

# Recognize: How Trauma Responses Can Show Up in the Workplace

## Fight – Flight – Freeze – Fawn

*Trauma is a common and life-altering event that can have short and long-term effects on an employee's physical and mental health. Given the prevalence of trauma, it is imperative for employers and workers to understand trauma responses and how they may show up in the workplace. This resource provides an overview of trauma responses, how they can show up in the workplace, and what supervisors, coworkers, and employers can do to address these responses.*

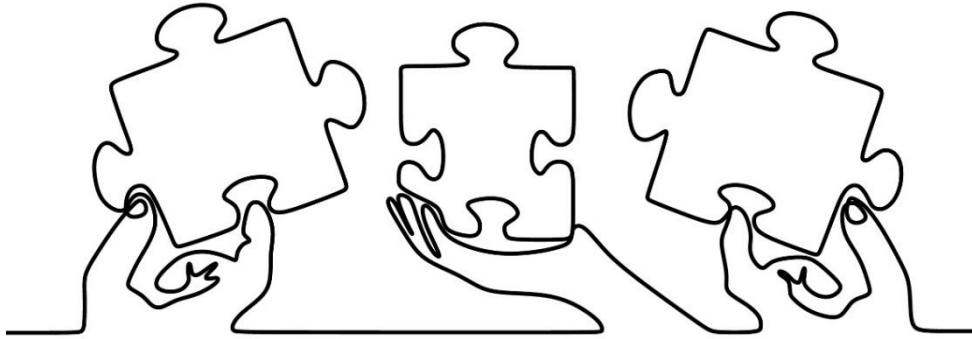


Traumatic events can occur at work, within individuals' lives, and within the world. The impacts of trauma often continue to shape one's life and relationship to their surroundings long after the event has ended. As a result, day to day activities and interactions may trigger a trauma response if the circumstances are reminiscent of the traumatic event. Someone who is triggered may lash out, disconnect, become unable to act, or seek to placate

bad situations that can impact employee performance, strain relationships, lead to turnover, and diminish morale.

Recognizing trauma responses can help coworkers, supervisors, and employers better understand and reframe behaviors with a trauma-informed lens, shifting from asking, "What's wrong with you?" to "What *happened* to you?" Through a heightened understanding of how trauma responses can show up in the workplace, employers and colleagues can

work to better support employees, address conflicts and issues through a trauma-sensitive lens, and further create an organizational culture of inclusion.



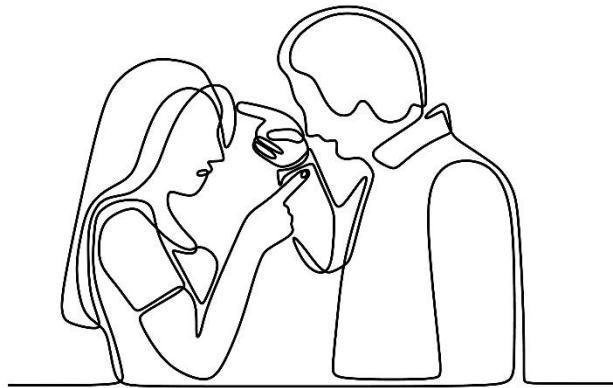
### **What is trauma and why should workplaces consider adopting a trauma-informed approach?**

Trauma is defined as “an event, series of events, or set of circumstances experienced by an individual as physically or emotionally harmful or life-threatening with lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.”<sup>i</sup> According to one study, nearly 90 percent of U.S. adults had been exposed to at least one traumatic event in their lifetime, the vast majority of which are related to intimate partner and sexual violence.<sup>ii</sup> The adverse physical, emotional, and cognitive impact of trauma can cause otherwise model employees to have increased absenteeism, an inability to concentrate, and overall decline in job performance. Unaddressed trauma can have ripple effects throughout the workplace. Absenteeism can lead to missed deadlines and imbalanced workloads while inability to concentrate and declining job performance can place a strain on colleagues and teams who work together and rely on each other to successfully do their jobs. When employees are seen as whole people supported to show up fully in the workplace, the entire workforce benefits. A trauma-informed workplace benefits all employees, especially those who have experienced violence, and further, encourages a healthier, more productive workplace.

