

RESPONDING TO SEXUAL VIOLENCE THROUGH CARE-BASED PRACTICES IN
WRITING PROGRAMS

By

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ABSTRACT

RESPONDING TO SEXUAL VIOLENCE THROUGH CARE-BASED PRACTICES IN WRITING PROGRAMS

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In Responding to Sexual Violence Through Care-Based Practices in Writing Programs, I articulate a trauma-informed, care-based (TI/CB) approach to writing program administration. Through an analysis of the First-Year Writing Program at Michigan State University, I argue that the incorporation of TI/CB methods in writing programs—and writing studies more broadly—can help shape ethical and informed responses to sexual violence. I suggest that a TI/CB framework is applicable not only as a response to crises once they become public, but also to address the already existing culture of sexual violence at every university.

As I consider the intersection of writing program administration (WPA) work and institutional and personal trauma, I also use a TI/CB orientation to form both an analytic heuristic and a methodological framework. The practices that make up this framework are: promoting empathetic listening (Laub); building safe and open communities (Herman); encouraging storytelling (Pennebaker); reflecting on positionality and relationality (Powell et al.); rebuilding networks of trust and care (Morales); and centering survivors (Goodman and Epstein). Throughout the study, I consider how these practices already connect to the articulation of writing program values expressed by WPAs at Michigan State University.

In addition to this analysis, I provide recommendations for the incorporation of TI/CB practices in both writing programs and writing studies as a field. This includes the development of self-assessment surveys for writing program administrators rooted in TI/CB values. In addition, I consider how a TI/CB framework could be adapted to create research methodologies

rooted in trauma-informed care. Finally, I suggest that because of the unique position of WPAs between university administrators, teachers, and students, an enhancement of administrative practices through TI/CB methods could help form more ethical responses to campus sexual violence.

This project is dedicated to all the survivors who have so bravely spoken out against sexual violence at Michigan State and elsewhere, as well as to the survivors whose voices are yet to be heard because society is not yet ready to understand.

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Chapter 1: Toward a Trauma-Informed, Care-Based Orientation

Note: This chapter contains descriptions and quotes from the sentencing of Larry Nassar.

Because I find it important to let the survivors speak for themselves, I am putting these quotes in as they are, but they may be hard for some to read.

On 16 January 2018, the sentencing hearing for Larry Nassar opened with Kyle Stephens reading a powerful account of abuse beginning when she was only six years old:

You used my body for six years, for your own sexual gratification. That is unforgivable.

I've been coming to you for a long time. I told counselors your name in the hopes they would report you. I have reported you to child protective services twice. I gave a testament to get your medical license revoked. You were first arrested on my charges, and now, as the only non-medical victim to come forward, I testify to let the world know that you are a repulsive liar. And that those "treatments" were pathetically veiled sexual abuse. Perhaps you have figured it out by now, but little girls don't stay little forever.

They grow into strong women that return to destroy your world. (Dator)

The hearing continued over eight days, with 156 women reading Victim Impact Statements and culminating in the sentencing of Nassar to 40-to-175 years in prison on seven counts of criminal sexual assault. Before and during this sentencing, both US Gymnastics and Michigan State University, where Nassar had worked, were forced to react. On January 24th, 2018, US Gymnastics put forward an open letter outlining four steps to moving forward:

1. We Must Change the Culture of the Sport.
2. We Must Change the Governance Structure of the NGB.
3. We Must Know Who Knew What and When.
4. We Must Support Safe Sport Victims and Survivors. (Blackmun)

In short, US Gymnastics' platform was to create accountability, promote safety, and change the structure and culture of the sport moving forward to prevent this from happening. The same day that the letter from US Gymnastics came out, Michigan State President Lou Anna K. Simon was forced to resign her position amid growing anger and frustration at the inaction of the university. Her letter outlines no steps forward for the university (Simon).

While these events were happening, I was a third-year PhD student in the Department of Writing, Rhetoric, and American Cultures at Michigan State. I completed coursework and my exams and was working towards a dissertation proposal that merged writing studies and trauma studies. Specifically, I was interested in exploring university responses to sexual violence. As a survivor of rape and abuse, I have long used academic work as a means to explore what it means to be traumatized, to seek recovery, to be at odds with and reclaim one's body. Many of my previous works were either self-reflective or survivor-centered in that they explored the experiences of trauma, survivorship, and recovery directly. This project would be a challenge in that it would not; instead, by examining institutional responses to trauma, my focus would shift to examining *perpetrators of violence* rather than its victims. At the center of this project was the notion of institutional complicity in the violence of individuals like Larry Nassar, the recognition that US Gymnastics and Michigan State University are also to blame for the victimization of the women and girls. As Aly Raisman tweeted:

We must look at the organizations that protected Nassar; @USAGym @TeamUSA @michiganstateu Until we understand the flaws in their system, we can't be sure something like this won't happen again. This is bigger than Larry. Those who looked the other way need to be held accountable 2 [sic].

As a writing studies scholar, a trauma survivor, and PhD student at Michigan State about to start my dissertation, I wondered how to use this project to be accountable.

As I looked around the campus during spring 2018, I saw trauma everywhere. It was unavoidable. We heard the voices of the survivors around us, we saw signs of their presence. Walking through campus was like walking through a thick fog every single day. Everyone was talking about Nassar—and in the silences, everyone was thinking about it. We were sharing news stories or information we had about who had recently resigned or what new action was going to be taken next. In some ways, this was energizing—it gave us all something to do with the grief, the pain, the anger that we felt. In other ways, it was overwhelming to have so much trauma everywhere, and to not know what to do. Even as someone who had worked and lived with trauma for as long as I had, I often felt lost in my response. So I came to these questions: how can we create a trauma-informed, care-based response to these events? What can we do, as writing studies scholars, researchers, and administrators, to be better prepared to handle student trauma and student emotion, and specifically to respond to situations of sexual violence, harassment, or discrimination?

In this dissertation, I articulate a trauma-informed, care-based (TI/CB) approach to writing program administration. Specifically, I analyze the first-year writing curriculum at Michigan State University for TI/CB practices (which I will define and discuss throughout the next chapters) and advocate for the further incorporation of these practices into writing administration. I also research the policies regarding responses to sexual violence that impact writing program administrators at my home university, Michigan State, including national laws such as Titles VII and IX as well as institutional policies through MSU's Office of Institutional Equity, which is in charge of overseeing and investigating all claims of sexual violence,

harassment, and discrimination for our student body of over 50,000 as well as all faculty and staff.

Throughout this project, I consider how institutional policies can shape—and often limit—the capacity of writing program administrators (WPAs) to respond to cultures of sexual violence within universities. In this dissertation, I argue that a TI/CB framework is applicable not only as a response to crises once they become public, but also to address the already existing problem of sexual violence at every university. While the context I address throughout this specific study deals with the fallout from the Larry Nassar scandal, the #MeToo and #TimesUp movements and their (continuous) impact upon conversations surrounding sexual violence, including potential impacts in our local contexts. Specifically, they have revealed the prevalence of sexual violence *everywhere*, not just within localized contexts like Michigan State. The conversations hashtagged on social media are increasingly part of our daily conversations as students, teachers, and administrators. At Michigan State, we are faced with figuring out how to respond to a campus climate of sexual violence, but at every university, people are having to consider how to fight back against what is, as #MeToo points out, a broader cultural and systemic problem.

Some of the questions I explore in this project are:

- How do we, as writing studies researchers, teachers, and administrators, ethically and responsibly engage in issues of trauma and sexual violence?
- What are our obligations in addressing these issues?
- How can we build programs, do research, and cultivate classroom communities in a trauma-informed, care-based manner?

- What is preventing us from seeing sexual violence and trauma as something that informs, and therefore should be addressed, through our work?
- What are some actionable things that we can do about these issues in our position within writing programs?

Because all of these are large questions, my goal is to *start* us down a path of considering them. Aurora Levins Morales writes that to do trauma-informed research is to recognize that sometimes, “asking questions can be as good as answering them” (28). So, I ask these questions to begin a conversation, to invite research into consider how issues of trauma already appear in the work of our discipline, and to think more deeply about how trauma-informed, care-based practices could be implemented across this work.

Myself as Researcher

Following cultural rhetorics scholars like Malea Powell and Andrea Riley-Mukavetz, I want to recognize the importance of story to research. Therefore, I want to tell a story—specifically, a story about doing research on trauma. As a survivor of sexual assault and abuse, I am surviving trauma through researching trauma, although like many forms of recovery, this form of coping sometimes feels more like reopening wounds rather than allowing them to heal. Research into trauma allows me to separate my emotions from my logical conception of trauma, which has given me space to understand and reflect on my experiences in productive ways. However, at times, it also forces me to dwell within traumatic moments and stories, sacrificing my own carefully constructed self-care to meet academic deadlines. My experience with trauma studies has been liberating but also restraining.

As part of this dissertation, I argue for the incorporation of a trauma-informed methodology into writing program administration, and into rhetoric and composition more

broadly. To my knowledge, there are no sources on a trauma-informed methodology in our discipline; therefore, as part of my dissertation, I have had to work to create and conceptualize a methodology that I employ here. It is important to know that this methodology comes both from understandings of trauma and trauma response from other disciplines, but also from my own personal understandings of trauma. Because of my personal history, I am critically aware of the need for research methodologies to care not only for participants, but for the researcher as well. As such, my conception of a trauma-informed methodology is one that provides space for self-reflection, care, and empathy. Here, I have drawn on literature not only from trauma studies, but understandings of methodological approaches from feminist, queer, and cultural rhetorics scholars who have often provided unique insights into how our research is a practice of building community between ourselves and our participants.

As a writing studies scholar, I am acutely aware of the power that writing has in the world. This project follows a long tradition of writing scholarship that has argued for different powers we have within the university. For example, James Berlin argues, "In teaching writing, we are not simply offering training in a useful technical skill that is meant as a simple complement to the more important studies of other areas. We are teaching a way of experiencing the world, a way of ordering and making sense of it" (248). Jacqueline Royster sees the classroom as a space where we can "exchange perspectives, negotiate meaning, and create understanding with the intent of being in a good position to cooperate, when, like now, cooperation is absolutely necessary" ("When the First Voice" 1125), and specifically engage in the sharing of multiple and diverse perspectives. What all of these (among others) have in common is a tradition of viewing writing classrooms as a space that matters in some way, where subjectivities are developed and changed. In agreeing with these perspectives, I want to also

argue that this space should be one where we promote a subjectivity of care and empathy across our programs using a trauma-informed lens.

While I concentrate in this dissertation on first-year writing programs, I hope that my approach to creating a trauma-informed methodology will also be a useful heuristic in other spaces. As we know, writing can be a space of immense emotion—both positive and negative. In our writing classrooms, traumas can emerge, even when students are not necessarily writing personal narratives. Discussions of race, gender, sexuality—or acknowledgements of abuses perpetrated across the world—require consistent care and reflection on the part of instructors and administrators. This is particularly important in spaces that are so impacted by trauma such as universities. Because our students come to us with these histories already in place, there is a need to be responsive to them and consider how we are creating an ethos of care within our programs. A trauma-informed approach is not antithetical to what we already do within our programs. There are many scholars who already argue for the incorporation of empathy, care, and listening into writing programs.

The Research Process

I have been researching trauma for almost a decade—and have given a lot of thought to what it means to do ethical research in trauma. Because I work with survivors of sexual violence, I am not surprised or offended when a person declines to participate in my research. This often happens, for a variety of reasons. People worry about how their statements will be used or received; they have not told friends or family about their experiences and worry about being exposed; and the retelling of trauma stories itself can be retraumatizing.

I anticipated different types of difficulties with this project. I did not seek to interview survivors; instead, I focused on departmental and program administrators at universities with

sexual assault crises. I want to acknowledge the possibility these administrators may themselves be survivors, but my goal was not to discuss personal experiences with trauma, but rather institutional responses to sexual violence. Because I was proposing this study at a university that had just been impacted by the Larry Nassar abuse scandal, I worried about other difficulties in my work. I worried that I would be denied—or at least significantly delayed—by the IRB (it wasn't). I worried that people I was trying to interview would be unwilling to do so out of fear for their positions or standing (that did happen). The bottom line of my worry was this: because my dissertation deals with sexual violence clearly and explicitly, I feared being immediately denied, dismissed, or otherwise held up in doing what I regarded as important, necessary, and kairotic research.

Basically, I was prepared for a certain level of reticence people might have with participating in my study. One participant asked to sit down with me before consenting to an interview, to discuss the project and how I intended to use their words in my work. During this conversation, we ended up talking about the risks and benefits of the study, when the participant paused and said something that's stuck with me: "My fear is that participating in this study has more risks than benefits."

Here's the thing about that statement: it's stuck with me because it's true. Not just about my project, but about all research into sexual violence. In many ways, that's the reason that I do the work I do, because it is still more risky than beneficial to talk about sexual violence. Now, I will of course argue that there are benefits to this work (and I don't believe the participant was implying there wasn't). But what my participant was saying is that exploring the practices of a university can feel vulnerable when you work for that institution. Acknowledging the ways that institutions have failed—and continue to fail—to fully account for the multiple and diverse needs

of survivors can put administrators in a tenuous position. There are risks involved here. There are risks for survivors too. Survivors risk not being believed, harassment, and retraumatization by speaking out about trauma. Brett Kavanaugh still got confirmed to the Supreme Court while Christine Blasey Ford had to move and hire a security detail and is still receiving death threats. It is more risky than beneficial to talk about sexual violence. That's it, that's the problem.

I'm not sure how to begin making it less risky to talk about sexual violence—for survivors or for allies—but I do think that it starts with being willing to have conversations about it despite the risks. I'm not always sure that we are willing to have these conversations in a frank way. When doing research for this project, one of the broad questions I began with was how we can mentor future writing program administrators in a way that (re)builds programmatic cultures to ensure we address contexts of violence, harassment, and discrimination? I read Michelle Eble and Lynee Lewis Gaillet's collection on mentoring, and while it offered amazing accounts of mentoring within WPA programs, I was still left feeling as though the problems the authors were addressing were institutional (issues of retention, professional development, collegiality) rather than cultural (violence, trauma, discrimination).

What drives this project in particular is the argument that these cultural issues *are* institutional issues, and not just because institutions are spaces of trauma and discrimination (though that is also true). But trauma is an institutional issue, especially when trauma leads to or is precipitated by institutional betrayal (which I define and discuss more in-depth in chapter 5) and institutional betrayal has impacts on satisfaction rates, retention, collegiality—essentially, on all of the things that the authors in the collection were writing about. Therefore, we have to address trauma and create cultures of care, and to do so, I believe we can begin by asking, what do I have the capacity to do, as a researcher, as a teacher, as an administrator? If we say, yes,

sexual violence is an issue here, now, for us, for the people in our program, for the students who are in our classes, for the people we ask to participate in our research, then what do we do about it? Those are the questions of accountability that drive this project.

Trauma-Informed, Care-Based Practices

Throughout this dissertation, I use the term “trauma-informed, care-based” to describe my articulation of the practices, approaches, and methodologies I argue writing studies scholars should consider and employ more often, particularly in relation to traumatic subjects such as sexual violence. I want to spend some time here defining what I mean when I use these terms, and why I have chosen these terms rather than other ones currently in use (e.g., “healing-centered”). First, “trauma-informed” tends to be used to describe practices that come from a space of empathizing with and responding to trauma. Trauma-informed practices are increasingly used in activist movements as ways to describe a particular set of ethical obligations that we have in response to traumatic scenarios. These practices tend to draw upon understandings of trauma response that come from both counseling and crisis response. Specifically, trauma-informed practices place emphasis on things such as centering survivors, allowing space for stories to be shared and heard, and creating safe spaces—many practices which I advocate for throughout this dissertation. However, “trauma-informed” has been critiqued on a few grounds. First, trauma-informed practices tend to be implemented in response to specific, traumatizing events such as sexual or racial violence, rather than being used as a preventative or universal response. Second, some scholars such as Shawn Ginwright criticized trauma-informed response as relying too much on individualism, crafting responses on a case-by-case basis rather than looking for collective or cultural understandings of trauma in implanting practices.

Both of these critiques are why I also use the term “care-based” to describe the specific set of practices I advocate for here. In contrast to trauma-informed response, advocates for care-based practices argue that our attention should be on the promotion of empathy, community, and self-care for everyone. In other words, unlike trauma-informed response, care-based practices are implemented without necessitating a particular traumatic impetus.

In the contexts I examine—specifically, at a university that has had a major sexual assault crises—I argue that *both* trauma-informed and care-based practices are necessary, which is why I use both throughout my dissertation. Because Michigan State is a site of very real individual and cultural traumas, a response based in traumatic scholarship and understanding is needed. However, long-term responses that are targeted towards a shift in culture, and not just an immediate response to a particular situation, are also necessary, which is where care-based practices are useful. The practices I advocate for here—which have informed my methodology, methods, and analysis in investigating university writing programs, as well as my recommendations for these programs—therefore combine best practices from both trauma recovery and care-based programs. While I respect Ginwright’s argument that we need to move beyond trauma response and into healing engagement, I disagree on the grounds that (1) trauma response does already incorporate cultural and healing-centered concerns and (2) because there is already so much silence surrounding traumatic subjects, it is sometimes necessary and powerful to speak and name trauma where it happens. I argue that responses at Michigan State *necessitate* explicit recognition of trauma; indeed, because trauma is how many at MSU understand the events that occurred, not responding with trauma-centered language makes administrators seem dismissive of the issues, even when they may be proposing good practices.

Practitioners who study trauma have already offered several concrete ways that trauma-informed work can happen; throughout my body of research, I have worked to consider how these practices may inform research methodologies, pedagogical approaches, and administrative philosophies. I define six practices I see as important to doing recovery-centered research:

- Promoting empathetic listening
- Building safe and open communities
- Encouraging storytelling
- Reflecting on positionality and relationality
- Rebuilding networks of trust and care
- Centering survivors

I want to offer brief understandings of each of these, though I will offer expanded understandings in later chapters alongside understandings of how they might be used in writing studies.

Essentially, throughout this dissertation, I will argue that we already have spaces that offer opportunities to incorporate trauma-informed, care-based practices; the goal moving forward is to do so intentionally and with a focus on sustaining these practices as core values of our work.

- *Promoting empathetic listening.* Empathy is “respect for the other and the realization that the experience of the other is not one’s own” (LaCapra 40); it recognizes the “commonalities *and differences*” (Ratcliffe 26, emphasis added) between self and other. To promote empathetic listening is to engage in listening practices that both facilitate understanding but also translate understanding into practice, through a call to “action, engagement, and remembering” (Herman 8).
- *Building safe and open communities.* Safety is a priority for survivors, and should be a priority within our programs (Carter; Herman). A safe and open community is one where

individuals (1) feel that they will not be harmed; (2) understand that their stories and experiences will be heard and treated with respect; and (3) establish a connection with others who can help them navigate and enter into discourses.

- *Encouraging storytelling.* Stories do work in the world. They can reveal complex relationships between people and systems (Powell et al.), they can empower and offer recovery (Pennebaker), and they can allow space for untold histories (Morales). By making space for story, we can more clearly recognize and respond to influences upon us (Banks).
- *Reflecting on positionality and relationality.* Critical trauma theorists have called attention to the biopolitical nature of trauma (Casper and Wertheimer). To understand trauma as biopolitical means that part of trauma recovery is to come to see the traumatic event as social as well as personal, a disruption from cultural and social norms so severe that it causes a psychobiological response. Therefore, to reflect on positionality and relationality becomes a trauma-informed practice, as it means coming to understand the social implications of trauma.
- *(Re)building networks of trust and care.* Because trauma “shatter[s] the construction of the self that is formed in relation to others” (51), recovery must be a process that establishes social connections and support systems. As Herman succinctly puts it, “no survivor can recover alone” (141). I’ve already touched on the need to establish a sense of safety—but also just as important (and intertwined with our ability to feel safe) is building networks of trust. This includes (re)building trust in people (through establishing safe and open communities), but also building trust in our institutions, who often fail to

act in ethical and responsible ways. Note here that building trust therefore often means making changes to the institution so that it becomes a space worthy of that trust.

- *Centering survivors.* Goodman and Epstein define survivor-centered approaches in contrast to perpetrator-focused approaches. That is, perpetrator-focused approaches tend to focus on systems of accountability for the offender, such as police and prosecution (480). In contrast, survivor-centered approaches prioritize “victim safety and security” (480) therefore shifting the focus from punishment of offenders to protection of survivors.

Chapter Overview

In this chapter, I have provided a brief overview of the context for Michigan State during the Larry Nassar investigation and scandal, and an argument for incorporating trauma-informed, care-based practices into university response. I have also provided brief definitions of these practices, as well as a discussion of some of the challenges of doing trauma-based research within perpetrator institutions. In chapter two, “Developing a Recovery-Centered Methodology,” I delve further into what it means to create a trauma-informed, care-based methodology for writing studies. This chapter includes a deeper discussion of the TI/CB practices briefly defined above, to argue for a new consideration of ethical methodology, one that considers responsiveness, empathy, and trust.

In chapter 3, “Mapping Michigan State’s First-Year Writing Program,” I provide a contextual overview for Michigan State’s First-Year Writing Program and the legal, institutional, and departmental policies regarding sexual violence, harassment, and discrimination that writing program administrators there are subject to. By understanding the laws, policies, offices, and trainings that surround WPAs on the subject of sexual violence, I can provide more context on

the networked state of response to these issues that happens at the university. In addition, I also identify areas where WPAs can and cannot make potential changes; for example, while WPAs may not have the capacity to change laws regarding mandatory reporting, they do have power over how their instructors are trained in mandatory reporting policies.

I then move into an analysis of MSU's FYW curriculum in chapter 4, "Examining a Writing Program's Ethical Orientation." By analyzing curricular documents, which existed before Nassar's violence was made public in early 2018, I consider what foundations already exist within Michigan State's writing program for TI/CB engagement. I argue that there are several TI/CB methods already emphasized in the FYW program, such as an emphasis on storytelling and community, that provide opportunity for further incorporation of TI/CB practices.

In chapter 5, "Laying a Foundation to Respond to Crisis," I analyze policies and procedures of MSU's First-Year Writing Program. Then, I provide my own survey and assessment forms for creating trauma-informed, care-based programs, adapted from trauma-informed assessments for organizations such as homeless shelters, counseling centers, and displaced population services. I argue that by adapting these assessments for higher education and writing program contexts, we can create possibilities for TI/CB responses *before* a crisis happens.

Finally, I conclude with chapter 6, "Becoming a Trauma-Informed Discipline," where I make recommendations for the incorporation of TI/CB practices in both writing programs and writing studies as a field. In addition, I consider how this framework could be adapted to our work as writing researchers to incorporate research methodologies rooted in trauma-informed care. I suggest that because of the unique position of WPAs between university administrators,

teachers, and students, an enhancement of these practices through TI/CB methods could help form ethical responses to campus sexual violence. In this chapter, I consider the difficulties of trauma-informed, care-based practices, particularly on those who implement and take on the labor of doing such work, and how we can also mitigate such effects as retraumatization, vicarious traumatization, and compassion fatigue.

