe. Even if they have not endured trauma themselves, educators can begin exhibiting symptoms similar to those of their students—withdrawal, anxiety, depression, and chronic fatigue” (Walker, 2019).

The trauma that educators experience from listening to and assisting students is Secondary traumatic stress. Emotional duress results when an individual hears about the firsthand traumatic experiences of another. In America each year, more than 10 million children experience trauma related to crime, abuse, violence, natural disasters, and other adverse events (death). Traumatic experiences for students can lead to emotional and behavioral problems that can affect the student's academic achievement. This may occur when children exhibit attention-seeking behaviors in the classroom by constantly disrupting the classroom environment. Educators, counselors and school-based administrators hear and must process these traumatic events (Peterson, 2018). This can take an emotional toll on educators causing them in turn to suffer stress and depression. It can also hinder administrators from focusing on student achievement and from leading their schools effectively. This can have a tremendous impact on the mental and emotional health of the educator. After enduring the everyday stress associated with teaching, classroom management issues, workload issues, health and safety issues, now educators must also navigate through the realm of secondary traumatic stress. For educators serving in communities with significant crime, drugs, homelessness and poverty issues, ongoing educator trauma in-

formed self-care based professional development is needed. Educators need training on how to deal with trauma and how to manage their emotions so they do not become overwhelmed when they hear about and have to address traumatic or stressful issues.

5. Why Teachers Leave the Classroom—The Connection to Trauma

According to the National Institute of Mental Health, factors that increase the risk for Post-Traumatic Stress Disorder include:

- A) Living through dangerous events and traumas;
- B) Getting hurt;
- C) Seeing another person hurt, or seeing a dead body;
- D) Childhood trauma;
- E) Feeling horror, helplessness, or extreme fear;
- F) Having little or no social support after the event;
- G) Dealing with extra stress after the event, such as loss of a loved one, pain and injury, or loss of a job or home;
- H) Having a history of mental illness or substance abuse (National Institute of Mental Health, 2019).

In **Table 1**, Mulvahill cited the following reasons why teachers are considering leaving the classroom. The corresponding PTSD related factors are included.

The reasons given for why teachers are considering leaving the classroom reflect the factors that increase the risk for Post-Traumatic Stress Disorder

There exists a connection between teachers leaving the classroom and stress/trauma. To address issues related to educator stress, burnout and quitting, the mental health needs of educators must be addressed.

Table 1. Reasons why teachers consider quitting (Mulvahill, 2019).

	Reasons Why Teachers Consider Quitting	PTSD Factors
1)	Challenging Work Conditions—Buildings that are falling apart, a lack of basic classroom materials, large class sizes, and overwhelming expectations.	A, B, C, E, F
2)	Lack of a Support System—Especially in the First Few Years Being a new teacher can be especially overwhelming. Without the proper support, it is tough to make a go of it.	E, F
3)	Overwhelming Stress—The emotional stress teachers are dealing with seems to be at an all-time high.	A, E, F and G
4)	Lack of Respect—Many teachers feel the negative effects of what they perceive as a lack of respect. A report from Penn State University and the non-profit Robert Wood Johnson Foundation claims among professional occupations, teachers rate lowest in feeling that their opinions count at work.	E, F
5)	Discipline Issues—One teacher we spoke with used the word “abominable” to describe behavior in the classroom.	A, B, C, D, E, F

6. District Based “Teacher Trauma PD”

As shown in **Table 2**, research was conducted to determine if school district based “Teacher Trauma PD” existed as a part of the regular Professional Development offerings. Typically, as a part of the regular teacher-hiring package, a salary with medical and dental benefits is provided. Within medical benefits, counseling and psychological services may be provided (Abelson, 2021; Gewertz, 2021). The awareness of an individual teacher’s need for counseling and psychological services may arise only after continued ongoing stress. Noting the unique differences in each school/setting, a need exists to provide Teacher Trauma PD. The PD would:

- Address the unique circumstances of the school community;
- Address the impact that drug related issues have in the classroom;

Table 2. Largest school districts in the United States and educator trauma PD.