### **What are trauma responses?**

Trauma responses are the emotional and physical symptoms that may arise immediately or over time in response to a traumatic event. Traumatic

events can be experienced individually, collectively, and historically over periods of time. It is important to note that trauma responses are normal responses to an abnormal situation and every individual experiences trauma differently. There is no “right” or “wrong” way to respond to trauma or abuse and often these responses are experienced automatically as a survival response.



## **1. Fight Response**

When experiencing a fight response to a traumatic incident or trigger, someone may become aggressive, irritable, and confrontational.

Fight responses in the workplace can include insults, passive aggressive behaviors, hypervigilance (experiencing a heightened awareness of one's surroundings), paranoia, gossiping, name-calling, and disruptive behaviors like interrupting meetings.

### **How to address fight response:**

- Focus on empathy and hearing the person first. Try to identify what is upsetting to the person and reflect this back to them (i.e., “I’m hearing that you are upset because a coworker corrected a mistake you made during an important meeting. Is that right?”)
- Set clear boundaries on appropriate behavior without blame or shaming (i.e., “It is absolutely okay to feel upset and frustrated. What is not okay at the workplace is name-calling.”)
- Offer support, options, and a way to let the person experiencing fight response feel that they are safe and have control over the next steps in the situation (i.e., “What would be helpful right now for you? Would you like to take some space to be alone first?”)

## 2. Flight Response

Flight responses occur when an individual feels a need to flee emotionally or physically from a situation or trigger.

Flight responses include walking or running away from a situation, abruptly leaving the room or meeting, procrastination (avoiding the trigger or situation), overworking, keeping constantly busy, perfectionism, numbing behaviors (substance abuse, overuse of social media) or deflecting during conversation through humor or redirection.

### How to address flight response:

- Take time to check-in with the person one-on-one and name the behaviors you are witnessing (i.e., “I wanted to check in with you about the deadline you missed for our project.”)
- Reinforce care for the employee and open space for the employee to provide context to the behavior (i.e., “I know you work hard and we value you on our team. Can you help me understand what else might be going on that may be contributing to this delay?”)
- Offer support based on the employee’s response (i.e., “Is there anything I can take off your plate? How can I support you?”) For some, it will be helpful to have a safe place to share that they might be struggling, and for others, a tangible action—such as suggesting a system for the employee’s emails to help with organization — will feel more supportive.

## 3. Freeze Response

The freeze response occurs when a person experiences immobility or dissociation when they are not able to respond to the traumatic incident or trigger.

Freeze responses include: dissociation or a sense that someone is spacing out or not present, inability to move, long periods of silence, excessive intellectualization, having difficulty



making decisions, and responding in a way that is not appropriate to the situation.

### **How to address freeze response:**

- Check-in with the person in private and name the behavior you witnessed with empathy and compassion (i.e., “How are you doing? I noticed at one point you stopped sharing during our staff meeting. I wanted to make sure we were hearing your voice in the meeting.”)
- Work together toward a supportive follow-up action. Think together with the employee about what would be helpful in the future to create a space where the person feels more comfortable showing up (i.e., “What if we restructured our meetings so that people raise their hands first before sharing? How does that sound to you?”)

## **4. Fawn/Accommodate Response**

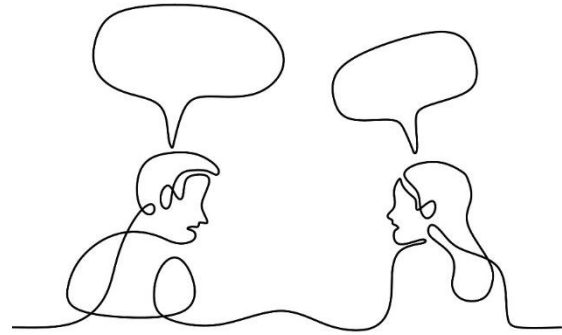
Fawning, or appeasing, occurs when a person accommodates violence or a traumatic incident or environment as a way to minimize the possibility of further violence and trauma.