Chapter 2: Developing a Recovery-Centered Methodology

As discussed in the introduction to this dissertation, one of my overarching goals with this project is to argue for the incorporation of trauma-informed, care-based practices into writing program administration. However, another goal I have throughout this dissertation is to argue also for the understanding of trauma-informed, care-based practices as a methodology. In other words, I see the components of trauma-informed, care-based approaches as not only useful heuristics for daily practice as administrators, but also for ethical guidelines to use as academic researchers. Therefore, the components I discussed in the introduction (which I expand upon later in this chapter) also form the basis of my methodological approach to this project—and, I hope, to articulating a methodology for future research in or informed by trauma studies. Therefore, this chapter revisits the components of a trauma-informed, care-based approach as articulated in the introduction, but here provides a deeper look into what these components can offer researchers both as methods and as tools of analysis.

Following this trajectory, this chapter offers multiple arguments. Since it is primarily a chapter covering “methods and methodologies,” I first take a traditional approach and articulate the methods that I deploy throughout this dissertation project, which I have drawn primarily from trauma studies and cultural rhetorics. In doing so, I also discuss the data I have collected, explaining why I have chosen to gather particular materials in specific ways. Second, I argue for how all of these methods come together to form a particular methodology that I am referring to as a trauma-informed, care-based methodology that forms the foundation of my dissertation (and much of my other work). Finally, I explain the ways that I use my methodological approach to create tools of analysis for the data I have gathered.

It is particularly important to me to state that I recognize much of my project involves interrogating writing programs at universities with sexual assault crises about how they have responded. Because I am asking administrators to reflect upon their practices and, hopefully, to consider how to better approach issues of sexual violence through our programs, I also want to call upon myself to do the same kind of reflective practice. In other words, my intention throughout this dissertation—but especially within this chapter—is to hold myself to the same standard of ethical practices that I am calling for in administrators. My goal is not just to promote a trauma-informed methodology, but to enact it here. Therefore, this chapter is divided into three sections: (1) a deeper look into each of the elements of trauma-informed, care-based approach, which explains how each of these elements is used throughout this dissertation project as a method and a tool of data analysis; (2) an overview of the study procedures, including information on data collection and participant interviews; and (3) a discussion of data analysis procedures, which explains how I employ trauma-informed methods as tools of analysis and articulates a coding system for each of the elements used.

Trauma-Informed and/or Care-Based?

To come from a trauma-informed standpoint is to recognize the impact that trauma may have on people around us and to design systems of accommodations that respond to these survivors' needs (Carello and Butler). To be clear, a trauma-informed approach is not a therapeutic approach for individual survivors; instead, a trauma-informed approach focuses on intervening in entire systems (SAMHSA; Guarino et al.). It is, essentially, a universal design approach that serves the needs of trauma survivors. Some principles of trauma-informed care include: (1) promoting physical, psychological, and emotional safety (Hopper, Bassuk, and

Olivet); (2) sharing power and governance, particularly in the development of policies and procedures (Guarino et al.); and (3) building positive relationships (Guarino et al.).

A care-based approach shares many similarities to a trauma-informed approach. To practice care is to engage in relationality (Noddings; Powell et al.), to facilitate an understanding of self in relation to other and then to proceed to acknowledge and sustain these relationships through reciprocal care. Care-based approaches call for the integration of emotional support (Guarino et al.) and a holistic approach to people that acknowledges the interconnectedness of emotional, physical, and cultural health (Ginwright). A care-centered approach is *salutogenic* (Antonovsky), meaning that it is centered around promoting the positive traits we want to achieve rather than rooting out the negative traits we want to avoid.

Present in both these terms is (1) a call to understand the material realities that impact embodied experiences of individuals; and (2) a move to respond to the needs of those individuals, including establishing things like safety, trust, and community. Throughout this dissertation, I use both terms, rather than choosing one or the other as many scholars do. I choose to do so to highlight the importance of both trauma-informed and care-based practices individually, and to draw attention to the need to bring the approaches together for a more holistic approach.

Shawn Ginwright advocates for what he calls a healing-centered approach to education, specifically rooted in restorative justice practices. He specifically rejects the use of the term “trauma” in doing so—while he acknowledges the existence of traumas in the educational systems that he works within, he argues that “trauma-informed” approaches only serve to recenter and therefore re-empower the traumas themselves. Instead, by focusing on the salutogenic goal—collective healing—rather than on the need for that healing, Ginwright argues

that we can infuse more optimism, hope, and care into the approaches. I find his argument for focusing on care and the ideal outcomes compelling, and also see potential in this approach for providing a better model in spaces where trauma is not openly acknowledged or students may not all feel “traumatized.” Even if there is not trauma, we could all use more care, and therefore a care-based approach is valuable anywhere.

However, Carmela DeCandia, Kathleen Guarino, and Rose Clervil provide a counterargument for the use of trauma that I also find compelling. Specifically, they argue that one consequence of refusing to name trauma as trauma is that “Denial allows us to distance ourselves from the feelings and moral obligation to act; the consequence is that trauma is often overlooked” (1). Carly Smith and Jennifer Freyd similarly argue that one barrier to change is a “lack of language around the issues that continually arise (e.g., child abuse in religious organizations) only to be apparently seen for the first time, each time” (581). In other words, these scholars point out the need to name trauma *as* trauma or risk a refusal to respond adequately to traumatic scenarios, thus perpetuating a cycle rather than allowing for recovery or change.

I believe there is a need to both (1) name trauma as trauma and recognize that particular responses need to be made and called trauma-informed, especially in institutional contexts where trauma is very real; and (2) move towards the salutogenic model of promoting healing, care, and positivity. Therefore, I choose to use “trauma-informed,” to acknowledge the realities of the institutional traumas in university spaces, particularly at Michigan State, which is the site of study for this dissertation project. I also choose to use “care-based” to gesture towards future models and goals of care, and to acknowledge ways that the practices I promote—while based in trauma and recovery literature—are also useful even in the absence of trauma. Finally, I have

combined the terms together—trauma-informed, care-based, or TI/CB—in order to advocate for viewing these methods not as competitive, but as interconnected.

Throughout this chapter, I will be discussing how the components of trauma-informed, care-based practices that I defined in the introduction can be used both as methods for research and as tools of analysis for data. In addition, I briefly overview how I am using these components as both methods and tools throughout this project specifically. Because I end this chapter with more discussion on how I use these components as coding guidelines for analyzing the data collected, this section provides a more general, and more theoretical, overview on the potentials of these components as research heuristics. I find it important to separate my discussion into these two categories as a reflection of my dissertation's goal to both present a study that analyzes university programs for their responses to sexual assault, but also to argue for how trauma-informed approaches are a solid and ethical methodological framework for researchers to employ. Therefore, I begin first with a discussion of how to use a trauma-informed, care-based approach as a methodological and analytical framework.

I see this framework as following the models given to us by feminist, queer, and cultural rhetorics scholars in their research practices. Specifically, these models call for an attention to how our research promotes an interaction between the researcher and communities, cultures, and peoples we encounter through our research (McIntyre; Wolf). Rather than envisioning ourselves as outside, objective researchers, these models call for us to see our research as a practice of making relations. Following the model of Powell et al., I see research as a “relational practice, requiring interaction with and investment in the communities whose practices are being investigated” (“Our Story Begins Here”). This is a particularly important approach when studying communities impacted by trauma, who are often already marginalized or silenced; we

have an ethical obligation to these communities to allow them to speak through our research, rather than continuing to talk over or silence them.

Similarly, in articulating a trauma-based methodology, I follow the model of Royster and Kirsch in their discussion of feminist methodologies. They argue that the first step to a feminist methodology is to view feminism not only as a subject of research, but also a research practice in its own right. This is what I argue in my call for a trauma-informed methodology; to acknowledge how trauma is not only a research topic, but how it can form our understandings of how to do research in the first place. By employing the components of trauma-informed, care-based practices as research methods, I hope to show how trauma survivors can be seen not just as research participants, but as researchers and theorists ourselves, who follow a standard of ethical practices based in our experiences with and around trauma. Our embodied realities—and the coping mechanisms we have created to deal with these realities—are not just means of making it through the everyday, but also powerful tools that can guide the lives and practices of others, including those who are not directly impacted by trauma themselves.

Promoting Empathetic Listening

As defined in the introduction to the dissertation, empathy is “respect for the other and the realization that the experience of the other is not one’s own” (LaCapra 40). Empathy therefore recognizes the “commonalities *and differences*” (Ratcliffe 26, emphasis added) between self and other, but does not use those differences to create distance, but rather to create more constellational understandings of our relationships with each other and our different histories, cultures, and identities. To promote empathetic listening is to engage in listening practices that both facilitate understanding but also translate understanding into practice, through a call to “action, engagement, and remembering” (Herman 8). In other words, empathy as a

method means that a researcher would have to consider how, through their research, they were interacting with their participants and then move to practice better listening and understanding of their relationships to them. In addition, a researcher would then be called to turn that listening into a responsive action, such as giving back to the community that the research impacts. In this way, empathetic listening resonates with methodological practices in cultural rhetorics that call attention to the necessarily participatory relationships we must have with our research communities in order to do our work in ethical and responsible ways. Empathy, in other words, is necessary to address both personal and systemic traumas—to provide possibilities many types of healing, including individual recovery and decolonization.

When considering how empathetic listening may be used for analysis, I want to consider how we assess how we practice listening. As scholars, we can not only practice empathetic listening in our own research, but we can in turn consider the extent to which others are doing so as well. This is not meant to be a quantitative evaluation of a researchers' listening ability, but rather a consideration of how we are prioritizing the cultivation of relationships *as the practice of research itself*. When empathic listening is used as a method, it means reflecting on the similarities and differences we have with our research communities, and how we can use our research as a means of practicing relationality with them (I further discuss relationality as a research method later in this chapter). When empathetic listening is used as analysis, it means considering the role that communication, collaboration, and community have contributed to what is being analyzed. For example, in this dissertation, my intention has been to consider the role of empathetic listening as enacted by writing program administrators at Michigan State University, admittedly in a limited capacity (through curriculum and policies). Therefore, my analysis of empathetic listening in the following chapters focuses on considering how WPAs are doing what

I am asking of myself as a researcher in this project—that is, to use empathy as a way to create an understanding of my relationship to the people and institutional structure that may allow me to act in more ethical ways towards the communities I feel a responsibility for.

Building Safe and Open Communities

Safety is a priority for survivors, and should be a priority within our programs (Carter; Herman). It is obvious to say that physical safety is already a concern as administrators, and that universities already prioritize these issues through several different governing bodies and policies. Writing scholars and administrators also have called attention to issues of other forms of safety, including an understanding of how safety and comfort can be complicated by issues such as race and gender identity (Charlton et al.; Craig and Perryman-Clark; Ruggles Gere), and how we can promote better mental safety and emotional security for ourselves and our students (Anderson and MacCurdy; Bishop; Carter; MacCurdy; Micciche; Worsham). What I find interesting about many of these discussions is the focus on students-as-individuals. In the case of physical safety, university policies act on a case-by-case basis, asking students to call police or campus security when threatened, or to contact authorities in less immediate situations of discomfort. For mental safety of students (particularly in regards to discussions of trigger warnings, when the term “safety” is used most frequently), it is often up to individual students to promote their own well-being. In this way, mental safety becomes similar to asking for disability accommodations; something that is usually handled by the institution on an individual basis, rather than as a holistic enterprise.

Just as disability scholars have advocated for a more holistic view of (dis)ability—one that does not rely on accommodations or needs-based advocacy, which can be individualizing and isolating—trauma scholars too call for an approach to safety that is rooted in community.

Therefore, a call for safety rooted in trauma-centered care is a call for the (re)building of community, specifically, an open community is where individuals:

- (1) feel that they will not be harmed;
- (2) understand that their stories and experiences will be heard and treated with respect;
- and
- (3) establish a connection with others who can help them navigate and enter into discourses.

In considering how a “safe and open community” could be used as a method, I believe it is important for researchers to consider how they are promoting the three points outlined above. The first point is one researchers must often already consider to pass IRB, since minimizing the risk of harm is a basic tenet of research. In order for participants to feel that their stories and experiences will be treated with respect, a relationship of some kind needs to be created between the research and the participants; I also argue that it requires that participants have an active role in advocating for themselves in the project itself. For this project, my final participants were all people I had a previous relationship with, so I believe they already felt they would be heard by me (and likely also felt more comfortable sharing stories with me, or telling me if they did not want certain information to be shared in the final product). I also wanted participants to have a “voice” in the project, and therefore allowed them to see drafts of all sections of the dissertation that included their interviews for their comments and feedback. I also offered to share the rest of the project with them as it was completed, if they so chose. This leads me to point (3)—using research as a means of navigating and entering into discourses *alongside* participants. I view a trauma-informed research methodology as one where participants should receive benefits of the research as much as the researcher, and therefore should be invited into the conversations

throughout (and should see the potential benefits of the project to them). As part of this project, I had conversations with my participants both on and off the record about the dissertation, and sometimes about writing program administration work or other topics more broadly, in order to create these connections with them.

As a method of analysis, I searched for similar themes within MSU's FYW writing curriculum and policies. Specifically, I considered how ideas of "community" or engagement with others was called for or enacted across the program documents, and whether these calls specifically outlined definitions of community that were connected with ideas of safety, empathy, openness, communication, or similar ideas. Essentially, the idea was to find spaces where the curriculum or policies was not only protecting students' physical safety, but *building* safe communities by outlining and defining practices of engagement between students, instructors, and/or administrators.

Encouraging Storytelling

Stories do work in the world. They can reveal complex relationships between people and systems (Powell et al.), they can empower and offer recovery (Pennebaker), and they can allow space for untold histories (Morales). By making space for story, we can more clearly recognize and respond to influences upon us (Banks). Powell et al. argue in "Our Story Begins Here" that story is a methodology, and that to recognize it is as such means to see recognize that story is a research practice that holds intellectual value and weight (something we do not always acknowledge as researchers). Trauma scholars have often turned to story for its role in recovery; telling stories allows survivors to take control over situations in which that control was wrested away from them. Stories reveal relationships, but also allow for the possibility of reorientation, a powerful tool for trauma recovery.

As a research method, story can center and decenter particular groups; for example, Morales reminds us to tell stories of women and people of color in order to decolonize our histories and decenter narratives from white Western cultures. Trauma scholars—and my own research here—call for a centering of survivor stories (a point I will also discuss further below). When I consider how story happens in cultural rhetorics scholarship and trauma scholarship—the scholarship I have learned from and admire, I have noted the importance of reciprocity to storytelling. Story in these practices is a communal act, one which is made through trust and over time. In order to mirror that practice in my research, I wanted to allow space for this kind of reciprocity as well, a space for my participants to give feedback on how they were being represented in the work. Therefore, I decided to allow participants to see all parts of the study with their interview (and any other part of the dissertation, if they wanted) to give feedback on how they were being presented). The goal was to enact story as a collaboration—not as something given by participant and taken by researcher.

When I consider how story can be a method of analysis, I think about how story is used to form a relationship with our work and the world, and to create and show connections with each other. Finding spaces where story is being used in curriculum or policies can help to see how we are prioritizing the building of relationships within our programs and classrooms, and what kinds of communities we expect to come out of our institutional structures. The stories we tell about our institutions can also reveal what we prioritize as foundations—and values—of our programs, what we find important and think should be core goals to pass along. They can also tell us something about what we do not value as much, or do not see as concerns; for example, how we respond to issues of sexual violence can tell us how seriously (or not) we take these concerns, and how we value the bodies who come forward with these issues.

Reflecting on Positionality and Relationality

In writing studies, many scholars have devoted attention to how issues of identity (gender, race, sexual orientation, class, ability, among many others) affect students' and our own writing and worldviews (Alexander & Rhodes; Banks; McRuer; Villanueva). It's not a new idea to suggest that positionality matters, or that we should reflect on our identities and what that identity means for how we navigate and interact with the world. Nor is it new to suggest the incorporation of such practices into methodological reflection; as Reiter and Oslender argue in their discussion of methodological practices, "The first, necessary—while not sufficient—step in that direction [of bridging academia and community] is a critical self-awareness of one's own positionality, with all its gendered, racialized, national, and class-based dimensions" (xiii). Specifically, they argue that any researcher that seeks to do work with their research (that is, activist-scholars who are doing research intending to make changes based on that research) must be self-reflexive and recognize their own positionalities and role in the research process. In her own research within writing program administration reflecting on sexual harassment that occurs in these spaces, Julia Ferganchick-Neufang remarks:

I could not have conceived of this study, nor carried it out with the passionate dedication I felt had I not needed to find a way to make sense out of this crisis. To prove to myself that I could be a teacher when faced with harsh verbal assault and threatening behavior from one of my students, I needed to investigate this issue in a larger context than my own experience; I remained personally involved. When writing the results of this study, I was repeatedly told that my own story didn't matter, skewed my research, showed my bias. Good, I thought (and still think), I want readers to know why I'm biased, how

intimately involved in these conflicts I have become. This is the heart of my research.

(24)

Following their advice and examples, I want to take a brief moment to do this reflective work myself.

I am a white, middle-class, disabled, queer survivor. I could continue to list identity markers for myself, but the fact is that positionality requires more than just listing these identities. As Reiter and Oslender note, positionality is a *critical* self-awareness. Specifically, a critical conversation about positionality cannot occur without a reflection on *other* positionalities or identities. In doing this work, I am drawn to considering what Riley-Mukavetz calls relationality, a practice that requires one “to understand one's position in the world, one's relationship to land, space, ideas, people, and living beings, and to understand how these relationships have been and will always be at play with each other” (112). To engage in a reflection on relationality is to reflect not only on one's own identity, but to then consider the relationship of that identity to other people and things.

Therefore, when I think of the identity markers as I have listed them—white, middle-class, disabled, queer, survivor—I must also put them into conversation with other things in this world. As a white person, I carry a history of privilege and of violence, one that I have to consider as I do research, often alongside communities who have been harmed by this violence. As a disabled person, my interactions with the spaces around me can sometimes be fraught. I have suffered chronic migraines for my entire life, as well as the lingering effects of PTSD (including secondary diagnoses of depression, anxiety, and other effects related or exacerbated by trauma). These too can impact my work as a researcher, particularly as a researcher of trauma—the residual impacts of PTSD resonate throughout my life and my work, which I touch

on in a later section of this chapter as well as in chapter 6. However, these identities also allow me a relationship to this work that those without these markers may not have. I am an insider to the process of trauma recovery, and while this may mean having to take extra precautions or make more space for self-care at times, it also means having knowledge about processes or experiences with trauma that others may not have, a relationship with these ideas that was formed long before I started reading academic trauma theory.

As a trauma-informed, care-based method, reflecting on positionality and relationality is essential for researchers to gain an understanding about their relationship to not only the research materials or participants, but to the spaces the research takes place within, the ideas behind the research, and those who will be impacted by the research. In the following chapter, I provide a brief overview of Michigan State University and the First-Year Writing Program specifically—but I also interweave my own stories of being within the space, upon the land, and in the program as I do so as a way to acknowledge my position as a student and my relationship to the university and to the program. Throughout my dissertation, I have attempted to lay bare these kinds of moments of self-reflection, of acknowledging when my thought process changed, when my initial project shifted to something else, or when certain topics were difficult or painful to disclose.

When analyzing how positionality and relationality can be used as practices, I considered where in the curriculum there were explicit calls for students to think about their own identities, in particular through acts of self-reflection. References to how we relate to the world, to communities, or to cultures also indicate a consideration of positionality and relationality. Primarily, this work must be done through self-reflection, so I looked for emphasis on personal

reflection, learning narratives or histories, or articulations of communal and interpersonal relationships.

Rebuilding Networks of Trust and Care

Because trauma “shatter[s] the construction of the self that is formed in relation to others” (Herman 51), recovery must be a process that establishes social connections and support systems. As Herman succinctly puts it, “no survivor can recover alone” (141). I have already touched on the need to establish a sense of safety—but also just as important for long-term recovery (and intertwined with our ability to feel safe) is building networks of trust. This includes (re)building trust in people (through establishing safe and open communities), but also building trust in our institutions, who often fail to act in ethical and responsible ways. Building trust therefore often means making changes to the institution so that it becomes a space worthy of that trust—a tall order for a research methodology, but one that is not necessarily outside of our scope to do, as participatory action researchers have argued (Reiter and Oslender).

In order to enact a trauma-informed, care-based methodology, I wanted to consider how I could create research methods that practiced the rebuilding of trust and care. As Clervil et al. argue, a trauma-informed method of trust means practicing non-hierarchical structures wherever possible; therefore, I wanted to reduce a potential hierarchy that put me, as researcher, above my research subjects. As a graduate student, I have less perceived authority than, say, a tenured and well-established professor in the discipline; but as a researcher regardless of my academic standing, I do still have power when I put writing into the world. As someone who researches sensitive topics, I have to be particularly aware of the potential of my research to do harm to participants, even by accident.

In the case of this study, I also became aware of the potential for my work to put the WPAs who I was working with in precarious positions within their own institutions. If my study was seen by specific university bodies as critique or criticism—particularly during sensitive times when universities (and the nation’s culture more broadly) have been under increased scrutiny for our handling of sexual violence—then I could open not only myself, but my participants, to blowback and harm. Therefore, I had to take care to establish trust through my research methods themselves, and these were things I tried to think carefully about (that does not mean that everyone I contacted ended up participating in the study, but sometimes enacting care and consent means allowing people to decline). When asking for interviews with participants, I also made it clear that they would be given copies of all sections of my dissertation in which information from their interviews was used, so they would be able to give feedback. I believe this works not only to establish a sense of trust between my participants and me, but also to allow them the agency to control how their image goes out into the world.

In considering trust and care as analysis, I considered how I created and perceived the idea of a *network*. When analyzing how trust and care happens, I considered the role of community, both within institutional spaces and outside of them. For example, in this study, I found many references to how instructors might create a “classroom community,” or promote a sense of friendliness, safety, and conversation among students in a singular classroom space. I also found references to considering how we may connect “outside” communities—home spaces, cultures, organizations, etc.—to the academic communities “inside” the university. In addition, WPAs also have the capacity to create networks of trust and care in their administrative capacities, particularly when they deal with the difficult cases that may come to their offices

(involving sexual, racial, or gendered violence—or simply involving a perceived breach of trust or care between instructor and student).

Centering Survivors

While centering survivors comes up in nearly every definition of trauma-informed care, it is always difficult to articulate how to do in practice, particularly when considering how to create a research method out of survivor-centeredness. It may sound simple enough to say, include survivors as participants, but survivors may not always want to participate in a study or out themselves as survivors. It can be a retraumatizing experience to talk about trauma, particularly in contexts when you do not know how your story will be used, or who will read it. So, it may not necessarily be a useful practice to simply say include survivors for any research project, when it might put them at more risk than other populations.

However, I have tried to center survivors in this project in two key ways. First, I deliberately began this dissertation with testimony from survivors, to contextualize Michigan State and Larry Nassar in their own words. In a project that focuses so much on institutional response—a project which I referred to in the introduction as focusing on the perpetrator rather than the survivor because of its focus on changing institutional responses—it is important to keep these voices in mind. The second way I have tried to center survivors is by openly disclosing my own status as survivor, and by being open throughout this dissertation with how the project—and this institution—has impacted me as a student and a researcher.

Here is a moment of frankness to that point: this dissertation has become a subject of many of my therapy appointments, and not simply because of the typical graduate student stress. At one of my appointments, my therapist referred to my dissertation as another abuser in my life. When we talked about what she meant by this, she noted the way that I was asked to continually

make space to understand perspectives that had allowed for the abuse of hundreds of women and girls to happen. Because of my commitment to trauma-informed, care-based methodologies, I felt a need to empathetically listen and understand the perspectives and the contexts that surrounded me, essentially to try to understand what could have led people to make the decisions that they did that allowed these abuses to go on. Furthermore, I felt a need to try to understand the inaction of others around me, to understand why people in positions of power might not act, might be afraid to act.