Rank	School District Name	Location	Enrollment	PD Catalog Link	Does self-care Trauma PD exist for teachers?	Topic
1	New York City Department of Education	New York	995,336	New York	Yes	Burnout Prevention for You and Me: Stress Management to Cultivate a Learning Environment Where We All Can Thrive
2	Los Angeles Unified School District	California	667,273	Los Angeles	None Noted	
3	Puerto Rico Department of Education	Puerto Rico	437,202	Puerto Rico	None Noted	
4	Chicago Public Schools	Illinois	405,655	Chicago Teachers Union Foundation	Yes	Mindfulness Practice: Cozy
5	Miami-Dade County Public Schools	Florida	347,366	Miami-Dade	None Noted	
6	Clark County School District	Nevada	314,059	Clark County	None Noted	
7	Broward County Public Schools	Florida	256,472	Broward	None Noted	
8	Houston Independent School District	Texas	204,245	HISD	Internal Access Only	
9	Hillsborough County Public Schools	Florida	194,525	Hillsborough	Yes	Mental Health Matters—Burnout and Boundaries
10	Hawaii Department of Education	Hawaii	179,601	Hawaii	Internal Access Only	

- Address the impact that home/community violence has in the classroom;
- Address the impact that homelessness has in the classroom;
- Address the impact that various abuses (physical, emotional...) have in the classroom (and school);
- Address the impact that gang related issues have in the classroom;
- Address trauma issue identification and coping strategies;
- Address ongoing self-care strategies;
- Identify and mitigate burnout factors.

Of the districts surveyed, very few offered mental health related professional development as noted in the district wide professional development course offerings.

7. Trauma Protocols for Individuals in “Experientially Traumatic Positions/Roles”

Experientially Traumatic Positions/Roles are positions whereby individuals routinely experience ongoing traumatic events. These positions include police, fire, counselors and emergency medical professionals. For Medical, Police/Fire and Counseling occupations, Healthy Coping Mechanisms and Stress Management are two of the protocols that are used when dealing with trauma. These protocols are utilized after an individual experienced a traumatic event.

Healthy Coping Mechanisms are the tactics that are used to deal with stressful situations. Teachers often deal with student’s trauma, medical professionals deal with patient trauma, police officers deal with trauma experienced by victims of crime and counselors deal with the trauma that they hear from those that they counsel. Trauma protocols help to mitigate some of the side effects that are experienced in dealing with trauma. Some strategies to consider include focusing on self-care which includes a good diet and exercise, asking for help when you need it and getting professional help when you feel overwhelmed (*Secondary Traumatic Stress, n.d.*).

Some examples of healthy coping mechanisms include:

- Establishing and maintaining boundaries;
- Practicing relaxation strategies such as deep breathing and meditation;
- Exercising;
- Setting goals and working on a to-do list (*Morin, 2021*).

Stress Management offers a range of strategies to help an individual better deal with stress. Stress is an automatic physical, mental and emotional response to a challenging event. Some examples of Stress Management strategies include:

- Guided Meditation—Helps to take an individual’s focus off the things that can cause stress;
- Practice deep breathing—Deep breathing helps to calm an individual down;
- Maintain physical exercise and good nutrition—Exercise regularly and eat healthy;
- Manage Social Media Time—Instead of scrolling through social media, take a minute to focus and breathe;

- Connect with others—Connect with others and find a sense of community (Mayo Clinic, 2018).

8. Summary/Recommendations

Realizing the need to address the impact that traumatic experiences have on students, trauma informed practices were developed. The common themes for professional development and resources related to trauma informed practices include:

- 1) Building knowledge—understanding the nature and impact of trauma;
- 2) Shifting perspectives and building emotionally healthy school cultures; and
- 3) Self-care for educators (Thomas et al., 2019).