Fawn/Accommodate responses include befriending or working to become closer to workers or managers who have caused harm; appearing to “go along” with harassment or violence to avoid further violence or targeting; volunteering for extra projects or committees without regard for one’s health or work capacity; ignoring one’s own needs, thoughts, and beliefs for the benefit of others or the organization; and feeling uncomfortable or threatened when asked to give an opinion or advocate for themselves.

### **How to address fawn/accommodate response:**

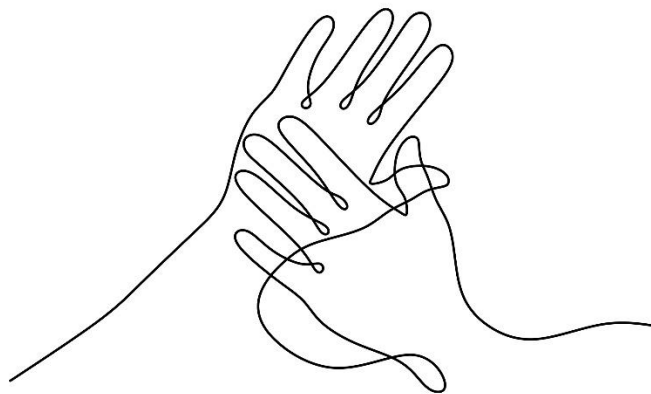
- Work to continuously give the worker choices. Remind workers what is and is not mandatory and how taking part in activities will not affect their performance review in the organization.
- Check-in and offer alternatives if you feel that a worker is being overly accommodating (i.e., “I know you mentioned you had a migraine yesterday. How would you feel about us moving our check-in to Friday so you can have more time to recover?”)

- Encourage employees to practice boundaries and self-care. Supervisors should model setting boundaries and taking time off so that self-care is normalized.



## Creating a Culture of Care

Trauma can result in mental health impacts on an employee and have significant consequences on their wellbeing and that of the workplace. Unaddressed trauma responses can result in distracted workers, lost work time, productivity losses, and team conflicts. While we cannot always know if someone is experiencing a trauma response, we can become more aware of how both trauma impacts employees in the workplace, and how trauma responses can show up in the workplace. A trauma-informed workplace can promote greater levels of engagement, productivity, and a positive and supportive workplace culture. Through this heightened awareness, sensitivity, and effort we can work to cultivate a culture of care in our organizations, where all employees are supported and can thrive. Through this heightened awareness, sensitivity, and effort we can work to cultivate a culture of care in our organizations, where all employees are supported and can thrive.



## Additional Resources:

- [Why is DVSASSH a Workplace Issue?](#)
- [Understanding Fight, Flight, Freeze, and the Fawn Response](#)

- [Neurobiology of Trauma](#)
- [Understanding the Impact of Trauma](#)
- [Fight, Flight, Freeze: What This Response Means](#)

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Workplaces Respond provides technical assistance to workplace stakeholders seeking to better prevent and respond to domestic violence, sexual assault, stalking, and harassment impacting the workplace. Scan this QR code to access the Resource Center.



This project is supported by Grant No. 15JOVW-22-GK-04852-NRCW awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed herein or in any materials herein, are those of the authors and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women.

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<sup>i</sup> Substance Abuse and Mental Health Services Administration. SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014..

<sup>ii</sup> Kilpatrick, Dean G, Heidi S Resnick, Melissa E Milanak, Mark W Miller, Katherine M Keyes, and Matthew J Friedman. "National Estimates of Exposure to Traumatic Events and PTSD Prevalence Using DSM-IV and DSM-5 Criteria." *Journal of Traumatic Stress* 26, no. 5 (October 2013): 537–47.