The problem with this, she pointed out, is that in trying to understand their reasons, I was continuously suppressing my own feelings as a survivor. I knew I was frustrated at the inactions, but I was committed to empathy and understanding, so I tried to push that anger away. But the anger doesn't go away, it stays in the body and pushes outwards in other ways. I thought about Susan Brison's description of recovery: "things got better, they got worse. I wasn't surprised that my recovery wasn't linear—no one led me to expect that—but by the fact that whatever trajectory my life was on didn't seem to *be* one of recovery" (111). So, in the end, I see a survivor-centered practice as acknowledging the bodies—all of the bodies—behind a project, including my own. And in acknowledging my body, I will own the moments of anger in this dissertation, because I believe we should respond to sexual violence with anger.

The Dissertation Design

In the original design for this study, I intended to examine three writing programs at universities with sexual assault crises: Michigan State University (which is still included in the current version of the study), Pennsylvania State University, and Baylor University. In this version of the study, I planned to focus exclusively on how writing program administrators at these programs developed responses to sexual violence. These responses were to be traced across

time, with Michigan State (whose crisis became public in spring 2018) offering examples of immediate responses, Baylor (whose crisis was public in 2016) offering mid-range responses, and Penn State (2011) offering longer-term responses. However, my dissertation evolved due to several issues that arose throughout data collection and analysis. First, I ran into a somewhat unexpected amount of resistance at some of these institutions. In many ways, this resistance was understandable; writing program administrators are often in visible and vulnerable positions within universities, especially for those WPAs who may be pre- or un-tenured (which was the case at one of the universities I sought to examine). This vulnerability is compounded when discussing topics of sexual violence within universities, because this topic can trigger both personal trauma as well as invite institutional critique, sometimes in the form of legal response. As one invited participant commented to me about the study, there are often more risks than benefits in critiquing responses to sexual violence within universities that employ us. Because I adopted a TI/CB methodology, I felt that acknowledging and respecting my participants' vulnerabilities in discussing these topics meant that I needed to find other avenues to study this topic that did not put them at as much risk within their institutional contexts.

In addition to these barriers to study, I also found that my initial focus had been too narrow to capture the complexity of how we respond to sexual violence. Specifically, I had been focused on post-crisis response, only looking for what happened *after* a sexual assault scandal had been made public. However, responses to trauma are formed well before actual crisis; university and program responses are already shaped in advance by policies and procedures in place before sexual assault is even uncovered. In other words, while I had only anticipated a focus on looking at how administrators responded *to* instances of sexual violence, I discovered that I needed a much stronger understanding of what was in place *before* these instances.

Because this requires an examination of a much broader set of data points, I also recognized the need to focus my study on only *one* site, rather than the three I originally hoped to analyze.

Therefore, I shifted my study to focus on Michigan State University's First-Year Writing Program, and focus broadly on two areas of examination here: (1) Michigan State University's first-year writing curricula, particularly in spaces that allow for trauma-informed, care-based practices; and (2) policies and procedures regarding sexual assault response within the FYW Program and that the FYW Program is beholden to (including Title XII, Title IX, and MSU's own university policies regarding the reporting and handling of sexual violence cases). I further discuss what data I collected in chapters 4 and 5. In the next chapter, however, I spend time giving an overview of the First-Year Writing Program at Michigan State to help contextualize its place within the university. I also spend time discussing legal, institutional, and departmental policies that the FYW program is beholden to regarding sexual violence, to give a sense of the context surrounding those issues as well.

Finally, when I initially conceived of this project, it was as a writing-studies-meets-trauma-studies project, one that would bring together my interests in both fields. While I believe this dissertation still does these things, I initially imagined a mostly equal distribution of writing studies and trauma studies across this work, a project where the scholarship and research would easily come together and balance the other out, and end up half trauma studies and half writing studies. However, as the project developed, and specifically, as I was still working at the university in my capacities as a teacher, a student, an activist—essentially, as I was being an embodied person on this campus—I was not only writing, but attending protests, events, and gatherings to try to understand and change the campus climate of sexual violence. One of these events I attended was a Culture of Care Summit, which featured NiCole Buchanan and Carrie

Moylan, both of whom are cited throughout this dissertation. Neither Buchanan nor Moylan are rhetoric and writing scholars, but both are researchers at Michigan State working in and around trauma studies from different fields. At the summit, they offered theoretical perspectives on the kinds of institutional responses to trauma that I was writing about as well as unique perspectives on Michigan State's response to sexual violence as people who are here interacting with and working at MSU specifically.

As I interacted with people in and around campus, most of whom were not scholars of rhetoric and writing—with a few exceptions—the conversations I was having about developing a trauma-informed, care-based approach were inherently interdisciplinary. Therefore, the scholarship I began to cite as part of my dissertation, as a reflection of the conversations that were happening in the community I was studying, also became more interdisciplinary. My understandings and contextualizations of what was happening at MSU were developed through the lens of my experience interacting with these working groups and activists on campus, rather than exclusively through scholarship divorced from the campus itself. When I talk in this dissertation about how I as a researcher at MSU was understanding what was going on at MSU, I inherently have to think about those moments when I was talking to other people here about developing responses to campus events. By citing the scholars who are at Michigan State speaking and working on these issues like Buchanan and Moylan, by drawing on the frameworks the folks on the ground at MSU are using, I actually see myself as enacting a cultural rhetorics practice of respecting and listening to my community. Throughout the next few chapters, my theories and methodologies come from the people doing the work of change at Michigan State; however, I do spend time, particularly in chapter 6, considering how these theories from the

community could be incorporated into writing program administration and writing research more broadly, and why they are relevant to rhetoric and composition as a field.

Chapter 3: Mapping Michigan State's First-Year Writing Program

Michigan State University's first-year writing program is housed in the Department of Writing, Rhetoric, and American Cultures (WRAC), which is a standalone writing and rhetoric department within the College of Arts and Letters. In fall of 2018, there were 140 sections of first-year writing, with 7500 students taking these during the 2018-2019 school year (out of 8500 incoming freshmen total). These classes are taught by both graduate student instructors (primarily Rhetoric and Writing graduate students, though some instructors come from other departments such as Education or English) and fixed-term faculty. Fixed-term faculty are primarily non-tenure track, who teach a 3/3 load, and are required to perform a certain amount of service work as part of their contracts, which constitutes 10% of their total contract work. This service can include things such as serving on departmental committees, organizing or running small workshops throughout the year, and helping with the annual first-year writing conference. Both graduate instructors and fixed-term instructors are required to attend a certain number of orientation events, including an annual orientation workshop before the fall semester for new instructors. There are also biweekly workshops, and graduate instructors are required to attend a certain number of these every semester to participate in professional development and facilitate pedagogical discussions surrounding multiple issues. Some example workshops from the last year include discussions of race-informed pedagogy, sessions on each unit in the core sequence, and a workshop on consent in the classroom.

As with every writing program that relies on graduate instructors, there is both a high level of turnover among teachers as well as an influx of many first-time teachers. While the orientations at Michigan State are lengthy, many of us who train writing instructors (or, more generally, who have ever taught writing) can recognize that a few days before the semester

begins is not always enough to prepare instructors with no teaching experience for everything they may encounter. Indeed, these orientations primarily focus on introducing new instructors to MSU's curriculum, walking them through the required units and providing space for syllabus and assignment prompt development. All of this is extremely valuable—and necessary in an orientation for instructors new to a university—but what it does not provide as much space for is discussions of pedagogical approaches, developing a classroom ethos, and introductions to departmental, university, and federal rules surrounding issues like student privacy and mandatory reporting. When I participated in MSU's first-year writing orientation in fall 2015, we had no overview of mandatory reporting or related policies. The only tangentially relevant conversation we had was regarding student mental health, where we were advised to refer students to counselors (and encouraged to provide this information on our syllabi, advice that I do respect). However, what this reflects is a broader trend of seeing these issues as *outside our purview* as writing instructors and administrators, as things to be referred elsewhere in the university. But because the effects of campus sexual violence are not limited to those spaces outside our purview—and because those offices do not always respond as they should, which we saw in the Nassar case and continue to see across the country—we need to do better in interrogating what we can do within our programs to train instructors and respond to these issues.

In the next chapter, I provide a more specific overview of the first-year writing curriculum, which I analyze and discuss through a trauma-informed, care-based lens. Here, however, I want to situate the context for the analysis in the next chapters, to help situate the program as well as the institutional space where the program resides. In the next sections, I give an overview of policies that affect the program, focusing specifically on policies regarding harassment, discrimination, and violence—in short, policies that tell administrators how to

respond to potentially traumatic events. Alongside these policies, I also consider the offices and resources available at Michigan State that are meant to handle and respond to these situations when they arise, and how they predetermine and shape writing program administrators' responses to these scenarios.

While most of my intention in this chapter is to situate and contextualize, rather than to analyze and discuss, I do offer some notes on whether these policies are trauma-informed and care-based. In doing so, I want to acknowledge that these policies are often beyond the control of writing program administrators—these are legal and institutional policies that are written at levels higher than WPAs and usually have histories longer than any single person. However, it is important to understand these policies because they determine (and sometimes restrict or limit) the actions of WPAs. It is also important to understand these policies because, as I argue in this chapter and again in the conclusion when I offer suggestions for implementing more trauma-informed, care-based practices in writing program administration, it is essential to know what boundaries can and cannot be changed, and where WPAs are able to make actions.

Legal Policies: Title VII, Title IX, and the Clery Act

There are numerous policies that impact Michigan State's first-year writing program and administrators and instructors' ability to work with students in specific ways. As previous chapters have indicated, it is important to recognize how *all* policies and practices may be trauma-informed and care-based, and not just those that directly deal with sexual violence, harassment, or discrimination. However, I do also want to take a brief moment to acknowledge the policies in place that are meant to handle these issues. As I argue in the introduction to this dissertation, a trauma-informed approach is one that recognizes the impact and history that trauma has had upon an institution, as well as the ways that institution has previously responded

to that trauma. Therefore, it is important to understand how WPAs at Michigan State are trained and prepared to handle cases of sexual violence that do happen at the institution and within FYW classrooms. And these do happen. We know that 1 in 5 women will be sexually assaulted within their lifetime—that number increases to 1 in 3 for women in their first year of college, and disproportionately affects women of color and queer women. In other words, 1 in 3 female students will experience sexual violence *while they are taking our classes*.

Legally, the main policies affecting universities in regards to sexual violence are Titles VII and IX of the Civil Rights Act as well as the Clery Act. While the Clery Act requires universities to disclose incidents of crime on campus (and is something that Michigan State is currently under investigation for violating in relation to the Larry Nassar case), it is not as directly relevant to WPAs, who are not typically in charge of disclosing this information. Until recently, Title VII, which guarantees equal opportunity in employment, was considered the most relevant law with regards to sexual harassment and discrimination because of a clause which banned quid pro quo requests for sexual favors in exchange for advancement. In other words, Title VII provided some recourse for *individual* cases of sexual harassment. Later, this was expanded to include *systemic* sexual harassment, as the Supreme Court ruled in *Meritor Savings Bank v. Vinson*, 1986, that Title VII also provided protections for employees in cases of a “hostile work environment.”

More recently, the conversation around sexual violence in higher education has revolved around Title IX, which originally covered discrimination and the equal right to participation in educational programs (most often used to create equity in athletics for men and women). However, in 2011, the Department of Education released a “Dear Colleague Letter” which interpreted Title IX to also require universities to respond appropriately to reports of sexual

harassment, which, the letter argued, “interferes with students’ right to receive an education free from discrimination.” With this letter, the Department was able to begin imposing fines and restrict funding to universities if they were found to be lacking in their response to sexual violence.¹

Institutional Policies and Offices

While the legal policies are not something that the university can change—and certainly not something WPAs may ignore—the interpretation of these policies does differ across institutions. Every university is entitled to their own offices for investigating claims of sexual violence, harassment, and discrimination, as well as to providing different types of support services for students through this process. In addition, universities are allowed leeway in how the reporting process works—for example, some universities (e.g., Oregon, Stanford, San Francisco, Loyola) use a semi-anonymous reporting system which allows victims to report perpetrators and describe events into an online database *without* filing an official report to the university immediately. They may also file a “matching escrow,” where their report does not go forward unless another victim reports the same perpetrator, which allows them to come forward with support.

¹ The definition of sexual violence and the extent to which universities are required to investigate cases is under the purview of the Department of Education, and as of this writing undergoing changes with Secretary Betsy DeVos’s insistence. Since these definitions and requirements are currently in flux, I will not touch on them here other than to remark that MSU is subject to follow the Department of Education’s requirements and adjust their own policies in accordance to any changes as necessary.

At Michigan State, the process is very different. All concerns regarding the university's Anti-Discrimination Policy (ADP) and Policy on Relationship Violence and Sexual Misconduct (RVSM) are reviewed through the Office of Institutional Equity (OIE). Reports can be filed through OIE directly by victims or by outside parties (usually mandatory reporters). After a report is filed, OIE staff will investigate claims by contacting the claimant to make an official statement, then contacting the respondent to make a response. Both the claimant and the respondent are allowed to call witnesses for their sides, and each are allowed to see each other's statements as well as witnesses' statements in order to respond to these claims. While OIE claims that all investigations should be completed within a 60-day period, cases typically last much longer, often over a year; the average case from February through August 2018 took 304 days to complete, with 35 cases still ongoing as of April 2019 (Wells). The process is long, draining, and can be retraumatizing for survivors who are asked both to repeatedly tell their stories as they review witness statements as well as statements from the accused, all while not knowing if or when their case will be closed, or if they will find justice.

When a student comes forward with claims of sexual violence, harassment, or discrimination, instructors of first-year writing and writing program administrators at every university, including Michigan State, have certain procedures they are required to follow. For example, as mandatory reporters, both instructors and WPAs must file a claim with OIE, which the individual students can then decide to pursue or leave alone. However, there is also a lot of room for *other* procedures—and for trauma-informed, care-based practices—to be followed. While WPAs are obligated to follow legal, university, and departmental policies, policies are not the end-all-be-all of response. This is a core point of my argument in this chapter: while we are bound to policy, we still have agency to act and create TI/CB practices in response to those

policies. For example, while the policy requires that WPAs report students who come forward to OIE, it does not limit them here. They also have authority to create trainings and orientations within the department on issues such as mandatory reporting, trauma-informed response, and anti-sexual violence training. WPAs have the authority to follow up with students to ensure their immediate physical and psychological needs are being met throughout the long (and often discompassionate) university investigation process, so that students are being supported around them. WPAs have the power to create their own policies for instructors regarding responses to sexual violence, including recommending resources outside of the university for students who may not feel comfortable pursuing help at the institution. What all of these require, however, is for WPAs to be informed and willing to do the work to listen to trauma-informed researchers and survivors, just as they stay updated and informed on work in writing studies and pedagogy (I offer up recommendations on trauma-informed, care-based assessment practices for WPAs in chapter 5).

At Michigan State, there are several campus offices available to address issues of harassment, discrimination and violence (see Appendix A). I will focus on a few of those here, specifically the Behavioral Threat Assessment Team (not listed on the guide), the Sexual Assault Program, and the Counseling and Psychiatric Services. I have selected these three offices because they are the three most likely to intersect with writing program administrators at MSU; while there is, of course, a need for WPAs to know of resources such as safe ride for students or be aware of campus police, these other resources provide more opportunities to explore trauma-informed, care-based approaches to responding to violence on campus.

According to its webpage, the main purpose of Behavioral Threat Assessment Team (BTAT) is to “facilitate a multidisciplinary, coordinated response to reports of students,

employees, or other individuals on campus who have engaged in behavior indicating a possible threat of harm to self or other members of the campus community.” Therefore, BTAT would intervene in cases where students are threatening harm to self or others—they are the crisis intervention team on campus, meant to respond to anything from stalking to possession of weapons to any kind of unusual behavior that raises suspicion. They are not an *immediate* intervention team (for emergencies, people are still directed to other campus resources). However, it is important to note that BTAT is run through MSU’s police department, who reviews and assesses all cases. While BTAT contains members of other institutional offices—including OIE, the counseling center, the medical center, and academic resources—the first department listed on all BTAT procedures on their webpage is the MSU police department. This could be a problem when considering the handling of cases of minority students—and strikes me as a problem even in cases of mental illness, given the distrust many have in the police to handle such people with care.

The MSU Sexual Assault Program (MSU SAP) offers crisis intervention and advocacy for survivors of sexual violence. Their services include “a 24-hour hotline, 10am-10pm crisis chat, institutional and legal advocacy” as well as individual therapy and support groups. Unlike OIE and BTAT, which as investigatory offices operate on a perpetrator-focused model, MSU SAP operates on a survivor-centered approach. By offering free resources along a range of responses, the SAP focuses exclusively on getting survivors access to what they need to cope and heal, including self-care items and connections to community partners. Also unlike OIE and BTAT, SAP is a survivor-centered program in that it does not operate on the reporting of outside officials. In other words, it gives agency to survivors to choose to access their services, and to determine which services are appropriate for them at any given time.

Finally, the Counseling and Psychiatric Services (CAPS) at MSU provides counseling support for students and faculty at Michigan State in a number of ways, including individual and group therapy and online support through MY SSP, a free app students can use to chat with counselors anytime. While the main counseling center is open weekdays from 8am-5pm, the app allows students to access services 24/7, 365 days a year, including in multiple languages. Like SAP, this makes a more survivor-centered approach. One thing to note with both CAPS and SAP is that while both are recognized—and supported—by both writing program administrators and instructors—they are not *required* to be used in the same way that OIE and BTAT are. In other words, mandatory reporting and university policies require WPAs and instructors to file reports with offices that are perpetrator and investigatory-focused, but do not require that we pursue options that are survivor-centered. Instead, these offices are optional, and therefore not always as well known by everyone at the university.

Departmental Policies: Writing, Rhetoric, and American Cultures

The FYW program at Michigan State is located within the Department of Writing, Rhetoric, and American Cultures (WRAC), and therefore also subject to departmental policies as well as university ones. However, there are almost no official departmental policies regarding harassment or discrimination; instead, the departmental bylaws generally refer back to university policies, deferring to those offices. There is one section within the WRAC bylaws (which are available publicly through the official departmental website) that offer a process for a grievance hearing through the department, but this hearing is specifically for graduate students filing for academic reasons, including “allegation[s] of academic misconduct (academic dishonesty, violations of professional standards or falsifying admission and academic records)” (26).

In addition, the WRAC graduate student handbook provides 11 pages of explanation for what constitutes academic good standing and what could get a student removed from a program academically (p. 49-57; 60-61) but only one section regarding “appropriate professional conduct” (p. 59). There is no discussion of what could cause someone to be dismissed or put in bad standing in the program for this conduct; the consequences section of the handbook only discusses consequences of scholarly and research infractions (p. 60). In other words, bad standing according to the WRAC bylaws and graduate handbook only exist in response to academic issues; folks can be racist, homophobic, sexist, and they can sexually harass or abuse people in the department *without being in bad standing according to the handbook*. There does exist some generic language about contacting the Ombudsperson with regard to interpersonal issues, but no intra-departmental means of resolving or addressing these issues exists according to the bylaws.²

Specific Trainings for Writing Program Administrators

When asked about how writing program administrators are trained specifically to handle instances of harassment, discrimination, or violence, the director of the first-year writing program at MSU noted that they undergo the same Title IX training that all people at the

² While I have not looked at the bylaws of every rhetoric program in the nation, I have read several others and do want to note that this is a common problem and not one unique to Michigan State or WRAC. Many departments outsource issues of harassment, discrimination, and violence to other offices at the university--and while there are often legal and institutional policies requiring the departments to report these issues outward, there are also ways of ensuring that these are acknowledged and addressed within the department as well.

university undergo, but nothing additional as administrators. This was both surprising and not to me—I was a little surprised to find out the training for administrators was the same that I had to go through as a student, but not necessarily surprised to discover that the required trainings by the university are superficial and inadequate in handling actual cases. In my experience, the Title IX training interviewees referred to is a series of impersonal slide-shows that cover legal and institutional policies while also emphasizing to viewers that they should refrain from harassing others. Speaking as a survivor, it is not a survivor-centered training, focusing on defining harassment and the need to not harass people rather than on the resources available to those of us who have been harassed. In addition, there are few opportunities for people who may be triggered to check out of the training—while there is an option to mute or skip certain videos, it is up to the slideshow makers to determine what counts as “triggering” material, so not all topics are skippable. On a personal level, there were many unskippable sections that I found really difficult to get through but were apparently deemed “safe.” There is also an option to skip the training entirely, but this requires a petition and a disclosure of status that is also difficult for survivors.

Regardless of the inadequacies within these trainings, the broader problem is that these are the only trainings that WPAs at MSU are receiving. As the FYW director put it: “I think the last thing you want is to say, let's only react to emergencies, you know. Let's try to try to deal with things before they become emergencies. Let's try to be proactive.” The problem, of course, is that there are aren't any required trainings in “how to be proactive about this.” Smith and Freyd argue that one of the biggest barriers to institutional change is the lack of knowledge about trauma and, I would add, willingness to fund and make space for trauma-informed trainings and initiatives. As the director notes, being proactive is a trauma-informed approach, and yet the

institution itself provides little to no (required) trainings for how to do this. As NiCole Buchanan, a psychology professor at Michigan State researching race- and gender-based harassment, argues, if MSU says that responding to sexual violence is a priority, then we should be able to find it in these kinds of spaces, in the budget lines and trainings, in the workshops and resources on campus. But currently, those values aren't visible.

Conclusion

Currently at Michigan State, there are very few policies specific to handling sexual violence determined by the First-Year Writing program itself. Like many other departments and programs, the policies surrounding the handling of sexual violence are often outsourced to these other offices at the university, meaning that there is little to no dictation to how instructors or administrators within the FYW program who know of or experience sexual violence should receive support within their programs. There are many reasons this might occur, not only at MSU but elsewhere. First is the idea that because most WPAs are not trained experts in trauma or counselors, they are not the ones who should be handling these cases. However, I want to make it clear that I am not suggesting that WPAs are the *only* support for people during these moments, but rather than they should be *a* support, just as WPAs are support for instructors and students through many other difficult transitions. In my experience as a writing program administrator at a different university, I had to handle cases not only of sexual violence, but of racism, sexism, homophobia, and other forms of discrimination. These are issues that come across our desks, and—most importantly—the people who come to us for support do so because we are in both a position of authority and of trust. By outsourcing the handling of these cases to other university bodies who may not have that same level of trust—which is certainly the case at Michigan State, where many report experiences of institutional betrayal—WPAs themselves are

decreasing the level of trust that people may put in them to support and care for them. In other words, when we hear about these cases, we need a better response than to say that we are not trained in these experiences.

Furthermore, training in trauma-informed approaches is widely available. As described in the introduction, trauma-informed approaches do not require the trauma-specific care that service providers may give. Because a trauma-informed approach is a systemic approach, it does not require unique training in counseling or psychology. In other words, it is possible for WPAs to be trauma-informed while also offering support for individuals who may be seeking trauma-specific services like counseling or reporting.