The primary and secondary traumatic events that affect students and educators have caused both researchers and practitioners to examine how to address these issues. School districts across America have minimal ongoing trauma related professional development offerings that address educator needs. These needs include building knowledge, shifting perspectives, building emotionally healthy school cultures and self-care. Trauma protocols exist for individuals that remain in “Experientially Traumatic Positions/Roles”. These include police, medical and mental health professions. We recommend that Mental Health Professionals collaborate with educational entities to produce “Trauma Informed Support PD” for educators. The professional development/resources should:

- Build knowledge;
- Shift perspectives;
- Build emotionally healthy school cultures;
- Promote Self-Care;
- Be offered by grade band;
- Be related to the current school community reality/needs and;
- Be socially and culturally relevant.

When developing professional development we recommend utilizing The North Central Regional Educational Laboratory’s research-based professional development framework that promotes ongoing professional development and encourages individual reflection and group inquiry into teachers’ practice. In practice, the five phases overlap, repeat, and often occur simultaneously:

1) Building a Knowledge Base—The purpose of this phase is to acquire new knowledge and information and to build a conceptual understanding of it. Activities in this phase might include goal setting, assessing needs, participating in interactive workshops, and forming a study group.

2) Observing Models and Examples—The purpose of this phase is to study examples in order to develop a practical understanding of the research. In this phase, one might participate in activities such as school and classroom visitations, (counseling workshops) peer observation, using instructional artifacts, co-planning, and listening to or watching audio and video examples.

3) Reflecting on Your Practice—The purpose of this phase is to analyze your instructional practice on the basis of new knowledge. Activities in this phase might include the use of journals or teacher-authored cases for collegial discussion and reflection.

4) Changing Your Practice—The purpose of this phase is to translate your new knowledge into individual and collaborative plans and actions for (personal), curricular and instructional change. Activities might include action research, peer-coaching, support groups, and curriculum development.

5) Gaining and Sharing Expertise—The purpose of this phase is to continue to refine your instructional practice, learning with and from colleagues while also sharing your practical wisdom with your peers. Activities in this phase might include (self-care activities), team planning, mentoring or partnering with a colleague, and participating in a network ([Step One: Designing Professional Development, n.d.](#)).

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

References

- Abelson, R. (2021). *Teachers, Police, Other Public Workers Left Out of Mental Health Coverage*. The New York Times.
<https://www.nytimes.com/2021/08/31/health/mental-health-insurance.html>
- American Psychological Association (2021). *Trauma*.
<https://www.apa.org/topics/trauma#:~:text=Trauma%20is%20an%20emotional%20response>
- Barton, A. (n.d.). *15 Reasons Why the Teacher Just Quit*. Bored Teachers.
<https://www.boredteachers.com/post/15-reasons-why-the-teacher-just-quit>
- Carver-Thomas, D., & Darling-Hammond, L. (2017). *Teacher Turnover: Why It Matters and What We Can Do about It*. Learning Policy Institute.
<https://doi.org/10.54300/454.278>
- Friedman, M. (2014). *PTSD History and Overview*. PTSD: National Center for PTSD.
https://www.ptsd.va.gov/professional/treat/essentials/history_ptsd.asp
- Gewertz, C. (2021). *Teachers' Mental Health Has Suffered in the Pandemic. Here's How Districts Can Help*. Education Week.
<https://www.edweek.org/leadership/teachers-mental-health-has-suffered-in-the-pandemic-heres-how-districts-can-help/2021/05>
- Greenblatt, A. (2022). *Why Thousands of Teachers Are Leaving the Classroom*. Governing.
<https://www.governing.com/now/why-thousands-of-teachers-are-leaving-the-classroom>
- Handout 3: Secondary Traumatic Stress and Self-Care Packet*. (n.d.).
https://safesupportivelearning.ed.gov/sites/default/files/Building_TSS_Handout_3secondary_trauma.pdf
- Kim, S., Crooks, C. V., Bax, K., & Shokoohi, M. (2021). Impact of Trauma-Informed Training and Mindfulness-Based Social—Emotional Learning Program on Teacher At-