Another reason that WPAs—and many other officials at universities—may not create specific policies to handle issues of sexual violence is because they believe that their power to do so is limited by legal or university policies. In some respects, this is true—for example, universities broadly must adhere to Title IX reporting and investigative guidelines. However, these policies still offer a lot of interpretative room and space to intervene in TI/CB ways. For example, many universities already interpret Title IX guidelines differently and have set up reporting systems in vastly different ways (as I have already discussed). While WPAs may not have a say over how the university sets up and creates these programs, there is also room to continue to *do more*. For example, WPAs can craft statements on mandatory reporting that ask instructors to follow up with students or conduct trauma-informed training for instructors who are mandatory reporters. They can also revise required statements on harassment in syllabi to include more information about the process or support, including resources outside of the university for those who may feel uncomfortable seeking support within the institution (see Appendix B). As I have suggested in the previous chapter, WPAs can also consider indirect

approaches to incorporating TI/CB policies into their programmatic culture. That is, not all responses to sexual violence need to be dealing with individuals who come forward; WPAs can also consider how TI/CB principles are enacted through their curriculum and programmatic policies and procedures, which I will explore over the next few chapters.

Chapter 4: Examining a Writing Program's Ethical Orientation

Before suggesting specific and unique trauma-informed, care-based changes to writing program administration, it is important to understand how the administrative framework that was already in place at Michigan State University before the crisis was set up to respond. In other words, this chapter examines how the first-year writing program at MSU did and did not already enact principles resonant with trauma-informed, care-based practices. By examining what was already in place—and in many cases, what was already in place before spring 2018 continues to be the operating model of MSU's writing program today—I can examine the program on two important levels. First, I can identify the areas of strength in the program, including what aspects of the curriculum, administrative practices, and policies allowed space for trauma-informed, care-based practices such as storytelling, a reflection on positionality, and community-building. I can also identify the areas of potential changes for the program by pointing out gaps where trauma-informed practices are not as much of a focus or, in some cases, absent altogether, such as explicitly centering survivor voices or encouraging empathetic (and not just rhetorical) listening. Second, I analyze how trauma-informed, care-based practices may fit into what already exists in MSU's current institutional practices and in discipline-specific models and best practices. This latter part is particularly important because my goal throughout this dissertation is not to argue for the implementation of an entirely new way of thinking, practicing, and being in specific university contexts. Instead, I am arguing that there are several underutilized dimensions of practices already in place that could be effectively enhanced by a trauma-informed model. In other words, a trauma-informed, care-based approach is not about rewriting what work the program already does, but instead about enhancing it strategically and with focus on how what writing programs do impacts trauma survivors (including the many who will be victimized while

attending or working at universities). My analysis of several practices already in place in MSU's first-year writing program underscores my belief that writing programs already enact several of the methods I described in the introduction and methods chapters, although these practices could be enhanced by an understanding of trauma-informed care.

In my analysis of MSU's program, I noted explicit emphasis on several methods that mirror the methods of trauma-informed, care-based approaches that I discussed in previous chapters. These include: a centering of storytelling as part of the first-year writing curriculum; a reflective component emphasizing positionality and relationality; and a development of community and culture. In addition, MSU also had implicit resonances with other methods, like the promotion of empathetic listening and the building of trust and care. The only method that didn't have at least some explicit or implicit connection to MSU's program was the centering of survivors. However, as I argue later in this chapter, this method is one of the most difficult to execute ethically and respectfully in academic spaces where centering may often mean outing survivors. While I believe that MSU could do more to center survivors as part of their programmatic approach (and make suggestions in the conclusion for ways to do so), this is also the method I expected programs to have the most difficulty achieving. I work toward offering suggestions for how writing programs might consider centering survivors in an ethical and responsible manner in the conclusion to this dissertation.

The rest of this chapter is primarily devoted to analyzing where MSU's first-year writing program—especially its curriculum and instructor orientation—already connect with the trauma-informed, care-based practices I argue should be considered part of the foundations of writing programs. In doing so, this chapter examines the approaches that were in place—and, for the most part, continue to be in place as of spring 2019—to see how the work in MSU's first-year

writing program may already intersect with trauma-informed methodology. Then, I focus on analyzing this data through a trauma-informed, care-based lens, using the methods I have outlined in previous chapters as a heuristic for exploring how MSU's program was already resonating with TI/CB values. For each practice that I identified, I offer a brief definition as well as an explanation for how I looked for these practices across curricular documents, syllabi, and training materials and in my interviews with writing program administrators at MSU. I also analyze how MSU's first-year writing program values and implements TI/CB practices.

Description of Materials

The materials I gathered from Michigan State's first-year writing program were fairly extensive. In this chapter, I focus on two aspects of writing program administration: curriculum design and instructor trainings. While there are many other aspects to WPA work, these elements provided the best picture of what the WPAs at MSU most valued in working with students and envisioned as the goal of writing courses. These are also two of the more public-facing, visible aspects to being a WPA. While administrative work can also involve a lot of work such as course schedules and staffing, grade disputes and issues between students and teachers, and managing budgets, all of which are important work, curriculum and training give a better indication of the value orientations of a program. As public-facing aspects of WPA jobs, they offer an indication of how the departmental community sees and understands the goals and purposes of writing programs and classes; they also offer a glimpse into how WPAs view their relationship with students, teachers, and other administrative bodies across the university. Because I am arguing that a trauma-informed, care-based approach must be concerned with the construction and enactment of relationships, understanding the relationships that WPAs have through these documents is central to understanding how WPAs offer critical support to those around them.

To understand the first-year writing curriculum, I analyzed documents describing curricular approach (available on the MSU first-year writing program website), as well as several sample syllabi from current and previous instructors for a sense of how this curriculum is implemented by actual instructors. To get a sense of how instructors were trained in terms of pedagogy, policies, and procedures, I examined several other resources available through the official first-year writing website, including links to external resources and guides where students with various issues (including those experiencing harassment or violence) could turn for support. I also interviewed a director of MSU's first-year writing program to help direct me to understand how these documents were used in practice and to more specifically point to the goals of MSU's FYW program. Because of my previous relationship with this interviewee as an instructor in the FYW program, as well as familiarity with Michigan State's program, it is certainly possible that I was able to find data quickly and easily because of the resources and networks I already had access to; however, I do want to note the relative uncommonness of having many of these resources easily accessible. In other words, I was impressed with MSU's willingness to put documents forward on their public spaces that acknowledged and addressed difficult issues, although I do wish there were more resources addressing interpersonal violence—whether sexual or not—available on other parts of their site (the only space I found these resources was on the pages directed at graduate students, meaning that undergraduate students going through these issues may not find these as easily as I did).

Data Analysis

I analyzed these documents and the interviews through the lens of trauma-informed, care-based practices (the specific terms or practices that I looked for in these documents are described in more detail later in the analysis section of this chapter). Then, I marked any instances of terms

or practices related to TI/CB ideals as they appeared in FYW documents. I rhetorically analyzed these moments, considering how they reveal an orientation to trauma-informed, care-based values. I tried to be generous in what I included as practices that were potentially aligned with TI/CB ideals. Specifically, I am less interested in critiquing the FYW program for not explicitly engaging in trauma-informed care than I am in considering what practices already exist in writing program administration that already resonate with TI/CB values and could be incorporated elsewhere. In other words, the goal of this analysis is not critique, but rather the identification of MSU's FYW Program and an understanding of how those values already reflect and are imbricated by, trauma-informed, care-based concerns.

This focus on understanding, rather than critique, reflects my own commitment to TI/CB methodologies, as I discussed in chapter two. Because a TI/CB approach calls for empathetic listening, it is important to undertake a rhetorical analysis in such a way that is generous, open, and considerate of the people who work in and direct writing programs. This means engaging in an analysis that considers broader influences on writing programs, including university and legal regulations, as I have done in chapter three. In addition, a TI/CB analytic approach calls for an analysis that builds up rather than tears down; my focus, therefore, is on thinking about how values of care already constitute a foundation for MSU's FYW program and is therefore already present in FYW. While I do offer suggestions in the conclusion of the dissertation for expansion on these values, I do so in order to enhance what is already existing rather than to imply that these values are excluded. A care-based methodology also means incorporating the voices of those already in the communities affected by research, and therefore I have interviewed a director of the FYW program to better understand how empathy and care might already have been guiding principles in their work. Some data from this interview is also included here (as

well as in other chapters of this dissertation), as the interviewee was also invited to articulate their own values and goals as an administrator as well as consider how TI/CB practices may already resonate with these goals.

Finding: Empathetic Listening

The idea of “rhetorical” listening is one that has been addressed in writing studies literature. For example, Ratcliffe defines rhetorical listening as “a stance of openness that a person may choose to assume in relation to any person, text, or culture” (1). Rhetorical listening, she argues, comprises (1) understanding; (2) accountability; (3) identifications of both commonality and difference, and (4) an analysis of claims and cultural logics claims exist within (26). This orientation toward rhetorical listening suggests that listening is a practice that can “cultivate conscious identifications in ways that promote communication” (25). In other words, rhetorical listening helps people understand discourses better and to engage in a more ethical way with communities and cultures. Ratcliffe offers an understanding of listening that emphasizes listening’s role in creating and sustaining openness and relationships, both of which resonate with literature in trauma studies that also promotes these values.

In trauma recovery, scholars also talk about a need for listening, especially listening that is empathetic and receptive. Listening is often synonymous with the idea of witnessing here; indeed, while Ratcliffe juxtaposes rhetorical listening with speaking and writing, trauma scholar Dori Laub calls speaking and writing trauma an act of “testimony,” while the listening to trauma becomes an act of “bearing witness” (2). The role of the listener-witness is not passive; instead, the witness is asked “to share the burden of pain,” to engage in “action, engagement, and remembering” (Herman 7-8). Like with Ratcliffe’s definition, listening here also requires *intent*: an intent to support, to take action. Laub argues that witnessing trauma also means coming “to

partially experience trauma” (57). While Laub is careful to acknowledge that a trauma witness is not a trauma survivor, he does suggest that witnessing empathetically and receptively requires an understanding of the survivor and a reflection upon oneself. This echoes Ratcliffe’s argument that rhetorical listening requires one to “stand under” other discourses, to understand both claims and the cultural logics behind those claims. What these definitions have in common, then, is a concept of listening that invites the hearer to consider what is being said, the rhetorical context surrounding that discourse, and then to reflect upon that understanding to see the commonalities and differences that exist in the discourse and the hearer’s worldview.

Throughout this dissertation, I have used the term “empathetic listening” (rather than either rhetorical listening or witnessing). Both rhetorical listening and witnessing offer a view of listening practices as more than just hearing another’s words, but something that requires an intent to come to understand another’s viewpoint, and both hint at the need for *empathy*. When Herman asks for an audience that not only hears a trauma narrative, but understands the narrative to be a call to action, she asks for an audience who can empathize with the survivor. LaCapra defines empathy as “a form of virtual, not vicarious experience...in which emotional response comes with respect for the other and the realization that the experience of the other is not one’s own” (40). Empathy, in other words, is not an identification with the other; rather, it is a recognition of what Ratcliffe would call the “commonalities *and differences*” (26, emphasis added) between self and other. Therefore, I use the concept of empathy as a bridge between rhetorical listening and witnessing, a way to conceptualize listening as an act that calls for not only understanding (à la Ratcliffe) but also translating understanding into practice (à la Herman).

To consider how empathetic listening may appear in MSU’s first-year writing program, I looked for moments in the documents that emphasized things such as an understanding of self

and others, communication practices between peers or communities, and respectful collaboration. I selected these terms because they emphasize the relational nature of empathetic listening. That is, because empathetic listening requires a person to attend to the needs and feelings of another, considering where these practices might be called for in writing curriculum means finding those spaces that indicate an emphasis on the relationship between self and other. There are several other concepts I could have searched for when considering empathetic listening, such as an understanding of cultural context, reflective practices that call attention to rhetorical situations, or an emphasis on community. These are certainly important to empathetic listening, but because they also contribute to a TI/CB practices such as community-building and relationality, I reserved a discussion of these topics for later sections of this chapter.

In the description of first-year writing offered on MSU's website, the curriculum lists three major goals: inquiry, discovery, and communication. While I will discuss inquiry and discovery later in this chapter, communication seems particularly relevant for a discussion on empathetic listening in the program. MSU's curriculum offers this definition of communication: "purposeful engagement of the self and others through the products of inquiry and discovery." It is the first part of the definition that interests me. Specifically, an engagement of the self and others fits in with an understanding of empathetic listening that sees importance in knowing the commonalities and differences between one's worldview and another's. Through this definition of communication, MSU's program offers a space for empathetic listening that invites others.

Similarly, MSU emphasizes the necessity of collaboration, repeating through the descriptions of the program that students will spend time "working with others." While individual instructors determine the ways in which students work with others, there is a clear desire for collaboration in the FYW program. Collaboration, in turn, always offers a space for

empathetic listening; indeed, I argue that productive collaboration *requires* empathetic listening. Although empathetic listening—or listening at all, whether empathetic, rhetorical, or otherwise—is not mentioned in these documents, for collaboration to be beneficial to everyone involved, each person must be willing to both speak and hear others, to understand their perspectives and come to a space where all collaborators are included in the final product. One of the FYW learning goals offers a slight indication of the form that collaboration might take in FYW classes, as students are expected to “explore one’s own position from the perspective of others.” I read this goal as asking students to collaborate by reflecting on their own perspectives, *listening* to the perspectives of others, and then considering how self and other can be synthesized. In other words, this learning goal reflects Ratcliffe’s definition of listening as an act that asks for understanding, a recognition of multiple cultural contexts, and the identification of commonalities and differences among perspectives. It also offers space for empathetic listening to occur—while the actionable term in the learning goal is that students should “explore” their positions in relation to others, I suggest that assessment of students’ “explorations” means that students should put this exploration into practice, whether through writing assignments or through in-class interactions with other students and texts.

In considering spaces for empathetic listening within MSU’s FYW program, what I find is space for the *possibility* for empathetic listening, but not an explicit call for this as a goal. As I argue above, I certainly see resonances with the descriptions of collaboration offered in FYW curriculum and empathetic listening. However, because there is not explicit attention given to how collaboration may work or how listening fits into or is a requirement of productive collaboration, I can only suggest that there is a space for empathetic listening, but it may or may not be enacted as a programmatic goal or within individual FYW classrooms. Part of the

reasoning for this is, presumably, that curricular documents like those at MSU often give space for individual pedagogies; asking that instructors give particular space to teaching listening as a learning goal of the FYW course may begin to seep into the realm of dictating individual lesson plans rather than creating an overarching curricular structure. However, I believe that an explicit consideration on how collaboration can include the teaching of empathetic listening will both enhance what is already a productive learning goal for FYW students while also providing more emphasis on issues of empathy and relationality as necessary for students going into the world.

Finding: Building Safe and Open Communities

When considering if and how MSU's FYW program makes space for TI/CB practices, I also looked for how the FYW program built safe and open communities. The idea of a "safe space" is hotly contested, even in trauma studies. Therefore, I want to make it clear that I am not suggesting a program could ever be completely safe or open for all participants—but that does not mean that the promotion of *more* safety and openness should not be a goal. In studies of trauma, the first step to recovery must always be the establishment of a sense of safety for the survivor (Herman). Trauma scholars recognize that safety is the foundation from which all other steps—including telling stories, establishing community and connection, and building trust—must necessarily be built upon. Without a sense of safety, those who are already marginalized based on race, gender, class, sexuality, or ability will continue to feel disconnected from a learning environment that does not address their needs. Students themselves already recognize this—as Angela Carter points out, students are often the ones who call for practices of safety such as trigger warnings. As she argues, these calls should be viewed as students requesting "recognition of their lived experiences and institutional support regarding how those experiences influence their education" (2). In calling for an attention to safe and open communities, this is

what I am also requesting: that writing programs be spaces that view students as whole persons with experiences and backgrounds that may impact their learning in university environments. I am requesting writing programs that are attentive to all of students' needs, including those that impact learning but may not always be immediately visible in classroom spaces, such as trauma.

Herman connects safety with community by arguing that to establish safety, one must work "toward control of the environment" (160). This includes both a control of the physical environment (i.e., removing anything or anyone that could cause a patient physical harm) as well as a control of the psychological environment. Because "helplessness and isolation are the core experiences of psychological trauma," Herman argues that recovery necessarily means creating "empowerment and reconnection" with other people (197). I interpret Herman to be calling for a safe and open community, a space where the patient (1) feels that they will not be harmed; (2) understands that their stories and experiences will be heard by an empathetic therapist; and (3) establishes a connection with a person who can help them to navigate and enter into other communities.

I analyzed the documents from MSU's FYW program by searching for places where safe and open communities were a priority or resonated with already established goals of the program. In order to find these places, I looked for where "community" was mentioned in these documents and considered how the definitions of community offered in them suggested a sense of safety or openness. As with many writing programs, there is a clear emphasis on the idea of "community" at MSU. Also like many writing programs, the ways in which a "community" is defined and created are somewhat nebulous and left greatly in the hands of individual instructors to create in their own classrooms. However, community—especially through culture, collaboration, and communication—is heavily emphasized within MSU's first-year writing

goals, which calls for the “purposeful engagement of others” and an understanding of how “writers benefit from working with others” (“Program Learning Goals”). In the description of the curriculum given to instructors (and available on MSU’s FYW website), administrators describe “three acts critical to learning”: inquiry, discovery, and communication. While all three “acts” have components of collaboration, communication in particular emphasizes the need for community-building and openness.

As defined in the documents, communication is the “purposeful engagement of self and others.” In addition, a description of the first-year writing program written for students (also available on the website) informs students that they will “spend much of [their] time working with others” and that the writing classroom is not “a place to hide.” This description alongside the emphasis on the need to collaborate and communicate as part of the writing process, suggests that the writing classroom is a space where community must be created and examined. In these documents, there are two major pieces to MSU’s definition of community: (1) the idea of community as a space in which writing comes from; and (2) a community within the classroom, between and among student-writers. The first piece suggests a vision of community as an analytic lens, something that students can apply to enhance their understanding of a piece. It’s a vision of community common among classical rhetorical analysis—the “context” and “audience” components of a traditional rhetorical triangle. While this is certainly a useful heuristic lens through which to understand writing—and I do not dispute that community does have an incredible impact on the creation and reception of texts—this vision of community is one that exists outside of the student themselves and does not always ask them to seek a better understanding of their own communities, or to facilitate the creation of new classroom communities. In contrast, then, the second definition of community that is offered through

MSU's first-year writing classroom addresses this gap in the first; it is one that calls to students to work together as peers, to empathize and create space for each other in a way that is collegial and supportive, if not friendly.

Students will take more risks and share more willingly if they feel comfortable doing so, and that comfort is built through the creation of a classroom community. These conceptions also form the basis of a safe and open community that are talked about within trauma studies. Specifically, the need for empathy, respect, openness, and receptiveness is imperative in trauma recovery, just as it is for successful peer work. The major difference is in the need for recovery communities to also create a sense of *physical* safety, but I want to argue that this need is present, although not as discussed, in writing classrooms as well.

Finding: Encouraging Storytelling

In order to facilitate recovery, trauma scholars turn to storytelling, including the stories told through therapy, but also stories told in other spaces like the classroom or public domains. The act of telling a trauma story has several potential benefits for trauma survivors, including allowing space for empowerment and agency that was stripped away through the trauma itself. Herman argues that “the first principle of recovery is the empowerment of the survivor. She must be the author and arbiter of her own recovery” (133). In other words, telling stories allows survivors to take control over situations in which that control was wrested away from them. This re-instatement of agency helps survivors to reorient. It also comes with many physical and mental benefits. As Pennebaker explains, there are numerous health benefits involved in trauma recovery, including decreasing traumatic symptoms such as depression, dissociation, and flashbacks (“Telling Stories” 3). He specifically connects these benefits to storytelling because “the act of constructing stories appeared to be a natural human process that helped individuals

understand their experiences and themselves” (3). By asking survivors to reflect on their experiences, Pennebaker has them both confront their traumas and process it through the narrative structure. He acknowledges that this process is initially painful and can result in increased stress, particularly when a survivor relives the trauma for the first time (6), but his studies also show that over time, survivors greatly benefit from the act of storytelling.

There are also scholars who suggest that narrative can have health benefits to not just survivors, but also to empathetic outsiders who listen and tell their own stories. Pennebaker argues that his approach to storytelling is beneficial to everyone, including survivors but also just including those who may feel stressed or frustrated in their work or personal lives. Because telling stories involves reflection, Pennebaker advocates that everyone do so. He also suggests that non-survivors who tell stories that place them in the position of survivors increases their capacity for empathy. In writing studies, Wendy Bishop advocates for therapy-informed classrooms and a recognition that writing and the teaching of writing is remarkably similar at times to therapy. Writing, she argues, is often a therapeutic process, and the more that teachers and administrators can recognize and respond to that, the more teachers can benefit the students in their care (504). Similarly, Banks has called for an embodied approach to writing classrooms that argues for the presence of personal writing that “requires us to recognize these influences on us more fully” (34). In other words, story already has a presence in writing curriculum, and MSU’s first-year writing program reflects this.

In considering how MSU’s first-year writing program encourages storytelling as a goal of the curriculum, I searched for terms such as “story” as well as ideas of “personal” writing or writing that reflects students’ “experience.” I am defining story in relation to trauma literature as well as the concepts from writing scholars like Bishop and Banks, who emphasize story’s

relationship to both personal experiences and embodied interactions with the world. Specifically, Bishop discusses the way that “writing may be a therapeutic process” (504) because it asks writers to draw from their life experiences, and asks writing teachers and administrators to consider the need to then consider making space for the exploration and expression of the self in the classroom precisely because writing is connected to the body (506). Banks similarly argues for a consideration of how writing can happen “*through* the body” (25; emphasis in original), and that this embodied writing offers the chance for consideration and critique of the social influences that the body is called to follow (34). Therefore, spaces in curriculum that reflect a concern with getting students to write about their experiences and what that means for understanding cultures and communities is an act of creating space for stories.

I found that storytelling is an explicit goal of the FYW program. The curriculum asks students to recognize how all writing is cultural, and therefore is a performative story of cultural relationality, while also calling for students to tell their own stories and be comfortable sharing and discussing these stories with each other in the classroom (give some examples of this from the literature). For example, the curriculum overview claims that, “experience is central in learning to write” (FYW). This immediately calls for attention within the classroom to students’ personal lives and how these experiences shape their interactions with the world and to the writing they will be asked to do. Later in the curriculum overview, the link to the personal is made even more clear, with the overview stating, “it’s a class about you” (FYW). Rather than position the course as about rhetoric, about professional writing, or about concerns outside of the students’ experience, this language explicitly connects the students-as-people to course goals, and therefore centers students’ stories as an important learning tool in writing.

In addition, there are several units that explicitly ask students to tell stories, including the personal or learning narrative unit, which asks students to tell their own stories (and see these as valid academic writing). Because most instructors use this unit as the first unit of their course, story becomes a frame for academic writing from the beginning. Similarly, another unit—the reflection unit, which many instructors use at the end of their class—once again asks students to explicitly tell a story, this time of their learning experiences throughout the semester.

Story thus bookends the course, and many instructors use story throughout their class as a way to help students see how all writing is story—even academic writing, which often comes from personal interests and experiences. While the extent to which different types of stories are encouraged is likely up to individual instructors, what the MSU model does offer is a vision of first-year writing where academic writing is seen as *a type* of writing that students can learn, but the goal is not necessarily to get students to write perfect academic essays. Instead, student goals for MSU’s writing courses include helping students to see all the factors that influence the creation and reception of a text, from audience to medium to culture. The program also encourages students to see themselves as authors and storytellers with their own expertise and experiences, which gives them more agency than in writing classes that focus on seeing students as novices learning a trade.

While the kind of agency required for survivors versus students is very different, MSU offers a vision for how trauma-informed practices such as storytelling can be incorporated into classrooms where not all students are necessarily survivors. In other words, MSU sees storytelling as something that benefits *every student*, and in so doing offers a useful space for stories to aid *survivor-students* in particular by seeing their experiences as valid. MSU’s storytelling approach also gives minority students—who may already feel less comfort and

control within predominately white academic spaces—a sense of their own power and expertise (indeed, the focus on valuing all forms of cultural expression allows space for unheard voices to enter the classroom, which many instructors take advantage of).

Finding: Reflecting on Positionality and Relationality

One of the goals of telling stories, both in trauma recovery and in the writing classroom, is to help people understand how their experiences reveal things about the world. When Banks advocates for embodied writing, he argues that embodied writing helps students to view the influences on them (35). In other words, reflection on oneself can help to understand one's relationship to other forces, including culture, land, and history. Understanding relationality is also an important concept in trauma studies. Casper and Wertheimer argue that to come to a critical understanding of trauma means understanding trauma research as biopolitical work that requires attention to the body and society (11); Stevens understands trauma as a cultural response, one that disproportionately affects racial, gendered, and sexual minorities (20). To understand trauma as biopolitical means that part of trauma recovery is to come to see the traumatic event as social as well as personal, a disruption from cultural and social norms so severe that it causes a psychobiological response. Therefore, to reflect on positionality and relationality becomes a trauma-informed practice, as it means coming to understand the social implications of trauma.

Andrea Riley-Mukavetz defines relationality as a practice that requires one "to understand one's position in the world, one's relationship to land, space, ideas, people, and living beings, and to understand how these relationships have been and will always be at play with each other" (112). She argues that practicing relationality through scholarly work is "to practice respect, reciprocity, responsibility, and humility" (113). While positionality asks people to

consider their individual identities (white, cis, queer, etc.), relationality asks people to consider how their individual identities are affected by and in turn impact their relation to culture, land, and history. These are important distinctions, because while positionality makes implicit references to culture (ex., I know that I am queer because that is a reference to non-normative sexualities), relationality is always explicitly tied to cultural understandings.

In order to consider how MSU's first-year writing program asks students to think about their identities, positionality, and relationality, I looked through the curriculum for references to reflection, particularly to personal reflection on identity and experience. I also wanted to understand how the program called for an attention to how students relate to the world, so references to culture and community were important, especially those that asked students to consider their place in communities or how culture shaped their worldviews. I found that Michigan State's first-year writing program tries to emphasize both positionality and relationality. There is an explicit emphasis on helping students to develop cultural awareness, particularly in helping them to understand how writing and communication are tied to cultural norms and understandings. For example, the curriculum calls for students to "reflect on the relationship between their learning histories and present lives" (FYW) as well as to consider how "culture is important both in learning to write, and in assessing how writing works in the world" (goals). There are additional calls for students to learn to "situate or position themselves" (goals) and to "explore one's own position from the perspective of others" (goals). The emphasis on personal reflection—particularly in having students articulate their own learning and personal growth narratives and in having them reflect on themselves in relation to others—can help students to create a sense of their positionality.

Finding: Rebuilding Networks of Trust and Care

Another component to trauma recovery is the (re)building of networks of trust and care. After experiencing trauma, it is common for survivors to have difficulty trusting people (this is especially common after sexual violence-related trauma, because sexual violence often occurs between people who know each other). Herman describes trauma as an event that “overwhelm[s] the ordinary systems of care that give people a sense of control, connection, and meaning” (33). Therefore, one of the first steps in trauma recovery is to help the survivor find people or communities to confide in—sometimes, this means a therapist or counselor, sometimes it is friends or family, and sometimes it may be support groups of other survivors. Whatever avenue it is, the goal is to create a space where survivors can tell their stories and be heard, as well as feel that they are being supported and cared for. One of the major goals of trauma recovery is not to have the survivor become comfortable just with sharing the experience of trauma, but to come to a place of understanding and trusting once again.

It is especially important that the establishment of trust and care come through the development of *networks*. Because trauma “shatter[s] the construction of the self that is formed in relation to others” (51), recovery must be a process that establishes social connections and support systems. As Herman succinctly puts it, “no survivor can recover alone” (141). Therefore, I looked for spaces in the curriculum where issues of trust or care were mentioned. While there were no instances of “trust” or “care” being used as key terms in the curriculum, I did also attempt to find places where community or network building *within* the classroom were promoted (while community outside the classroom was important, I categorized this under the positionality and relationality category above). I also found only a few references to this in the curriculum. There were implications of in-classroom community (e.g., a call for “purposeful

engagement with others”), but not much on creating this. However, it is possible that these are implicit goals of the program, but not directly stated because they fall more under the category of instructor pedagogy than curriculum development. That is, the creation of classroom community is part of the instructors’ purview, rather than the writing program administrators’.

Finding: Centering Survivors

Of all of the components I have put forward for a trauma-informed, care-based approach, one of the most difficult to enact in contexts outside of counseling or direct advocacy is the centering of survivors. Interestingly, this is one of the most commonly cited components for trauma-informed approaches, particularly within activist circles, yet it is often the least enacted. Goodman and Epstein define survivor-centered approaches in contrast to perpetrator-focused approaches. That is, perpetrator-focused approaches tend to focus on systems of accountability for the offender, such as police and prosecution (480). In contrast, survivor-centered approaches prioritize “victim safety and security” (480) therefore shifting the focus from punishment of offenders to protection of survivors. Goodman and Epstein argue that a perpetrator focus is a problem because it is inflexible and often forces the survivor into more situations beyond their control while also not providing the necessary resources for recovery (482). Instead, they advocate for the flexibility of a survivor-centered approach, which responds to survivors’ individual and unique needs and provides support for victims (483).

While I have been unable to find specific calls for survivor-centered approaches within writing program administration, Angela Carter does argue for the necessity of a survivor-centered approach to trauma in writing pedagogy that provides a sense of how this could be implemented in writing work. She argues that by viewing trauma as an issue of disability justice, teachers and writing researchers can better come to understand the need to take issues of trauma

seriously (1). Disability studies has long called for an approach that is responsive to the accessibility needs of people on individual basis, and viewing trauma as a disability means providing resources for trauma response in similar ways that programs already provide resources for other disabilities. For Carter, this means listening to trauma survivors when they advocate for their needs within classrooms, such as trigger or content warnings (5).

Therefore, when considering how to search for survivor-centeredness within MSU's FYW curriculum, I followed Carter's recommendations for consider how students are invited to be advocates for themselves and their learning needs. In coordination with the other learning goals—inquiry, discovery, and communication—and the understanding that this curriculum achieves these goals through reflective practice and storytelling, I believe there is an argument to be made that the curriculum asks students to be advocates for themselves. It certainly asks them to consider their own goals outside of the classroom. Therefore, while there are not explicit references to survivor-centeredness or student advocacy, there may be possibility for a survivor-centered approach within the curriculum. It's important to note that Carter's definitions of student advocacy move beyond mere "students articulating goals for themselves" and into students co-designing comfortable learning spaces and environments, which may not appear in strict "curricular" documents, but could be part of a writing program administrators' orientation of instructors, to encourage them to consider teaching styles that invite students in as co-designers and participants.

There are several reasons for the lack of survivor-centered approaches in writing program work that are understandable and themselves indicate a concern for ethics and the treatment of trauma survivor. In other words, there are justifiable reasons that survivors may not be directly centered in trauma response that don't involve a dismissal of trauma or a lack of care for recover.

One is that it presents a series of other ethical problems to ask a trauma survivor to come forward publicly, let alone to take a position of authority. Forcing a survivor to speak before they are ready, and to audiences untrained to empathetically respond to their stories, can be a retraumatizing experience itself. Indeed, while trauma literature emphasizes the need for survivors to tell stories as part of the recovery process, it also emphasizes the need for those stories to be told to empathetic and receptive audiences (Herman; Laub). Academic spaces and writing programs—particularly when those constitute the workplaces of survivors—are not often handled to carefully respond to survivorship in the ways that survivors need and demand.

In other words, in activist spaces, the “centering of survivors” generally means making space for willing survivors to come forward and speak. In this way, it is similar to activist calls to make space for less heard voices of women, people of color, and queer folk—it is a way of allowing the people affected by an issue to direct the tone and actions of activist movements. However, there are ethical dilemmas in asking survivors to come forward to advocate in academic spaces, particularly when there may be a lot at stake in their coming forward, including dismissal, attacks, and even legal action from the university

However, the difficulties in enacting this essential component of trauma recovery does not mean that component can be overlooked. First, there may in many cases be survivors who are willing to come forward to speak; the hundreds of women who testified at Nassar’s trial and beyond indicates a clear willingness to step forward. There are many scholars in trauma studies (for example, Susan Brison) who also share their stories openly and willingly, often in attempts to make change or help others understand what it is like to navigate everyday spaces as a trauma survivor. There are also models of collective trauma response that are particularly helpful here that call for centering the less heard voices I mentioned above, which does not require individual

survivors to step forward without consent. Trauma is not an individual phenomenon, and there are many scholars (Casper and Wertheimer; Eyerman; Fahs; Orr) who have discussed collective and cultural responses that do not require a single, solitary speaker to be martyred to make change in university contexts.

Discussion

Because MSU is being analyzed while responses to the scandal are still in process—MSU still has an interim president, several open investigations on the university, and the offices in charge of investigating these issues are in the process of hiring new people—it must be reiterated that my intention is more to analyze how curriculum and administrative approaches that were already in place before a public sexual assault crisis may provide useful interventions post-crisis. In other words, MSU provides an opportunity to understand how current approaches to writing program administration in rhetoric and composition may already lend themselves to a trauma-informed, care-based approach. What MSU offers is an opportunity to show that writing program administrators are already concerned with many issues that trauma scholars are—my argument here is that a trauma-informed approach is not so radically different from already standard models that there are not possibilities for incorporating it into existing systems.

MSU already does well in addressing several components I have argued throughout this dissertation are critical to a trauma-informed, care-based practice, including allowing space for personal reflection, advocating for empathetic peer responses, reflecting on positionality, and, most clearly, encouraging storytelling. Because MSU's curriculum is already centered on the importance of individual stories and cultural narratives, these classrooms provide teachers with plenty of space to consider how to help a campus climate affected by sexual violence to heal. What MSU is less successful in incorporating are issues of centering survivors, rebuilding

networks of trust, and building safe and open communities. That is not to say that there are not attempts to address these—I have discussed many of these above—but rather, it appears that administrators at MSU feel more at a loss as to where to begin with these issues. I say this not to place blame on administrators, but instead to point to spaces where trauma researchers can offer useful interventions and training to help administrators feel more comfortable in their responses to these issues.

In conversations with other faculty at MSU—and in my own experience working in campus organizations devoted to responding to a campus that allowed such violence to exist—one of the most common sentiments that people express has been a feeling of being overwhelmed, a feeling that there is nothing that individuals can do that will address something so large and painful. This is completely understandable (and I myself have had this feeling many times throughout my work both at MSU and with survivors in other spaces). However, this is the space where intervention is most beneficial and necessary—to offer people actionable interventions, especially in critical first moments that can feel the most paralyzing.

Finally, I want to argue that MSU as an example shows that faith cannot necessarily be placed in central administration to address issues of sexual violence with trauma-informed, care-based approaches in mind. Instead, MSU shows that the focus in these instances is often on maintaining brand standards and keeping donations—it is on protecting the institution rather than protecting the people (this is a common trend when these issues happen, as seen at Penn State, MSU, and now more recently at Ohio State). In contrast, much of the personal interaction that can be most beneficial to the healing process happens in local levels—in classrooms, programs, and campus events. Because non-administrative driven initiatives may be more beneficial,

writing researchers should take care to support and facilitate these directives. Programmatic approaches may be more beneficial than those given by central administration.

Therefore, it is useful to consider what responsibility a writing program administrator might have in building trauma-informed, care-based responses? After large sexual assault crises like those that happened at Michigan State, people not directly impacted by the violence lose their trust in institutions. It is understandable that people would lose faith in an institution that had multiple opportunities to stop Nassar and did not manage to do so. This leads to several things that mirror symptoms individual survivors have, including anger, sadness, and a feeling of helplessness. In these moments, it is clear how the incorporation of TI/CB practices can be essential to trauma recovery, because they help communities heal.

While it may at first appear that handling these issues is beyond the scope of WPA work, there are still ways that writing program administrators can help to address these issues. For example, I considered instructor trainings on issues such as mandatory reporting. The groups that are still listed and brought into first-year writing trainings are most often those endorsed by central administration. In other words, the first-year writing program is still relying on the expertise of units in the university that have generally lost the trust of the MSU population, including the Office of Institutional Equity and the Title IX Office. It does not help the program to rely on these outside offices. While I understand that there is hesitation to bring in non-experts, particularly in such a sensitive time, the reliance on institutional structures that have already failed the MSU community does not help in the rebuilding of trust within the department. Furthermore, there are numerous sexual assault and trauma experts who do not belong to these offices and can help instructors consider alternative approaches to working with administrative offices that have already failed to respond to sexual assault. MSU could do better to invite

experts in trauma recovery, restorative justice, or healing-centered care as ways to consider alternative reporting approaches as well as signal better understanding of the issues.

The final takeaways from MSU's first-year writing program are that (1) there is already space in rhetoric and composition that resonates with trauma-informed, care-based practices; (2) that there needs to be more focus and training on helping administrators at programmatic levels feel comfortable in responding to these sorts of crises; and (3) that, because TI/CB practices are not necessarily radical shifts away from already-established best practices, writing program administrators should not wait to implement these changes until a large, public crisis occurs. The third point has been an argument of mine throughout much of my advocacy for sexual assault awareness and trauma-informed care—if administrators wait until after a Nassar is unveiled at their institution to take action, then they have already acted too late.

Chapter 5: Laying a Foundation to Respond to Crisis

There is a strange kind of invisibility that comes with being a survivor within an institution going through the crisis of sexual violence, a pervasive feeling of being unseen and unheard by the space supposed to be in charge of keeping you safe. When the extent of the Nassar scandal became public beginning in 2017, and Michigan State's institutional complicity in covering up the abuse became clear, those of us working and studying here were exposed to our own kinds of trauma, the trauma of trying to find a way to respond to an institution that had so completely failed us—and continued, in many ways, to fail in its response. Michigan State, like many universities before it, enacted what Carly Smith and Jennifer Freyd term “institutional betrayal,” or the tendency of institutions to respond to traumatic situations by enacting further harm to members of its own community rather than acknowledging its wrongdoings and making amends for its faults. Institutional betrayal, they argue, results in a variety of responses from the community including “disrupted memory, to decreased physical health, to delayed service seeking or reporting, to disengagement from previously valued institutions as a whole” (576).

Smith and Freyd outline four characteristics of institutions they say lead to institutional betrayal. First is the enactment of membership requirements. By enacting and policing strict standards of membership, institutions privilege conformity and punish deviance (580). Next is prestige; as institutions elevate particular members (such as coaches or administrators) to higher status, they give them more potential to enact abuse (580). Third, institutions deny reports of abuses that do come forward, and in particular, they do so through the “othering” and devaluation of the individuals coming forward (581). Finally, institutions create strong barriers to change, including a “lack of language around the issues that continually arise (e.g., child abuse in religious organizations) only to be apparently seen for the first time, each time,” a self-

proclaimed “not knowing” around issues of abuse or trauma, and a lack of education, resources, and understanding of trauma (581-582).

I believe that all of these are present at Michigan State—for example, Nassar’s status as a renowned athletic doctor allowed him to get away with abuse for long periods of time, while the women who did come forward when younger were dismissed as unreliable children. However, I want to concentrate in this chapter on the barriers to change characteristic, specifically because I believe this is a space where rhetorical intervention is the most useful and possible. Because Smith and Freyd point out that barriers to change often rely on institutions obscuring knowledge of and language surrounding trauma and abuse in order to hide and discredit survivors, one of the most powerful tools at our disposal is language and education. One argument throughout much of this dissertation has been that trauma is part of our university system whether we acknowledge it or not—and as Smith and Freyd point out, institutional abuses continue because well-meaning people claim they did “not know.”

So, how do we use language and education to respond to abuse and to address institutional betrayal? At a Culture of Care Summit at Michigan State intended to address the campus climate and provide steps for moving forward in responsible, trauma-informed ways, Michigan State professor Carrie Moylan argued that a trauma-informed approach to institutional betrayal requires four components: (1) recognizing the widespread impact of trauma; (2) recognizing the signs and symptoms of trauma; (3) integrating knowledge of trauma into policies, procedures, and practices; and (4) resisting retraumatization and identifying paths to healing. The first two components require resources into trauma research and the incorporation of that research into trainings, orientations, and other practices at the university. The last component also requires resources—but these are healing-specific resources, including (but not

limited to) counseling services, student support services, restorative justice initiatives, and funding into offices meant to support people through reporting and investigative procedures if they choose to go that route. The third component—integrating knowledge of trauma into policies, procedures, and practices—that will be the focus of the rest of this chapter, as I consider how writing program administrators might create more trauma-informed, care-based policies.

First, I offer definitions of policies and procedures—what these are and the difference between them. While I cover Michigan State’s current institutional policies in chapter 3, this chapter will revisit those policies and their enactment within the first-year writing program through a discussion of how preemptive, accessible, and care-based policies and procedures create—or can create—a more responsive environment to trauma. Most WPAs already recognize that their administrative positions require an immense amount of attention to policies and procedures, and I argue in this section that analyzing institutional policies and procedures through the lens of trauma-informed, care-based practices can give an indication of what an institution does and does not value.

Next, I offer an analysis of the materials I collected for this chapter, which includes a short discussion of what policies and procedures that Michigan State University’s First-Year Writing program are subject to (there is a deeper discussion of specific policies in chapter 3). Then, I offer comments from interviews I had with the director of first-year writing at MSU, who offered a vision of the procedures and practices that happen within the program—for example, orientations, trainings, and programmatic culture. Through this conversation, I found that there were many values that WPAs held that were very much aligned with TI/CB principles, though they were not always thought of in terms of trauma or incorporated into formal policy.

Finally, I end the chapter with a move to considering trauma-informed care as it has been applied in different workplaces and services as a potential model for WPAs. In addition, because assessment is a concern for many WPAs, I offer models of trauma-informed care assessment that I have adapted to fit into the context of a writing program. My argument in offering these models is that while some policies may be outside of a WPAs power to change (for example, legal policies such as Titles VII or IX), policies and procedures also represent an area where WPAs have some authority and responsibility, and therefore can offer trauma-informed, care-based foundations within programs.

Policies and Procedures

Throughout this dissertation, I have argued that trauma-informed, care-based values and practices are not antithetical to the work that writing program administrators already do, and in the previous chapter I showed instances where the curriculum at Michigan State was already resonant with TI/CB principles. One argument throughout my work has been that rhetoric and composition is a discipline that is very well positioned to incorporate TI/CB principles because we often already see their value, even if we don't always enact them (or know how to enact them). In Michelle Day's response essay for the 2018 Watson Conference, she called for sustained attention to issues of trauma in our research and trauma-informed research methods that can help writing researchers engage in these issues. What I believe she does so well in this piece is that she points out spaces where writing researchers are already talking about trauma—even if we aren't explicitly calling it "trauma." She also argues persuasively that because trauma does appear in our research, we need to consider trauma-informed research methods. If trauma is there, then we need to be aware of how to respond to it as ethical and responsible researchers.

I echo her call here, and I further call for an attention to how we acknowledge and respond to trauma in other aspects of our work—our teaching, our administrative work, our program development, our mentorship. Trauma is already there, whether or not it is always acknowledged. And, more importantly, it is not outside of our purview to address it.

When I say it is not “outside our purview” to address trauma, I want to be clear here that I am not calling for WPAs or instructors to become trauma counselors in addition to the other work that we do—although I will call for them to become more familiar with at least some literature about trauma (I give further recommendations in the conclusion to this dissertation). What I am calling for is to consider how trauma-informed, care-based practices are already imbricated in the important work WPAs already do and where explicit attention to issues of sexual violence is needed. And I am calling for WPAs to pay attention to the things that are under their control to change, including the implementation of practices or policies to better respond to survivors.

There is a difference between procedure (the things that we often do as departments, but aren’t codified as “rules”) and policy (the things that are written rules). This is an important distinction to consider, particularly because much of what WPAs do (much of what organizations in general do) falls under procedure rather than policy. While policies tell us what rules we have to follow, what is and isn’t allowed or important, procedure governs more of our day-to-day interaction with each other. Policies don’t—and can’t—account for the nuances within every single case that may emerge, and therefore procedures become especially important in filling in the gaps.

By examining an institution—or a department’s policies and procedures—we can gain insight into what that institution values. NiCole Buchanan argues that we should consider the

idea of *value* literally, in terms of how we measure it in money, resources, time, and recognition. In other words, if an institution says that it values survivors, then at a university level, we would expect to see funding for spaces like counseling services and restorative justice initiatives and policies that are trauma-informed and care-based, that reflect attention to the complexity and non-linearity of trauma and many survivors' fear of reporting, that are survivor-centered rather than perpetrator-focused. At the departmental level, I might expect to see workshops and trainings for administrators and faculty devoted to trauma-informed approaches and better understandings of issues of identity as well as the incorporation of students as leaders on departmental committees.

Materials and Data Collection

Therefore, this chapter focuses on examining policies and procedures in order to get a sense of how the values of MSU's FYW program are trauma-informed and care-based. In the previous chapter, I was able to concentrate exclusively on documents from FYW. Because the curricular documents I was examining there were created and maintained by the program itself, it was not as necessary to gather or consider documents from outside of the program. However, policies and procedures are more complex. Programs are required to adhere not only to their own policies, but to the policies of the departments they are housed within (in this case, the Department of Writing, Rhetoric, and American Cultures), the college (the College of Arts and Letters), the university (Michigan State), and state and federal law. While there are certainly policies and procedures that are unique to MSU's FYW program itself, the fact is that most policies that WPAs have to follow are beyond their creation and control.

In order to acknowledge that, I will take a brief amount of time to consider some of the most important policies that cover the handling of sexual violence that WPAs at Michigan State

are required to adhere to. In chapter 3, I covered many legal policies (Titles VII, IX, and the Clery Act) as well as institutional enactments of these policies through the Offices of Institutional Equity and the Sexual Assault Prevention Program. I also looked at departmental policies from WRAC, which houses MSU's FYW writing program. In this chapter, I move to a discussion of policies and procedures with one of MSU's FYW directors, who I interviewed about the program and its values.

I want to note that while I am here focusing on policies that explicitly address issues of sexual violence, there are many other ways to consider how policies and procedures can be trauma-informed and care-based. As I discussed in the previous chapters, a TI/CB approach is a systemic and cultural approach, not an individualized one, and therefore my analysis in this chapter is not to think about whether or not policies covering sexual violence *exist* but whether or not they are *trauma-informed*. In other words, in this chapter I am considering how policies and procedures make space for TI/CB principles like listening, storytelling, and reflection.

Interview Discussion

Because policies are written rules and guidelines, they are easier to find and analyze than procedures or practices. However, procedures and practices are just as important—if not more so—to understanding how programmatic cultures are and are not trauma-informed. Because procedures are the actual things that people do in response to events, in order to understand MSU's FYW program, it is not enough just to look at policy, but also to try to understand how policy is actually enacted and the things that are considered values but aren't actually written as policies. Therefore, I interviewed the director of first-year writing at MSU (and an administrator affiliated with WRAC, where the FYW program is housed, but who are not involved with the first-year writing program specifically) to get a sense of the procedures of the program.