- titudes and Burnout: A Mixed-Methods Study. *School Mental Health, 13*, 55-68.
https://link.springer.com/article/10.1007/s12310-020-09406-6?error=cookies_not_supported&code=45e89903-80ad-4342-8d85-a93483fc80f1
- Larson, S., Chapman, S., Spetz, J., & Brindis, C. D. (2017). Chronic Childhood Trauma, Mental Health, Academic Achievement, and School-Based Health Center Mental Health Services. *Journal of School Health, 87*, 675-686.
<https://doi.org/10.1111/josh.12541>
- Walsh, L. (2015). *Understanding Child Trauma*. SAMHSA—Substance Abuse and Mental Health Services Administration.
<https://www.samhsa.gov/child-trauma/understanding-child-trauma>
- Mayo Clinic (2018). *5 Tips to Manage Stress*. Mayo Clinic Health System.
<https://www.mayoclinichealthsystem.org/hometown-health/speaking-of-health/5-tips-to-manage-stress>
- Miller, K., & Flint-Stipp, K. (2019). Preservice Teacher Burnout: Secondary Trauma and Self-Care Issues in Teacher Education. *Issues in Teacher Education, 28*, 28-45.
<https://eric.ed.gov/?id=EJ1239631>
- Morin, A. (2021). *Healthy Coping Skills for Uncomfortable Emotions*. Verywell Mind.
<https://www.verywellmind.com/forty-healthy-coping-skills-4586742>
- Mulvahill, E. (2019). *Why Teachers Quit*. We Are Teachers.
<https://www.weareteachers.com/why-teachers-quit/>
- National Institute of Mental Health (2019). *Post-Traumatic Stress Disorder*. National Institute of Mental Health.
<https://www.nimh.nih.gov/health/topics/post-traumatic-stress-disorder-ptsd>
- Peterson, S. (2018). *Secondary Traumatic Stress*. The National Child Traumatic Stress Network. <https://www.nctsn.org/trauma-informed-care/secondary-traumatic-stress>
- Salahieh, N., Yan, H., & Riess, R. (2022). *St. Louis School Shooter's Family Sought Mental Health Treatment for Him and Had His Gun Taken Away, Police Said. Yet Tragedy Still Unfolded*. CNN.
<https://www.cnn.com/2022/10/26/us/st-louis-school-shooting-wednesday>
- Secondary Traumatic Stress*. (n.d.). The Administration for Children and Families.
<https://www.acf.hhs.gov/trauma-toolkit/secondary-traumatic-stress>
- Self Care for Educators*. (n.d.). The National Child Traumatic Stress Network.
<https://www.nctsn.org/print/985>
- Step One: Designing Professional Development*. (n.d.).
<http://www.ncrel.org/pd/toolkit/step1.pdf>
- Teacher Burnout: Causes, Symptoms, and Prevention*. (2020). Hey Teach!
<https://www.wgu.edu/heyteach/article/teacher-burnout-causes-symptoms-and-prevention1711.html#:~:text=Psychology%20Today%20describes%20burnout%20as>
- Thomas, M. S., Crosby, S., & Vanderhaar, J. (2019). Trauma-Informed Practices in Schools across Two Decades: An Interdisciplinary Review of Research. *Review of Research in Education, 43*, 422-452. <https://doi.org/10.3102/0091732X18821123>
- (2020). *Why Trauma-Informed Professional Development Is Necessary for All Educators*. Resilient Educator.
<https://resilienteducator.com/teaching-careers/trauma-informed-pd/>
- U.S. Department of Health & Human Services. (2019). *Fast Fact: Preventing School Violence*. Centers for Disease Control and Prevention.
<https://www.cdc.gov/violenceprevention/youthviolence/schoolviolence/fastfact.html>
- Walker, T. (2019). *'I Didn't Know It Had a Name': Secondary Traumatic Stress and Edu-*

cators. NEA News.

<https://www.nea.org/advocating-for-change/new-from-nea/i-didnt-know-it-had-name-secondary-traumatic-stress-and>

Young, Y., Korinek, K., Zimmer, Z., & Toan, T. K. (2021). Assessing Exposure to War-Related Traumatic Events in Older Vietnamese War Survivors. *Conflict and Health*, 15, Article No. 14. <https://doi.org/10.1186/s13031-021-00343-y>