In my interview, the WPA commented that he saw one of the major goals of the first-year writing program as getting students to come to think about “how they understand having a voice at the university.” This orientation, he remarked, means that first-year writing courses aren’t about “sorting” students or weeding them out, but rather assisting them in their own pursuits and passions. It also means that the first-year writing courses have to create an approach that allows students to be reflective on themselves and their place within a community—both the university community and whatever broader communities they might wish to join during their careers or throughout their lives.

One thing that stands out to me about this approach is that it decenters the instructor and recenters the students as the focus of the curriculum. In this approach to first-year writing, the instructor’s expertise is not necessarily meant to be in introducing students into any particular genre of writing, but rather to help students build confidence in order to make “informed decision[s] about how they can move forward” at the university, into their disciplines, and into the world. This approach recognizes, respects, and makes space for the differences that students may have as they enter the classroom, and wants to create opportunities for students to pursue those differences. This is what makes it student-centered.

It is also what makes it difficult, something that the WPA acknowledged in his interview with me. The fact is that this approach—and all approaches that are trauma-informed and care-based—require a lot of labor on the part of both administrators and instructors. This includes what we think of as typical labor in terms of teaching and administration—planning, evaluation, assessment, reflection—but it requires additional labor to become reoriented and educated into these practices, to come to understand how to implement them into classrooms in a way that works for both instructors and students. It also requires, I argue, more emotional labor on the part

of instructors. To ask students to reflect on their lives, to share their stories with each other and to find ways to grow and act on those stories, means we have to continuously practice and engage in empathy, care, and respect. There is even more need to cultivate classroom communities where students feel safe sharing, because students are sharing *pieces of themselves*, their own passions and histories.

When asked about the ways that students are encouraged to share pieces of themselves through writing, the WPA remarked, “we begin with storytelling, we begin with listening [...] Tell us a story and we go we can go to work that. Whatever that story is, we'll put that to work.” The immediate connections between story and listening within the goals of the program are clear: students are meant to both express themselves, but also to listen and respect each other throughout the process. In addition, instructors are also meant to be listeners, engaging with students’ stories and finding ways to be advocates and supporters, to provide students with the necessary skills to *do work* with their stories. What I also note in this goal is the continued use of “we” and the implicit sense of community that comes with connecting story and listening. The description of the goals of the course are not students learning as individuals, but rather students sharing their stories within a community of other students, and coming to recognize how those stories can make them part of other communities.

Put another way: “Communication always has a community in it, even if that community is [...] with our former, our present, and our future selves, with different versions of ourselves.” As one of the three main goals of MSU’s first-year writing course (along with discovery and inquiry), it is important that *communication* is here defined in terms of *community* and in terms of *reflection* upon the self. Both of these goals connect to trauma-informed, care-based practices that prioritize the building of safe and open communities and the need for reflection, particularly

reflection on positionality and relationality. When we discussed how this community was built within the FYW classroom or through the FYW curriculum, my interviewee talked about the process of “finding your voice in somebody else's voice [...] finding other things in the world that you didn't create and making something new from that,” which he described as the goals of both the course and of the remix project in particular. The idea that students would be called to not only listen to others’ voices, but to find themselves within it, to position themselves in relation to others and as a community with each other, is aligned with TI/CB practices.

Finally, the WPA and I also discussed the place and need for empathy as part of the first-year writing program approach. My interviewee described empathy as something that “wants something else, it wants to say, how can I lead them to understand this work in a different kind of way, or how can we both come to better understanding of what the mission is here [...] empathy says something that you have, something about your orientation to the world has to be put down in order to pick something else up.” He noted that this is where it diverges from sympathy, where people still maintain a distance from the other. In other words, when we sympathize with someone, we may pity them or feel bad for them—but there is an us/them distance inherent in sympathy. In contrast, empathy closes that distance, bringing people together in a community and asking them to do work. I commented in our interview that this reminded me of Judith Herman’s call that recovery is a process in which people must listen, remember, and *engage*—that we must move beyond mere sympathy and into action. Similarly, his definition of empathy, in referring to “work,” asks of students to do something with the understandings that they begin to develop through their coursework.

When asked how this might look from a writing program administrator perspective, my interviewee recalled an event he went to lead by Howard Stevenson on racial literacy and justice.

He described how Stevenson asked all of the participants to recall a story about a racial encounter they have had that was uncomfortable or traumatic, and then to tell those stories to each other. He says: “the thing I loved about what Stevenson does is he brings into the room the feeling and then immediately distances it, makes us go to work on thinking about what it is, getting outside of ourselves to not just be overcome by that feeling but actually watch ourselves feeling it, and to think about it in those ways so we create a distance.” What I find striking about his description of Stevenson’s talk is how rooted it is in trauma-informed, care-based practices. What Stevenson did was find a way to recognize the traumas of race that were existing, find a way to talk through the silences by encouraging people to share their stories, then to become empathetic listeners to each other. He built a safe and open community by asking those in the room to see themselves in each other’s stories, to acknowledge each other’s feelings as other people. And this approach was effective: “Those things have to be surfaced and then they--then, once they're surfaced, you can work with them.”

My interviewee noted that there were times he had to take a similar approach as a writing program administrator. He noted one instance where a group of students came to his office talking about a race-based encounter in one of their writing courses that left them feeling uncomfortable and made the classroom feel like a hostile environment for many of them. Recognizing the difficulty of the situation, he decided to follow Stevenson’s approach and have students write about their feelings, place it in their bodies—but instead of having them share that writing (presumably because of the potential for that to continue to fan the flames of what was going on, though I didn’t ask him during our interview), he instead had them write about another time they felt similarly and share those feelings. What students found is that they were all feeling the same things: “At the end of that conversation, we listed our feelings, and we realized that we

were all feeling, even though we had taken different positions on what was happening in the room that we were feeling something very similar.” And, like with Stevenson’s talk, once those feelings were surfaced, they could work with them.

Incorporating Trauma-Informed, Care-Based Practices

In an argument for the incorporation of trauma-informed care and interventions, DeCandia, Guarino, and Clervil state that, “Addressing trauma is not the purview of the mental health system alone. Nonclinical settings that do not see themselves as having the capacity to provide trauma-specific services can adopt trauma-informed care to support the people they serve” (17). In other words, while trauma-specific services (services that are founded in individualized, clinical interventions for trauma) are the domain of specialized care, trauma-informed services are a universalized framework that can be adapted to a variety of workplaces. Hopper, Bassuk, and Olivet define trauma-informed care as a change in organization policy, procedure, and culture that is “grounded in an understanding of and responsiveness to the impact of trauma” and emphasizes safety, agency, and empowerment (133). What these approaches offer is a view of trauma-informed care that is not just specific to counseling or other specialized areas of care. Indeed, these studies argue that trauma-informed care should be seen as an entirely different approach; that while counseling specializes in trauma-specific services, trauma-informed care can be incorporated in any workplace or organization, including (as I argue) writing programs.

Furthermore, DeCandia, Guarino, and Clervil not only offer a definition of trauma-informed care, but also a heuristic for assessing how well an organization performs according to principles of trauma-informed care. They list eight core principles for measuring the incorporation of trauma-informed care in the workplace (see table 1).

Core Principles	Examples
Understanding Trauma and Its Impact	Understanding traumatic stress and recognizing that many current behaviors and responses are ways of adapting to and coping with past traumatic experiences.
Promoting Safety	Establishing a safe physical and emotional environment where basic needs are met; safety measures are in place; and provider responses are consistent, predictable, and respectful.
Supporting Consumer Control, Choice, and Autonomy	Helping people regain a sense of control over their daily lives. Keeping people informed about all aspects of the system and allowing them to drive goal planning and decisionmaking.
Sharing Power and Governance	Sharing power and decisionmaking across all levels of an organization, whether related to daily decisions or when reviewing and establishing policies and procedures.
Ensuring Cultural Competence	Respecting diversity within the program, providing opportunities for consumers to engage in cultural rituals, and using interventions specific to cultural backgrounds.
Integrating Care	Maintaining a holistic view of consumers that acknowledges the interrelated nature of emotional, physical, relational, and spiritual health and facilitates communication within and among service providers and systems.
Healing Happens in Relationships	Believing that establishing safe, authentic, and positive relationships can be corrective and restorative to trauma survivors.
Understanding That Recovery Is Possible	Understanding that recovery is possible for everyone regardless of how vulnerable he or she may appear, instilling hope by providing opportunities for consumer involvement at all levels of the system, and establishing future-oriented goals.

Table 1. Core Principles of Trauma-Informed Care.³

Using these principles as guides, they draw from several models and tools to help organizations become trauma-informed and to self-assess their progress in doing so. However, many of these assessment models (see Appendices C and D), while they have shifted away from clinical settings, are still geared towards service or aid-providing industries, such as child-serving agencies or homelessness centers. In other words, many of the questions in the self-assessment tools would not be directly relevant or translatable to writing program administration (though some would be). The closest assessment model for WPAs might be the self-assessment tool created by Davidson based on the study by Falloot and Harris, which was created specifically to consider how post-secondary education adapted to trauma-informed care. Andrew Anastasia has

³ Table and principles taken from DeCandia, Guarino, and Clervil (2014).

added to this model to consider more inclusive questions (i.e., questions specifically directed at addressing issues of sexuality and race), and I have further adapted this model to continue addressing these issues and to add others specifically related to departmental and programmatic concerns (see table below). One goal I have in this chapter is to continue to consider how we might adapt some of these self-assessments to be more reflective of the work of writing programs.

Core values	Questions to guide the development of trauma-informed practices
Safety (physical and emotional)	<ul style="list-style-type: none"> ● Has the institution talked with a diverse group of community members about what safety means to them (for example, have we talked with GNC/queer/trans people of color about what ‘safety’ does and does not mean?) ● How safe is the building or environment? Are sidewalks and parking accessible? ● Are directions clear and readily available? ● Are security personnel present? ● If so, has the institution done work around how the presence of law enforcement may <i>compromise</i> feelings of safety? ● Are restrooms easily accessible (e.g. well-marked and gender neutral)?

Table 2. Core Values of Trauma-Informed Practice.⁴

⁴ Fallot & Harris (2009), adapted by Davidson (2017), modified by Witt et al. (2019) and myself for this dissertation project (2019).

Table 2 (cont'd).

	<ul style="list-style-type: none"> • Are first contacts welcoming, respectful, and engaging? • Does the institution offer options for GNC/queer/trans students to communicate their chosen name(s) on rosters or other public spaces (e.g. Blackboard, Canvas)? • Does the institution provide resources to support the emotional well-being of students (e.g., counseling services, GNC/queer/trans services, ELL and international student support, disability services, services for students of color)? • Are these services easily accessible, navigable, and provide enough staff to support the full student body?
Choice and control	<ul style="list-style-type: none"> • Is each student informed about available choices and options? <i>If you're in the classroom, think about how this question might challenge your own values and practices.</i> • Do students get a clear and appropriate message about their rights and responsibilities? Are there negative consequences for making a particular choice? Are these necessary or arbitrary consequences? <i>For teachers, consider your attendance policies. For administrators, consider school-wide attendance policies.</i> • Do students have choices about attending various meetings? <i>Consider field trips or mandatory out of classroom activities. Can you integrate a digital attendance option?</i>

Table 2 (cont'd).

	<ul style="list-style-type: none"> ● Do students choose how contact is made (e.g. by phone or mail to their home or other address)? <i>Example: your institution automatically mails information to student's home address. Student has changed their name on Blackboard, but does not realize mailings are going home and they are not out to parents. What are possible consequences?</i> ● What kind of agency do students have over curriculum and policy development? For example, are undergraduate and graduate students invited to serve on curriculum development committees or to give feedback on departmental policies before they are put into place?
Trustworthiness	<ul style="list-style-type: none"> ● Do students receive clear explanations and information about tasks and procedures? ● Are specific goals and objectives made clear? Are these made accessible in various modalities (e.g., on the course website, on the syllabus, and in class)? ● How does the institution handle challenges between role clarity and personal/professional boundaries? ● What resources does the institution offer to support students experiencing harassment, abuse, or discrimination outside of investigatory or perpetrator-focused approaches?

Table 2 (cont'd).

	<ul style="list-style-type: none"> • Are there options for addressing these issues that align with restorative justice principles?
Collaboration	<ul style="list-style-type: none"> • Is there a student advisory board, and does it have a significant role in planning and evaluation of services? Are there members who identify as trauma survivors or are from a targeted group (i.e. veterans, GNC/queer/trans, POC, foster youth?) • Is student input and preference given substantial weight in service planning, goal setting, and the development of priorities? • Do educators identify tasks on which they and students can work simultaneously (e.g. information gathering and committees; assessment; student organizations; campus initiatives)?
Empowerment	<ul style="list-style-type: none"> • How are each student's strengths and skills recognized? • Do educators communicate a sense of realistic optimism about how students can achieve their goals? • How can each class, contact, or service be focused on skill development or enhancement? • Does your institution have a consistent land acknowledgment practice? • Are classes designed to foster student agency or are they "banking model" oriented? • If your institution has a Writing Center, what is the guiding

Table 2 (cont'd).

	<p>pedagogy? Is it designed to “fix” student’s writing or empower students to understand their own rhetorical decisions?</p> <ul style="list-style-type: none"> • How is your classroom organized? Rows? A circle? Is your circle accessible, especially for students who need more physical space to feel comfortable?
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Adapting These Models for Writing Program Administration

One thing to note in each of these self-assessment tools is that all of them define different core principles of trauma-informed care, although each of them are overlapping and resonant with each other (and, as I have articulated previously in this dissertation, I have my own guiding principles for trauma-informed, care-based practices). Regardless of how each author chooses to categorize each principle, the core ideas remain the same: a trauma-informed, care-based approach must focus on the promotion of care, community, trust, and agency within a culture or organization. In considering how this would appear in writing program administration, and specifically how it could be implemented at MSU, I offer two suggestions, which is that we should view these principles as both *foundational* and as *assessable*.

In seeing these principles as *foundational*, I argue (as I have throughout my work), that trauma-informed, care-based practices should become core values of the work that writing program administrators do. This is particularly important in contexts that are already impacted by trauma, like at Michigan State, because of the risk of institutional betrayal by not incorporating trauma-informed approaches into our work and programs. The tools above provide opportunities to begin reflecting on the current status of a program and its addressing of concerns of trauma, as

well as suggestions for needed changes, both immediate and long-term. In addition, as programs move to make these changes, the tools also provide a means of *assessing* these changes by continuing to reflect upon and with the people most impacted by them.⁵

Conclusion

In my experience at Michigan State and as a researcher in rhetoric and composition, I have found a real and genuine response from people who see sexual violence as a prevalent issue they want help in learning to address. I have regular conversations with friends and colleagues who see these issues as something they should address in some capacity and as part of departmental procedure. I found at MSU, after the Larry Nassar scandal brought these issues front and center, many people were already trying to find ways to have this conversation about what we are doing to address sexual violence on our campus. However, when I looked at the written policies, I found much less. Responses to sexual violence outside of official offices like Title IX or the Office of Institutional Equity fell under the category of procedure rather than policy. (And, to be completely frank, we cannot always rely on these offices to address these issues either.)

⁵ I draw inspiration for this assessment model too from Linda Adler-Kassner's *The Activist WPA: Changing Stories About Writing and Writers*. In it, she argues that the steps to making change as a WPA are to identify the issue and goal; identify what we know and need to know to change; develop a message and identify the audience; and finally, assess the overall work. My hope is that this self-assessment addresses several of these points and allows for enough recursion to revisit and revise as necessary.

Here's the problem I want to point out: when we relegate important issues to procedure instead of policy, we rely on the benevolence of the people in charge to actually commit to doing something about these issues. And sometimes, they will commit. But sometimes they won't. Policy can be a tricky thing. It's slow and messy and so many other things—but it is also sustainable beyond individuals in a way that procedure may not be. If we are truly committed to addressing these issues, then one thing WPAs can do is consider how to (re)write policies in a trauma-informed, care-based way.

At Michigan State, I found that while the procedures of the department suggest that individual administrators have values resonant with TI/CB practices, the written policies that determine how administrators should act are not. It was clear through my interview that there is a strong overlap in the stated values of WPAs and the goals of the first-year writing program at MSU and trauma-informed, care-based practices, but also that these were not necessarily intended or explicit. In other words, although I saw a clear adherence to the values of empathetic listening, storytelling, and reflection of positionality and relationality, they were not necessarily tied to a trauma-aware approach or the promotion of care in the classrooms. In addition, while the director of FYW expressed a personal commitment to other TI/CB practices like community-building and the rebuilding of trust and care, these commitments were not codified into procedure. The director acknowledged this with me, along with the difficulties of doing so while also respecting instructor agency within their classrooms.

I want to acknowledge these difficulties—as someone who has worked as a writing program administrator, although not at Michigan State, I am also attuned to the balance that WPAs must strike between determining policies, procedures, best practices, and goals for a program and allowing individual instructors space and control over their own classroom

contexts. However, I also believe that the trauma-informed, care-based assessment documents I have provided in this chapter can strike this balance, because they are meant to ensure that we are bringing all voices (instructor, student, and administrator) to the table when designing programs. The intended goal here is not to overdetermine what instructors or programs should or should not be doing, but rather to advocate for a particular design process that is accessible and inclusive to those who it will impact. In addition, it is meant to underscore the values that are *already* present in the first-year writing program, not to add additional values or to suggest that the values that are present are insufficient. By surfacing, naming, and making more explicit a commitment to trauma-awareness and care, we are enhancing the values that are already present.

As I will further discuss in the next chapter, however, when we discuss changes to policies and procedures, we must also be aware that merely changing policies is insufficient without also increasing training and orientations, which are already poor at MSU. Administrators are barely informed about sexual violence policies as it is, and changing the policies to be more empathetic to survivors will make little difference if they are not trained in what these policies mean. It is important to invest in trauma-informed care training immediately. I would also like to consider adaptations of current policies and procedures to incorporate this kind of assessment into current practice. That is, changing a writing program to be more trauma-informed is not just a matter of changing specific policies, but of changing the procedures of a program to incorporate reflective practices and trauma-informed assessments. While I have suggested some changes through the surveys included in this chapter, I will offer further suggestions for some of these policy and procedural changes in the conclusion to this dissertation.

Chapter 6: Becoming a Trauma-Informed Discipline

My goal in this dissertation was to consider how current practices by writing program administrators resonate with trauma-informed, care-based practices. I did so by analyzing the curriculum at Michigan State University's first-year writing program, as well as by considering how WPAs could implement and assess more trauma-informed, care-based policies and procedures at the institution. One of my findings and arguments throughout has been that there are actually many ways in which writing program administrators already value and do work that resonates with trauma-informed, care-based practices, even if there are ways we could make these more conscious and sustainable. However, one note I want to make is that while I spend most of this conclusion—and dissertation in general—making recommendations for changes and best practices, I also believe that other departments and administrative bodies could learn from the examples in our discipline, who are already ahead in valuing practices like storytelling, listening, reflection, and community. As the director of MSU's first-year writing program noted in his conversation with me, while it is not always easy to do administrative work that incorporates care for everyone, he “wonder[s] often how faculty in other departments who aren't specialists in storytelling [...] how they make sense of it.” In his view, knowing how to invite, listen to, and engage with students' stories was key to his position, and his disciplinary expertise was therefore invaluable to his position as an administrator.

In my discussion of institutional betrayal in the previous chapter, I noted that a trauma-informed response to institutional betrayal requires four components: (1) recognizing the widespread impact of trauma; (2) recognizing the signs and symptoms of trauma; (3) integrating knowledge of trauma into policies, procedures, and practices; and (4) resisting retraumatization and identifying paths to healing. While I provided assessment models and surveys that WPAs

might be able to adapt into practice to address component (3), I also want to take time in this conclusion to consider other changes and approaches in line with all four components of trauma-informed response. The suggestions and future directions I provide in this chapter are meant to be first steps in a conversation; that is, I am not trying to suggest that these are the *only* methods for creating trauma-informed, care-based programs. However, I do recognize the need to provide some helpful foundations and next steps, and so will attempt to do so here.

The rest of the chapter is organized into a few sections. First, I want to address once again why I believe writing program administrators are in a position to make universities more trauma-informed, care-based programs. While I have touched on this in previous chapters, I again want to call attention to how TI/CB practices are already aligned with our work—and therefore why we are well-positioned to advocate for these changes. Then, I want to briefly revisit potential changes to policies and procedures—while this was the focus of chapter 5, I will offer here a few more specific changes and suggestions that could be implemented to policies not just at Michigan State, but at many other universities. Then, I will consider other institutional conditions that make campuses more trauma-informed and care-based, including smaller class sizes and student representation on all committees and initiatives. While some of these suggestions may be beyond what individual writing program administrators can implement, I do want to note their effectiveness in creating TI/CB programs so that WPAs might consider being more likely to advocate for them or be aware of when they are not being implemented effectively. Finally, I end with a note on the need for resources for recovery and healing spaces, particularly those that are survivor-centered rather than perpetrator-focused. Not only are these resources necessary to avoid retraumatization and help individuals heal, but they are also needed for the people who take up this work—the researchers, administrators, and instructors who work

to implement trauma-informed, care-based changes at their institution. This labor is hard and bears the risks of vicarious traumatization or empathetic burnout, so support for those willing to take this labor on is critical.

At the end of this project, I believe that, as my interviewee noted in our interview, “I don’t know that we have the answers, but we’re positioned well to do it.” My argument in this conclusion is not necessarily to provide all the answers or best practices—although I hope I have at least begun to speculate on potential starting places. Instead, I want to return to Aurora Levins Morales’s idea that “asking questions can be just as good as answering them.” My question is this: what can we, as writing program administrators, as writing scholars and researchers, and as writing teachers, offer our institutions that is more responsive to the trauma that exists within them? Not all of us are experts in trauma-informed care—although I hope that we can start to see the need to at least start familiarizing ourselves with this literature and its relevance to our work. However, we are well-positioned because we are experts in trauma-informed practices like storytelling, listening, and reflection. And we’re well-positioned in other ways: we reach a large number of students at our institutions every year, especially as writing program administrators. We have some power to reshape what responsive and caring administration looks like. So, what is it that we can do? What do we have to offer?

Policies and Procedures

Trauma-informed, care-based values are not antithetical to the work that we already do. Instead, rhetoric and composition is a discipline that is very well positioned to do this work because we often already see their value, even if we don’t always enact them (or know how to enact them). I talked throughout this dissertation about the genuine response I’ve found from people at Michigan State—and at many conferences and other academic spaces—who are eager

and willing to learn what they can do to address violence, harassment, and discrimination in their contexts. Even with the limited power that we may have as researchers, professors, and departmental administrators, we recognize the need to *do something*, *learn something*, and *act now*. Most importantly, I'm encouraged by the people who are asking what they can do because it means we are starting to realize that it is within our capacity to do make trauma-informed, care-based changes, and that we don't necessarily have to rely on Title IX or other offices to be the arbiters of these actions or policies.

I want to make a note about policy. I have already discussed the difference between procedure (how we do the things that we do as departments; these are not always codified as "rules," but are rather the steps by which we enact those rules) and policy (the things that are written rules). It is necessary that we recognize the importance of creating trauma-informed, care-based policies within our programs and departments. To repeat a point I made in chapter 5: if we relegate issues to other institutional offices, or to procedure rather than policy, then we risk failing people who may need us.

In the previous chapter, I offered a longer survey as a way to assess policies and procedures for trauma-informed, care-based practices. However, Guarino et al. also offer six short questions for reviewing policies I believe all writing program administrators should use when undergoing changes:

- Is the policy necessary?
- What purpose does it serve?
- Who does it help? Who does it hurt?

- Does the policy facilitate or hinder student⁶ inclusion and control?
- Were students included in its development?
- Could the policy re-traumatize the student (e.g., limit control and power, lead to fear and confusion, etc.)?

When I looked at the policies and procedures regarding the handling of issues of harassment, violence, and discrimination that affected the First-Year Writing program at Michigan State in chapter 5, I noted that by and large, these policies deferred to other university bodies for determination and judgment. In addition, most handbooks documented procedures for *academic* violations, but had little to no indication of the handling of non-academic violations. For example, the Writing, Rhetoric, and American Cultures graduate handbook states that there are “explicit guidelines and policies for mediating conflicts and handling grievances/appeals between students and mentors, and between students and students,” (65) but later in the handbook, only state that “if a student has a disagreement or conflict with an instructor, administrator, or another student, or feels that in some way her/his academic rights have been violated, s/he should attempt to resolve that conflict directly with the person(s) involved through informal discussion” (75). After this step, the handbook directs students to the Academic Grievance procedure outlined WRAC department bylaws or to the campus ombudsperson for academic or nonacademic concerns. There is no written departmental procedure in these bylaws for addressing non-academic concerns outside of the “informal discussion” in step one.

⁶ The original questions referred to “consumers” rather than students, as Guarino et al. were looking at organizations rather than educational programs. I have changed that language here.

A trauma-informed, care-based approach would suggest other, more specific guidelines to handling non-academic concerns *before* moving them beyond the department. Obviously, there are going to be cases that require immediate intervention outside of the department, but this is not always required or even effective. Because of institutional betrayal, it may increase the amount of people willing to come forward if there are opportunities to handle cases within a department, outside of legal, prosecutorial means of action. At Michigan State, there are even opportunities for writing program administrators and department administrators to work together with new university initiatives like Restorative Justice @ MSU, to hold conflict resolution trainings for administrators and instructors, create campus and community resource pages to connect students with, and develop new within-program grievance procedures for students based in trauma-informed, care-based principles. Students who wanted or needed to pursue action through the Office of Institutional Equity could still choose to do so, but students who would prefer restorative justice approaches would be able to work with administrators more comfortable and trained in these approaches as well. And as a former WPA who knows that the position requires a lot of mediation between instructors, students, and other administrators, any training in conflict resolution and restorative justice is a plus for these situations as well.

In addition to grievance procedures for students, the privileging of academic integrity and invisibilizing of non-academic concerns also appeared within the sample syllabi available on the first-year writing websites. All of these syllabi contained *academic* expectation for students, but only a handful set interpersonal expectations for students, even in courses that emphasized collaborative work as essential to the course. One exception was the prevalence of “classroom expectations” sections on syllabi that tended to call for some kind of “basic decorum.” Out of ten sample syllabi available on the website, only one included counseling on a list of campus

resources, while most only focused exclusively on academic resources (although some included the campus disability resource office). That syllabus was also the only one to include a note about the instructor's status as a mandatory reporter.

Here is a simple change to make: include lists of campus *and off-campus* resources on syllabi, including both academic and non-academic resources for students. Off-campus resources (see Appendix A) are particularly important for two reasons: (1) they can offer community systems of support for students who may not feel comfortable going to institutional resources for any reason, including feelings of institutional betrayal; and (2) not all campuses are inclusive in the resources they offer. In addition, requiring instructors to disclose and explain their legal status as mandatory reporters to students is a trauma-informed, care-based practice, particularly in writing classrooms where students may end up talking about topics that require instructors to report. By creating inclusive statements about mandatory reporting and the process up front, writing program administrators can help inform students about the process of reporting, offer resources and support systems, and give agency to students who may not wish to disclose to certain instructors or institutions. I have included an example syllabi statement of how instructors can disclose their status as mandatory reporters, taken from the University of Northern Colorado's First-Year Writing Program (Appendix B). What this statement does well that I recommend for all instructors is that it:

- (1) explains Title IX and mandatory reporting and the instructors' role in this system;
- (2) defines terminology students may be unfamiliar with, such as "disclosure";
- (3) outlines the specific reporting process at the institution, showing familiarity with that university's unique system;

- (4) clearly states the students' agency and responsibility in the process, including that they are not required to speak with campus officials about any incidents; and
- (5) provides resources students may pursue in lieu of speaking to an instructor, including confidential resources who can connect students to off-campus help.

In other words, this statement takes seriously the responsibility instructors have to care for students, including teaching them about navigating university policies and systems while also providing options and giving students agency to pursue whatever option is most comfortable.

Recognition and Representation

When I asked my interviewee what kinds of things he might enact with unlimited resources, he didn't hesitate to say that he wanted "to give our teaching faculty reasonable size classes." He noted that with large class sizes, instructors were often overburdened with the responsibilities of planning, grading, and responding to the needs of every student, particularly for those who taught the maximum of three sections of composition, which could total more than eighty students (and therefore over four hundred individual writing projects in the five-project sequence) a semester. The national landscape is often worse for instructors, who can end up teaching five courses a semester and/or teach at multiple institutions. By reducing course sizes, "we could reduce the demands of that work to make it more possible to [...] do collective problem-solving." I agree with him and further argue that smaller class sizes is a trauma-informed, care-based practice for two main reasons. First, by reducing class sizes, we are better equipping instructors to meet the needs of students, to listen to their stories as individuals and be responsive to those needs, to build community and care—all of which also increase student retention from an administrative perspective. Second, we provide care for instructors themselves, who are also susceptible to burnout and trauma (and feelings of institutional betrayal, as

discussed in chapter 5). Being responsive to labor concerns is therefore a TI/CB practice; it is also a recommended practice by major organizations such as the Conference on College Composition and Communication and the Association of Departments of English, who recommend an ideal of 15 students but a maximum of 20 students per course (Horning).

In addition to these labor concerns, creating and supporting increased opportunities for non-hierarchical distribution of power and diverse representation on administrative committees is also a trauma-informed, care-based initiative. Guarino et al. argue for the sharing power and governance both in the creation of policies and procedures and in the enactment of daily decisions of an organization, which can increase and rebuild networks of trust within institutions, promote healthy communication and collaboration, and allow space for diverse positionalities to have a voice in power-making systems. As Guarino ask in their policy-review questions, one of the best ways to recognize how something will impact students is to have them be part of developing it in the first place. On a personal note, as a student at Michigan State, where institutional betrayal is occurring, the calls that student voices are being unheard and silenced could be helpfully addressed by starting to include them on these kinds of decision-making committees. While this wouldn't necessarily heal all the pain from the initial wounds, it would begin to show students that they are being respected and heard. There are moves towards this through initiatives such the College of Arts and Letters' Culture of Care Task Force, which includes two undergraduate and two graduate representatives, but extending these types of initiatives to be both university-wide and at the program-level would continue to rebuild faith in the institution.

Education and Support

While most trauma-informed, care-based practices begin with pointing out the need for education and training around trauma, I am going to end with the recommendation for training and support around trauma and care. One reason I end with this is to point out education and learning as a *recursive* process—that is, it is not enough to ask writing program administrators or people within a first-year writing program to do reading on trauma or go through a single orientation on mandatory reporting procedures and assume that will be enough. Instead, recursion itself has to be built into the process. This is why the surveys I suggest in the previous chapter include both a foundational and an assessment version, so that WPAs can revisit how their programs are operating in practice; in order for TI/CB practices to be sustainable, recursion has to be built into the process, including a yearly review and re-assessment of programmatic goals to identify areas of needed change.

Clervil et al. argue that the most effective educational process for trauma-informed, care-based processes is identifying co-leaders: *multiple* facilitators for the program who are already knowledgeable about trauma-informed care and can help adapt policies and orient instructors into a trauma-informed, care-based system. These leaders should be given authority to make changes and work as part of a group (rather than exclusively) to discuss the implementation of these changes *over time* (34-35). The time concept is important—Clervil et al. emphasize that deadlines are not conducive to this process; instead, more important is allowing for all people who the policies and changes will impact to have the chance to voice and discuss their feelings and contribute to the changes. This, they argue, is more effective at getting people to “buy in” to the changes than informing people of an upcoming switch in protocol effective next semester.

It is important for all new hires and instructors to receive trauma training as part of the process, including training on both mandatory reporting and trauma-informed, care-based practices in the classroom, including institutional-specific trainings regarding campus and off-campus resources, information about student demographics, and a frank and open discussion of campus climate. Writing program administrators should cultivate relationships with these campus and off-campus resources as much as possible and be knowledgeable about students' experiences within these spaces. These community networks are useful to have as administrators (to know who to invite to help with trainings, for example) and being knowledgeable, open, and honest to students about the encounters they may have with these offices can help build trust in programs.

Finally, there is a distinct need for resources and support for students, faculty, and administrators who are doing the labor to create these programs and who work on them. Not only is this more service work, which we often ask too much of from people in academia, but this type of work in particular places a huge emotional burden on people. There is a risk when doing work around trauma of vicarious traumatization, or the experience of traumatic symptoms that results from being exposed to trauma over time. Even in doing work unrelated to trauma directly, there is a risk of compassion fatigue, which can result in hopelessness, negativity, a decrease in productivity, and increases in feelings of incompetency and self-doubt (Figley). While vicarious traumatization and compassion fatigue are most often discussed in relation to counseling, health industries, or emergency personnel, studies have shown that educators are also at risk for these symptoms (Koenig et al.)—and there is a possibility that educators who are more attuned and trained in issues of trauma would be at even higher risk of these. Therefore, support systems such as therapy (included as part of health insurance for those all those working on campuses affected

by sexual violence and trauma) are necessary. Recognizing the need for term limits and/or course releases for any working groups related to writing programs in order to decrease not only labor commitments but emotional effects is also highly suggested.

Final Reflections

As a trauma survivor doing research in an institution going through a crisis of sexual violence, I experienced a particular kind of retraumatization, a feeling of being unseen and unheard within the institution that was supposed to be keeping me safe, but suddenly was exposed for terrible crimes against other women like me. When beginning my dissertation project, I felt excited by my chosen topic, to begin to explore how writing program administrators could implement trauma-informed, care-based practices as part of our work, particularly at institutions which were impacted by trauma, like my home university of Michigan State. I knew that studying institutional responses to trauma and sexual violence would be emotionally taxing at times, but I'd written about such topics before and felt comfortable doing so. As an abuse survivor, I didn't see the topic as something to avoid because of my past—instead, I saw it as necessary to add my voice to the scholarship, to openly represent others like myself.

At first, I found it easy to dive into the topic. Since Michigan State was in the middle of a sexual violence crisis of its own, I let the pain, the anger, the sadness fuel my writing. But after a point, it became impossible to wake up every day, to read about trauma, to go to campus and feel the trauma of hundreds of women and girls around me, to be reminded of my own trauma in every one of those stories. I was constantly talking about abuse, whether it was the abuses at Michigan State or the harassment being revealed everywhere as people came forward with their #MeToo stories. I was dwelling in violence. It became impossible to see the inaction and

ignorance of those in power and not feel that in my body—to not feel that as an attack against myself, my work, my life. I was feeling all the compassion fatigue and the vicarious traumatization that many others around me were feeling, and I was also feeling retraumatized because of my own experiences, many of which were uncomfortably similar to the testimony of the women and girls who were victims of Nassar, or from public accounts going viral during #MeToo.

Survivors often learn that recovery may mean taking an unexpected turn that has nothing to do with fitting in or cohering to society's pressures. Instead, we learn to listen to the body first, to listen to what is comfortable and what is not. The fact is, academia is not always comfortable. And in some ways, it shouldn't be—learning can happen in spaces of *productive* (i.e., carefully scaffolded and moderated) discomfort. However, there is a difference between a discomfort zone, which offers challenges, and a panic zone, which is overwhelming. While writing this dissertation, MSU became a panic zone, a space overwhelmed with traumatic stories. When the extent of Michigan State's institutional complicity in covering up Larry Nassar's abuse became clear, those of us working and studying here experienced our own kinds of trauma, the trauma of trying to find a way to respond to an institution that had so completely failed us—and continued, in many ways, to fail in its response.

Michigan State, like many universities before it, enacted institutional betrayal, or the tendency of institutions to respond to traumatic situations by enacting further harm to members of its own community rather than acknowledging its wrongdoings and making amends for its faults. Institutional betrayal, as Smith and Freyd argue, results in a variety of responses from the community including “disrupted memory, to decreased physical health, to delayed service seeking or reporting, to disengagement from previously valued institutions as a whole” (576).

Institutional betrayal, in other words, results in very real physical, emotional, and mental symptoms for those who are impacted. For myself, it meant the recurrence of post-traumatic stress disorder and depressive symptoms that hugely impacted my dissertation work and other research.

I fell into a deep depression, one of the worst I've experienced. My days were spent sleeping for almost twelve hours and then waking up, pulling myself onto my couch, and opening up books on rape and abuse and staring at them, uncomprehendingly, for hours, before I would give up. The one solace I had was running—somehow, I did manage to put on running gear and hike the trails around my apartment for hours every day. But I did this instead of writing, because I couldn't bear to think about these topics anymore. When I would return home from these runs, the guilt of avoiding my work would rush back to me and I would crawl into bed, frustrated and defeated.

No one knew how bad it got, because I had so much practice with saying, “this is fine” back when I was living with my abuser. I finally reached a breaking point and decided to reach out to a doctor for help, which I received. I was put on antidepressants and some other medications to help—and they did, at least for a little while. I got some energy back, just in time to dive into the job market with a partial dissertation and a growing sense that I may not *want* to be in academia, not if what it would require of me was the sacrifice of my mental health.

In *Writing to Heal: A Guided Journal for Recovering from Trauma and Emotional Upheaval*, James Pennebaker shares a story of a patient who, through a series of reflective writing activities, recognizes that her current toxic work environment is contributing to her emotional turmoil, and ultimately decides to quit her job. She takes a lower-paying, lower-ranked position, but later reports during therapy that she feels happier and more secure. Her story

reminded me of how trauma recovery cannot be measured by capitalist notions of productivity—emotional well-being does not mean being monetarily successful. It also does not necessarily mean producing the most research in a short amount of time.

The lesson I was learning while writing my dissertation was that doing trauma research as a survivor couldn't be put on a timer, at least not without endangering my own recovery. (I see echoes here of Clervil et al.'s remarks that the implementation of trauma-informed care cannot be placed on a timeline either.) I was left with a decision. If I pursued a "traditional," tenure-track position, with all the research requirements that come with it, I knew I would likely have to stop my research in trauma for my own well-being. One mentor pushed me in this direction, remarking that I should never feel that I have to self-flagellate for academia. I appreciated her advice, although I noted that her own work also dealt with these difficult issues, and that she continued to do it anyway, often at the cost of her own emotional health. I suspect she continued her work for the same reasons I knew I would: because she knew that she would always be called to advocate for her community, even at the sacrifice of herself.

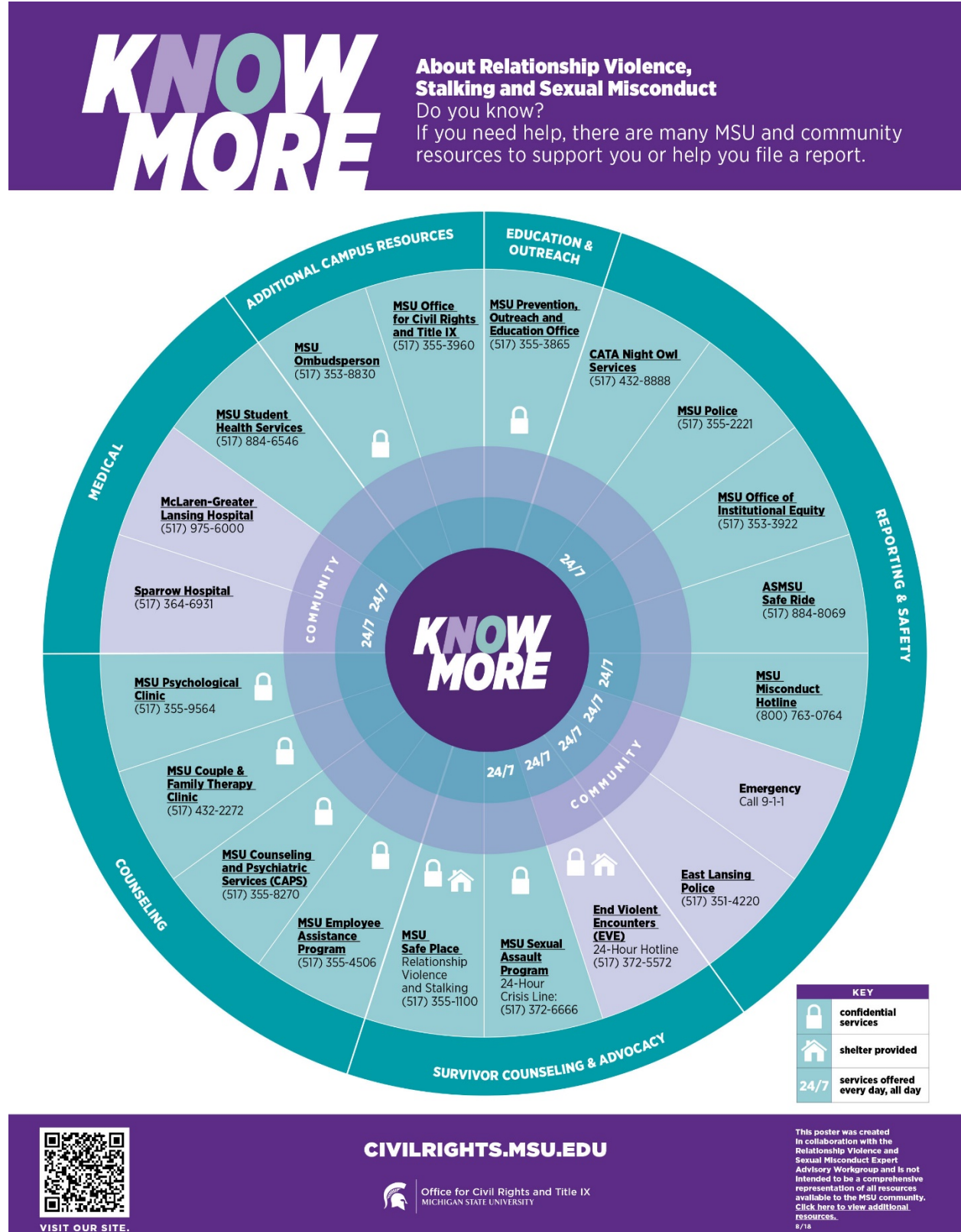
So, I pursued another option. Instead of a research-focused position, my top choices were teaching-centered positions. Not only would this allow me to do the work that I really wanted to do, that I am advocating for here—to care for students and create more trauma-informed classrooms and spaces at universities—but it would remove me from the tenure-track publishing calendar. I can do this work on my own time, to take the breaks I need, pursue other projects when it is too much, put it down until I am ready to take it up again. As I reflect upon the impacts of this research of my body—and of my body on my research in turn—I think about the need of scholars to acknowledge when our research is (re)traumatizing, when and how our institutions are failing us as full humans, and how we can build spaces for valuing more humane

and slow research practices so that we can still do the necessary work on these topics without harming ourselves in the process.

I tell this story because story is a trauma-informed, care-based practice, as is centering the experiences of survivors—and it feels fitting to end this dissertation with a reminder of the experiences of the process of research, and the impact trauma research has on the body. As I reflect on this experience, I am reminded of Julie Lindquist’s call for slow research practices, which allows time to form relationships with participants; understand and interrogate markets, ecologies, and histories; and productively collaborate and form networks within communities. I would add that slow research practices allow for the researcher to interrogate and, as necessary, limit the impacts of research on our own bodies, to continue to form productive and health relationships with ourselves as research participants in our own projects.

APPENDICES

Appendix A. Michigan State University “Know More” Resource Guide



Appendix B. Sample Statements on Resources and Mandatory Reporting

All statements taken from First Year Writing Program, University of Northern Colorado.

Title IX

All instructors in the writing program must adhere to the policies in our campus Title IX office.

The UNC Title IX office created a statement for faculty to include on their syllabi:

“The University of Northern Colorado is committed to providing a safe learning environment for all students that is free of all forms of discrimination and sexual harassment, including sexual assault, domestic violence, dating violence, and stalking. If you (or someone you know) has experienced or experiences any of these incidents, know that you are not alone. UNC has staff members trained to support you in navigating campus life, accessing health and counseling services, receiving academic and housing accommodations, obtaining legal protective orders, and more.”

Please be aware that all UNC faculty members are “responsible employees,” which means that if you disclose to a faculty member about a situation past, present, or future involving sexual harassment, sexual assault, dating violence, domestic violence, or stalking, they must share that information with the Title IX Coordinator, Larry Loftin. “Disclosure” may include communicate in person, in class, via email/phone/text message, through in/out of class assignments, or through any other form of communication. Larry or a trained staff member in the Office of Institutional Equity and Compliance will contact you to let you know about accommodations and support services at UNC as well as your options for pursuing a process to hold accountable the person who harmed you. You are not required to speak with OIEC staff regarding the incident; your participation in OIEC processes are entirely voluntary.

If you do not want the Title IX Coordinator notified, instead of disclosing this information to your instructor, you can speak confidentially with the following people on campus and in the community, who can connect you with support services and help explore your options now, or in the future:

- UNC’s Assault Survivors Advocacy Program (ASAP): 24 Hr. Hotline 970-351-4040 or <http://www.unco.edu/asap>
- UNC Counseling Center: 970-351-2496 or <http://www.unco.edu/counseling>
- UNC Psychological Services: 970-351-1645 or http://www.unco.edu/cebs/psych_clinic

If you are a survivor or someone concerned about a survivor, or if you would like to learn more about sexual misconduct or report an incident, please visit www.unco.edu/sexualmisconduct or contact the Office of Institutional Equity and Compliance (970-351-4899). Please also be aware that university faculty may also be required to disclose any incidents of other kinds of abuse they know about, past, present, or future, to the University.

Appendix C. Organizational Self Assessment for Trauma-Informed Care

Note. This list is meant to be comprehensive and the process of implementing trauma-informed care generally takes multiple years. While implementation of these elements is the goal, the list represents an ideal to strive for.

	How much is this value embraced by or present within your organization?
	1=Not at all 2=Slightly 3=Moderately 4=Mostly 5=Very Much
Trauma-Informed Care Values	
1. Safety – physical and emotional safety.	1 2 3 4 5
2. Trustworthiness – creation of a feeling of trust and safety via clear and thoughtfully considered frame and boundaries governing all aspects of the organization’s work.	1 2 3 4 5
3. Collaboration – inviting, whenever possible, the input of those served by the organization and staff of the organization; providing opportunities for decision-making and innovation.	1 2 3 4 5
4. Empowerment -- sharing power with, and giving appropriate authority and decision-making power to, those served by the organization and staff of the organization; maximizing choice and control for the organization’s consumers and employees; recognizing and highlighting strengths; looking for opportunities to praise and reward positive behavior; viewing mistakes as learning opportunities.	1 2 3 4 5
A. Administrative Support for Program-Wide Trauma-Informed Services	
1. Organizational administrators support the integration of knowledge about violence and abuse into all program practices.	1 2 3 4 5
2. The organization has a “trauma-informed care initiative” (e.g., workgroup/task force, trauma specialist) endorsed by and authorized by chief administrator.	1 2 3 4 5
3. A competent person with administrative skills and organizational credibility is designated to lead this task force.	1 2 3 4 5

Table 3. Yoe et al., “Trauma-Informed Care in Youth Serving Settings: Organizational Self-Assessment.”

Table 3 (cont'd).

4. Administration supports the recommendations of the trauma task force and follows through on these plans.	1 2 3 4 5
5. Administration attends at least portion of trauma training themselves (vs. sending designees in their places); they allocate some of their own time to trauma-focused work (e.g., meeting with trauma initiative representatives, keeping abreast of trauma initiatives in similar program areas).	1 2 3 4 5
6. The administration release staff from their usual duties so that they may attend trainings and deliver trauma services.	1 2 3 4 5
7. Necessary sources of funding for trauma training and education are found.	1 2 3 4 5
8. The administration is able to tolerate certain level of organizational disruption in making the transition, including such things as staff confusion, conflict within treatment team, resistance to change, and property destruction.	1 2 3 4 5
9. The administration values and rewards staff efforts to be flexible and to offer choices to the clients, even when the result is that the client is not immediately brought under control.	1 2 3 4 5
10. The administration develops a policy statement that refers to the importance of trauma and the need to acknowledge consumer experiences of trauma in service delivery.	1 2 3 4 5
11. The administration celebrates successes.	1 2 3 4 5
B. Organizational Structure	
1. Clinically-trained staff are in leadership positions of multi-disciplinary treatment teams and are integrated into the daily life of programs.	1 2 3 4 5
2. In congregate care, organization has an organizational and supervisory structure where clinical and residential staff are integrated into treatment teams rather than belong to separate clinical and residential “silos.”	1 2 3 4 5
3. Intake and discharge process are planful, recognizing the important meaning of relationship beginnings and endings for traumatized children.	1 2 3 4 5
4. Staff schedules are structured such that staff have time to meet, think about, and talk about the work rather than only doing the work.	1 2 3 4 5
5. Staff have regular clinically-oriented supervision, ideally individual supervision, where they can discuss client issues including their countertransference and vicarious traumatization.	1 2 3 4 5
6. Forums (ie. supervision, treatment team meetings, retreats) aimed at helping staff to acknowledge, address, and transform their vicarious traumatization.	1 2 3 4 5
7. Organization makes use of outside consultants who have expertise in trauma when necessary.	1 2 3 4 5
C. Trauma Screening and Assessment	
1. The program has a consistent way to identify individuals who have been exposed to trauma and to include trauma-related information in planning services with the client.	1 2 3 4 5

Table 3 (cont'd).

2. Trauma screening is relatively brief, not overly complicated, and avoids unnecessary detail that would increase likelihood of triggering traumatic memories.	1 2 3 4 5
3. The screening process avoids unnecessary repetition of same questions at multiple points in the intake or assessment process. It is often important to return to the questions in treatment after some appropriate time interval.	1 2 3 4 5
D. Milieu Treatment Practices and Behavior Management (for congregate care settings)	
1. Staff and clinicians routinely think first about the meaning and function of behaviors before deciding how to intervene.	1 2 3 4 5
2. Staff display an attitude of the child “doing the best that they can” rather than assuming intentionality.	1 2 3 4 5
3. Staff use active listening to explore the problem rather than immediately speaking to the child about consequences or solving the problem.	1 2 3 4 5
4. Staff refrain from power struggles with children.	1 2 3 4 5
5. Organization uses of relationship-based behavior management system instead of “point and level” system.	1 2 3 4 5
6. During behavioral issues, staff recognize primary goal as helping children to calm down and get back in control of their behavior.	1 2 3 4 5
7. Staff are sensitive to the many ways their interactions with children can trigger shame.	1 2 3 4 5
8. Staff refer to children in descriptive ways and refrain from negative labels (e.g. “manipulative,” “resistant,” “borderline,” etc.)	1 2 3 4 5
9. Staff value flexibility and individualized care in managing behavior rather than strict compliance with rules and treating all children equally.	1 2 3 4 5
10. Multidisciplinary team members function well as a team - manage conflict, care for each other, avoid splits such as therapist/child care worker splits.	1 2 3 4 5
11. Program has thoughtful physical touch policy that recognizes the critical importance of touch for healthy child development and is sensitive to issues of child abuse, allegations of abuse, and re-traumatization.	1 2 3 4 5
12. Staff are willing to talk with their peers and supervisors about their strong positive and negative reactions to clients and doing the work.	1 2 3 4 5
13. Staff feel free to ask their peers for help, or take over for a peer, when there is an impasse in managing a behavioral issue.	1 2 3 4 5
E. Physical Environment and Layout of Agency	
1. Space, including waiting and reception area, is welcoming and inviting for clients and families.	1 2 3 4 5
2. Living or program space is nurturing (e.g. colors, plants, music) and affirming (e.g. display of child art/work, culturally competent).	1 2 3 4 5

Table 3 (cont'd).

3. Crisis or “calm down” rooms are safe and soothing places for children to get strong feelings under control.	1 2 3 4 5
F. Clinical Treatment Practices	
1. Utilization of crisis prevention plans (also called safety tools or personal safety plans) written in collaboration with child, family, and possibly previous providers.	1 2 3 4 5
2. Before addressing problem behavior, the team, led by the clinician, considers their understanding of the reasons for the behavior and uses this understanding to determine their interventions.	1 2 3 4 5
3. Treatment planning is built from formulation that considers impact of trauma on client’s development and current symptoms/behaviors, and includes goals of developing emotion regulation skills/self capacities as well as healthy attachments.	1 2 3 4 5
4. Family therapy addresses family dynamics, builds parenting skills, and reinforces child's growth and changes.	1 2 3 4 5
5. Staff have an awareness of the role of trauma in the history of parents, and family treatment includes a trauma focus.	1 2 3 4 5
6. Discharge is careful, thoughtful, gradual and includes referral to trauma-informed resources.	1 2 3 4 5
7. Program offers trauma-specific treatments such as: Trauma Focused Cognitive Behavior Therapy (TF-CBT), Dialectical Behavior Therapy (DBT), Eye Movement Desensitization Reprocessing (EMDR), Trauma, Adaptive, Recovery Group Education and Therapy (TARGET), etc.	1 2 3 4 5
8. Treatment utilizes sensory interventions to help children calm down and teach self-soothing.	1 2 3 4 5
9. Psycho-educational groups about trauma are offered to clients and families.	1 2 3 4 5
G. Restraint and Seclusion Reduction	
1. All levels of staff are aware of propensity for re-traumatization through restraint and seclusion with traumatized clients.	1 2 3 4 5
2. Restraints and seclusion used only when there is threat of imminent danger.	1 2 3 4 5
3. Staff training focuses on de-escalation techniques to avoid restraint and seclusion.	1 2 3 4 5
4. Staff value avoidance of re-traumatization via restraint and seclusion even if it means less adherence to rules, increased property damage, and longer negotiation time.	1 2 3 4 5
5. Each child has an individual plan stating both medical and psychological risks in restraint which includes specific guidelines for staff actions to avoid.	1 2 3 4 5
6. Organization monitors trends in restraint and seclusion. Increased in restraint/seclusion trigger discussions aimed at understanding and addressing the increases.	1 2 3 4 5

Table 3 (cont'd).

H. Workforce Development	
1. Trauma training is required for staff at all levels and of all disciplines (see “Staff Trauma Training” below).	1 2 3 4 5
2. Staff who display mastery of trauma-informed practice are encouraged, celebrated, and promoted.	1 2 3 4 5
3. Organization promotes a culture of performance improvement, one that understands that mistakes will be made but learning will occur.	1 2 3 4 5
4. Trauma-informed values and concepts are integrated into staff orientation.	1 2 3 4 5
5. Hiring practices screen for staff whose values are consonant with a trauma-informed approach.	1 2 3 4 5
I. Staff Trauma Training	
1. All staff members receive foundational trauma training with a primary goal of sensitization to trauma-related dynamics and the avoidance of re-traumatization.	1 2 3 4 5
2. Staff members receive training in a trauma-informed understanding of unusual or difficult behaviors. Training stresses concept of symptoms as adaptations.	1 2 3 4 5
3. Staff trauma training also includes topics of: frame and boundaries; relationship building with traumatized children; how to use their responses to particular clients (countertransference); impact of, and how to address, secondary trauma such as vicarious traumatization (VT).	1 2 3 4 5
J. Monitoring Trauma-Informed Initiatives	
1. Organization monitors the progress of trauma-informed care initiative in ongoing way.	1 2 3 4 5
2. Data related to implementation of a trauma-informed approach is collected, monitored, and used for quality improvement.	1 2 3 4 5
3. Organization develops a debriefing process to analyze incidents characterized by conflict, violence, and aggression to inform policy, procedures, and practices in order to avoid such incidents in the future.	1 2 3 4 5

Appendix D. Trauma-Informed Care Assessment.

Staff at all levels of the organization receive training and education on the following topics:

Trauma and Mental Health	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
1. Traumatic stress and its impact on the brain and body.						
2. Child development.						
3. Cultural differences in how children develop.						
4. Child/caregiver attachment (e.g., types of attachment).						
5. Culture-specific parenting practices (e.g., discipline practices, parent/ child interactions).						
6. How trauma impacts child development.						
7. How family trauma impacts child/ caregiver relationships.						
8. The relationship between childhood trauma and adult re-victimization (e.g., domestic violence, sexual assault).						
9. The impact of chronic trauma on adults.						
10. The impact of trans-generational trauma on family functioning (how trauma is transmitted across generations).						
11. Experiences of historical trauma among particular groups.						
12. Cultural differences in how people understand and respond to trauma (e.g., physical symptoms, different words to talk about traumatic experiences).						

Table 4. Clervil et al., “Trauma-Informed Care for Displaced Populations.”

Table 4 (cont'd).

13. The relationship between trauma and mental health.						
14. Common mental health disorders associated with trauma (e.g., depression, anxiety - causes, symptoms, treatments).						
15. Individual vs. Empathic Family stress.						
16. Post-traumatic stress disorder (PTSD).						
17. Cultural differences in how mental health issues are understood and expressed.						
18. Cultural norms around help-seeking behavior as it relates to mental health.						
19. Culture-specific experiences with the health and mental healthcare systems (e.g., histories of being marginalized, stigmatized, or abused).						
20. The relationship between trauma and substance abuse.						
21. Substance abuse disorders (causes, symptoms, treatments).						
22. Suicide (risk factors, red flags, crisis intervention).						
23. Traumatic Brain Injury (TBI).						
24. How working with trauma survivors impacts staff (e.g., compassion fatigue/vicarious trauma).						
25. Factors that help people recover from trauma.						
26. The role of spirituality in the recovery process.						

Table 4 (cont'd).

Displacement-Specific Knowledge	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
27. Types of displacement (e.g. refugees, secondary migration, asylum-seeking, returnees, internally displaced, stateless).						
28. Types of pre-migration trauma experienced by displaced families (e.g., war trauma, torture, gender-based violence, female genital cutting, unstable political systems).						
29. The immigration process for displaced families.						
30. Experiences and challenges related to resettlement and acculturation.						
31. Mental health disorders frequently experienced by displaced families (e.g., depression, anxiety).						
32. Racism, classism, and cultural oppression related to the population being served.						
Skills and Strategies to Support Recovery	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
33. Trauma-Informed Care.						
34. Cultural Competence (e.g., awareness of the cultures served, awareness of staff members own values, attitudes, and beliefs based on cultural background, culturally sensitive practices).						
35. Motivational Interviewing.						
36. De-escalation strategies (i.e., ways to help people prior to, during, and after a crisis).						
37. Professional boundaries and ethics.						

Table 4 (cont'd).

38. Culture-specific strategies for engaging families.						
39. How to recognize and minimize potential triggers for clients.						
40. How to educate trauma survivors about trauma and its impact.						
41. How to work through a translator or cultural broker with clients who are non-English speaking or have limited English proficiency.						
42. How to respond effectively to the services needs of populations with low literacy skills.						
Staff Supervision, Support and Self-Care	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
43. Staff members have regular team meetings.						
44. Trauma-related topics are addressed and reinforced in team meetings.						
45. Staff members have regular opportunities for individual supervision.						
46. Supervisors are trained in trauma and trauma-informed care.						
47. Topics related to self-care are addressed in team meetings and supervision (e.g., vicarious trauma, burn-out, stress-reducing strategies).						
48. The organization has a process for helping staff members debrief after a crisis.						
49. The organization has a formal system for reviewing staff performance.						
50. The organization provides opportunities for on-going staff evaluation of the program.						

Table 4 (cont'd).

51. The organization provides opportunities for staff input into program practices.						
52. Outside consultants or staff members with expertise in trauma and trauma-informed care provide ongoing education and consultation.						
53. Outside consultants or staff members with expertise in cultural competence provide ongoing education and consultation.						
54. Outside consultants or staff members with expertise in working with displaced individuals and families provide ongoing education and consultation.						
Establishing a Safe Physical Environment	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
1. The organizational facility has a security system.						
2. Agency staff monitors who is coming in and out of the program.						
3. The environment outside the organizational facility is well lit.						
4. The common areas are well lit.						
5. Bathrooms are well lit.						
6. Bathroom doors can be locked.						
7. When applicable, there are private, locked spaces for belongings.						
8. The organizational facility is clean and well-maintained.						

Table 4 (cont'd).

9. The organizational facility is decorated with materials that reflect diversity.						
10. The organization provides consumers with opportunities to make suggestions about ways to improve/change the physical space.						
Information Sharing	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
11. The organization reviews rules, rights, and grievance procedures with consumers on a regular basis.						
12. Organizational information (e.g., policies, procedures, services, requirements) is available in the languages of the people served.						
13. Organizational information is easy to read (low literacy, pictures).						
14. Consumer rights are posted in places that are visible.						
15. Material is posted or available about traumatic stress (e.g., what it is, how it impacts people, trauma-specific resources).						
16. Material is posted or available about community resources for displaced families.						
17. Materials are posted in the languages of the people served.						
Privacy and Confidentiality	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A

Table 4 (cont'd).

18. The organization informs consumers about the extent and limits of privacy and confidentiality (e.g., the kinds of records that are kept, where they are kept, who has access to this information, when the program is obligated to report information to child welfare or police).						
19. Staff does not talk about consumers in common spaces.						
20. Staff does not discuss the personal issues of one consumer with another consumer.						
21. There are private spaces for staff and consumers to discuss personal issues.						
22. Consumers who have violated rules are approached in private.						
23. When applicable, the organization obtains permission from consumers prior to giving a tour of their space (e.g., person notified of date, time, and who will see the space).						
Open and Respectful Communication	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
24. The organization uses “people-first” language rather than labels (e.g., “People who are displaced” rather than “displaced people”).						
25. Staff uses motivational interviewing techniques with consumers (e.g., open-ended questions, affirmations, reflective listening).						

Table 4 (cont'd).

26. Consumers are allowed to speak their native language within the organization.						
27. When applicable, consumers are allowed to prepare or have ethnic-specific foods.						
28. The organization provides ongoing opportunities for consumers to share their cultures with each other (e.g., potlucks, culture nights, incorporate different types of art and music, etc.).						
29. Staff shows respect for personal religious or spiritual practices.						
30. Staff shows respect for culture-specific family roles and practices.						
31. Rules are enforced in respectful ways (e.g., expectations about room/ apartment checks are clearly written and verbalized and checks are done in a manner that ensures as much control as possible for the family).						
32. The organization is flexible with rules and regulations if needed, based on individual circumstances.						
33. Staff works in collaboration with families.						
Consistency and Predictability	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
34. The organization has regularly scheduled meetings with consumers.						

Table 4 (cont'd).

35. The organization provides advance notice of changes in the daily or weekly schedule.						
36. The organization has structures in place to support staff consistency with consumers across roles and shifts (e.g., trainings, staff meetings, shift change meetings, and peer supervision).						
Safety Planning and Crisis Prevention	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
37. Consumers work with staff to create written, individualized safety plans (a plan for what you and staff members will do if you feel threatened by another person outside of the agency).						
38. Written safety plans are incorporated into consumers' individual goals and plans.						
39. Every consumer in the organization has a written crisis-prevention plan (an individualized plan for how to help each consumer manage stress and feel supported).						
40. Crisis prevention plans include a list of triggers (e.g., situations that are stressful or overwhelming and remind the person of past traumatic experiences).						
41. Crisis prevention plans include a list of ways that the person shows that she is stressed or overwhelmed (e.g., types of behaviors, ways of responding, etc.).						

Table 4 (cont'd).

42. Crisis prevention plans include specific strategies and responses that are helpful when the person is feeling upset or overwhelmed.						
43. Crisis prevention plans include specific strategies and responses that are not helpful when the person is feeling upset or overwhelmed.						
44. Crisis prevention plans include a list of people with whom the person feels safe and can go to for support.						
Assessment Questions	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
Assessments include questions about the following:						
1. Primary language.						
2. Language(s) spoken in the household.						
3. Cultural background.						
4. Country of origin.						
5. Cultural Strengths (e.g., world view, role of spirituality, cultural connections).						
6. Personal strengths.						
7. Years of education completed.						
8. Immigration and documentation status.						
9. If displaced, reasons for displacement.						
10. Quality of relationships between family members (e.g., caregiver and child).						
11. Degree of extended family support.						

Table 4 (cont'd).

12. Family management and discipline practices.						
13. Degree of connection to the community and similar cultural groups.						
14. Perceived level of safety in the community/neighborhood.						
15. Current level of threats to safety from other people (e.g. political, domestic violence, stalking, restraining orders).						
16. History of trauma (e.g., witnessing violence; physical, emotional or sexual abuse; neglect; loss; intimate partner violence; community violence; past homelessness; torture).						
17. Trauma experienced during the migration process.						
18. Acculturative stress (e.g., isolation, language barriers, challenges adjusting to new environment).						
19. Acculturation differences within the family (e.g., how different family members within the same household adjust).						
20. Post-traumatic stress symptoms (e.g., nightmares, flashbacks, preoccupation with telling story of a traumatic event, avoiding situations that remind someone of a traumatic experience).						
21. Health history.						
22. Any head injuries.						
23. Other previous injuries (cuts, broken bones, broken jaws, torture).						

Table 4 (cont'd).

24. History of substance use/abuse.						
25. History of mental health issues.						
26. Suicidal thoughts and behaviors.						
27. Housing history.						
28. Current access to services/ community resources.						
29. Relationship with child's school when applicable.						
30. Degree of cultural and linguistic barriers to accessing services and supports.						
31. Experiences of discrimination.						
Assessment Process	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
32. There are private, confidential spaces available to conduct assessments.						
33. Assessments are conducted for each family member.						
34. Consumers have the option of doing the assessment individually or with other family members.						
35. Consumers are informed of the limits of confidentiality in ways that they will understand.						
36. Assessments are conducted in the primary language spoken by the consumer.						

Table 4 (cont'd).

37. The organization provides an adult translator or cultural broker for the process.						
38. Staff acknowledges cultural differences and expresses willingness to learn.						
39. Staff considers culture-specific communication styles when conducting the assessment (e.g., eye contact, touch, body language).						
40. Staff explains why particular questions are asked and what is done with the information using culturally-relevant terms and tools for those with limited English proficiency.						
41. When possible, assessment questions are open-ended vs. yes/no answers (e.g., How do you feel? vs. Do you feel x?).						
42. Assessment questions are strengths- based vs. deficit-based (what you have done, how you have cared for yourself and your family, what you have experienced vs. what is wrong with you, what you haven't done).						
43. Assessment questions are broken down into specific behaviors and responses (e.g., How have you been sleeping? vs. Are you depressed?).						
44. Assessment questions are designed to capture cultural differences in how people respond (e.g., when talking about mental health, using words that make sense in a particular culture that might not refer to a set of symptoms as "depression").						

Table 4 (cont'd).

45. Staff is aware of culture-specific topics that may be taboo (e.g., mental health, sexuality, abuse, violence).						
46. Throughout the assessment process, staff checks in with consumers about how they are doing (e.g., asking if they would like a break, a glass of water, etc.).						
47. Consumers are given the option of writing down responses to assessment questions when preferred.						
48. Releases and consent forms are updated whenever it is necessary to speak with a new provider.						
49. The assessment is updated on an on-going basis.						
Developing Goals and Plans	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
50. Staff collaborates with participants to co-create goals.						
51. Consumer goals are reviewed and updated regularly.						
52. The organization helps families identify resources in their community.						
53. Staff offers program participants with step-by-step support as they begin to access community-based services.						
Emotional Support	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A

Table 4 (cont'd).

54. The organization educates consumers about traumatic stress and its impact.						
55. The organization provides or refers consumers to agencies that provide trauma-specific mental health services (i.e., mental health interventions that are designed to address trauma-related reactions).						
56. The organization has or refers consumers to agencies that have expertise in providing mental health services to displaced families.						
57. The organization provides or refers participants to agencies that provide substance abuse treatment.						
58. The organization consults with spiritual healers when necessary.						
59. The organization integrates culture- specific practices and terminology into service delivery.						
60. The organization provides opportunities for consumers to express themselves in creative and nonverbal ways (e.g., art, dance, movement, music).						
61. The organization supports a variety of peer-to-peer activities for consumers.						
62. The organization provides opportunities for former consumers to mentor new program consumers.						

Table 4 (cont'd).

63. The program coordinates on-going communication between mental health and substance abuse providers.						
64. The program coordinates on-going communication between early intervention and mental health service providers.						
Instrumental Supports	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
65. The organization offers child care support/alternatives for people while they participate in services.						
66. The organization has connections with agencies that provide a variety of services including housing, legal and educational advocacy, ESL, job training and placement programs, immigration services, and health services.						
67. The organization considers child care and transportation issues when referring families for additional services.						
68. The organization educates community-based providers about trauma and its impact.						
69. The organization educates community-based service providers (mental health, homelessness, law enforcement, employers, schools, etc.) about the unique experiences and needs of displaced families.						

Table 4 (cont'd).

70. The organization educates community-based providers (church, housing, schools) about how to access resources to help displaced families cope with trauma, loss, and separation.						
Creating Written Policies	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
1. Policies are established based on an understanding of the impact of trauma on the people being served.						
2. Policies are accompanied by explanations of why they are needed.						
3. Policies are strengths-based (e.g., what you can do vs. what you can't).						
4. Policies are available in multiple forms (e.g., written, verbal, pictures).						
5. Policies include a written commitment to provide trauma- informed care.						
6. Policies include a written commitment to provide culturally competent care (e.g., staff training, hiring bilingual/bicultural staff, organizational practices that respect cultural differences).						
7. Policies include a written commitment to hire former consumers with similar experiences to those who are currently served by the organization.						

Table 4 (cont'd).

8. Policies include a commitment to responding effectively to the literacy needs of the people served.						
9. The organization has written policies outlining program responses to consumer crises (e.g., self-harm, suicidal thinking, aggression towards others, violation of restraining orders).						
10. The organization has written policies outlining professional conduct for staff (e.g., boundaries, responses to consumers, etc.).						
Reviewing Policies	Strongly Disagree	Disagree	Agree	Strongly Agree	Do Not Know	N/A
11. The organization involves current consumers in its review of policies.						
12. The organization involves staff at all levels in its review of policies.						
13. The organization reviews its policies on a regular basis to identify whether they are sensitive to the needs of trauma survivors.						

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