The Resilience in School Environments (RISE) Initiative empowers schools to create safe and supportive learning environments by developing policies and practices that improve the social-emotional health of all students and staff.
INTRODUCTION

The RISE Index: District Edition supports the well-being of district-level staff and enables districts to focus their efforts on supporting school-level social-emotional health policies and practices, in collaboration with other key stakeholders. Specifically, the RISE Index helps districts achieve the following goals:

**INCREASE JOB SATISFACTION AMONG TEACHERS AND STAFF**

An educator’s overall feelings of fulfillment as it relates to his or her job and is encompassing of stress management, maintaining positive relationships, increased self-efficacy and finding purpose within the work.

**IMPROVE CONNECTEDNESS, ENGAGEMENT AND RELATIONSHIPS WITHIN THE SCHOOL COMMUNITY**

The interrelationships between all members of the school community, inclusive of staff, students and families.

**INCREASE SKILLS RELATED TO SOCIAL AND EMOTIONAL LEARNING**

Explicit skills related to self-awareness, self-management, decision-making, social awareness and relationship skills.

**INCREASE MENTAL HEALTH SUPPORTS**

Policies, practices and procedures that increase the availability, efficiency and effectiveness of mental health supports for students or staff.
**Areas of the RISE Index: District Edition**

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<th>AREA</th>
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**Instructions**

Staff are encouraged to read the assessment first, then come together with their team to discuss answers. Teams can complete the assessment, track progress, prioritize items to work on throughout the school year, and access helpful resources in the Healthier Generation Action Center: [HealthierGeneration.org/ActionCenter](http://HealthierGeneration.org/ActionCenter)
Acknowledgements

The Alliance for a Healthier Generation wishes to acknowledge the invaluable contributions of the Resilience in School Environments (RISE) Index Advisors. Their expertise, time, and important input to the creation of the RISE Index resulted in the collaborative creation of a comprehensive assessment that is inclusive of diverse backgrounds, voices, and perspectives.

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District-Staff Well-Being: * denotes glossary term
Questions pertaining to the well-being of staff employed at the district level.

DWB-1
To what extent does district-level staff receive professional learning opportunities on the prevalence of trauma and methods for mitigating its impact?

3 Fully in place: District-level staff receives continuous professional learning* opportunities, including training and coaching, on the prevalence of trauma and methods for mitigating its impact.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not provide professional learning on this topic to district-level staff.

DWB-2
To what extent does your district have a clearly defined approach to positively resolve conflicts among district-level staff?

3 Fully in place: Our district has a clearly defined protocol to positively resolve conflicts that is co-created by staff and includes agreed upon norms, open communication, and alternative dispute resolutions options (e.g., mediation, facilitated conversation).
2 Partially in place
1 Mostly in place
0 Not in place: Our district has not established a clearly defined approach to positively resolve conflicts among district-level staff.

DWB-3
To what extent does your district office(s) have space(s) for staff to relax, decompress, and/or build relationships with other staff?

3 Fully in place: Our district office(s) has easily accessible space(s) that encourages relaxation and positive staff interactions
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not have any spaces for staff to engage in such activities.

DWB-4
To what extent does your district provide opportunities for district-level staff to recognize accomplishments and display gratitude toward each other?

3 Fully in place: District-level staff recognizes accomplishments and/or display gratitude toward each other at least monthly.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not provide opportunities for district-level staff to recognize accomplishments or display gratitude toward each other.
DWB-5

To what extent does your district-level staff engage in opportunities to build and maintain relationships with each other (e.g., activities during staff meetings, potlucks, staff outings, etc.)?

3 Fully in place: District-level staff engages in relationship-building activities with each other at least quarterly.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not provide opportunities for district-level staff to build and maintain relationships with each other.

DWB-6

To what extent does district-level staff receive professional learning opportunities on planning, implementing and reflecting on their own well-being?

3 Fully in place: District-level staff receives continuous professional learning* opportunities, including training and coaching, on planning, implementing and reflecting on their own well-being.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not provide professional learning on this topic.

DWB-7

To what extent does district-level staff receive professional learning on combating the impacts of compassion fatigue and burnout?

3 Fully in place: District-level staff receives continuous professional learning* opportunities, including training and coaching, on combating the impacts of compassion fatigue and burnout.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not provide professional learning on these topics.
District Leadership Team: * denotes glossary term

Questions pertaining to roles and responsibilities of the district leadership team* in implementing social-emotional health policies and practices* across the district.

DLT-1

To what extent does your district have a leadership team* that coordinates the implementation of district-wide social-emotional health policies and practices* (i.e., social and emotional learning*, trauma-informed approaches*, student-centered discipline*, and staff well-being)?

3 Fully in place: Our district has a representative leadership team* that meets at least monthly to coordinate the implementation of district-wide social-emotional health policies and practices*.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not have a leadership team* that focuses on social-emotional health policies and practices*.

DLT-2

To what extent does your district leadership team* use a continuous improvement* process to coordinate the implementation of district-wide social-emotional health policies and practices* (i.e., social and emotional learning*, trauma-informed approaches*, student-centered discipline*, and staff well-being)?

3 Fully in place: Our district leadership team* uses a clearly defined continuous improvement* process to coordinate the implementation of district-wide social-emotional health policies and practices*.
2 Mostly in place
1 Partially in place
0 Not in place: Our district leadership team* does not use a continuous improvement* process.

DLT-3

To what extent does your district leadership team* track schools’ use of a continuous improvement* process for coordinating their social-emotional health policies and practices* (i.e., social and emotional learning*, trauma-informed approaches*, student-centered discipline*, and staff well-being)?

3 Fully in place: Our district leadership team* uses a clearly defined process to track, encourage, and support schools’ utilization of a continuous improvement* process to coordinate their social-emotional health policies and practices.*
2 Mostly in place
1 Partially in place
0 Not in place: Our district leadership team* does not track schools’ coordination of social-emotional health policies and practices*
To what extent does your district leadership team* use a trauma-informed lens* to implement district-wide social-emotional health policies and practices* (i.e., social and emotional learning*, trauma-informed approaches*, student-centered discipline*, and staff well-being)?

3 Fully in place: Our district leadership team* implements district-wide social-emotional health policies and practices* in a way that incorporates each of the six guiding principles to a trauma-informed approach* (i.e., safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment and choice; and cultural, historical and gender issues).
2 Mostly in place
1 Partially in place
0 Not in place: Our district leadership team* does not utilize a trauma-informed lens* to implement policies social-emotional health policies and practices*.

To what extent does your district leadership team* collect and analyze data on well-being and job satisfaction of staff across the district?

3 Fully in place: Our district leadership team* uses a continuous improvement* process to assess and improve staff well-being and job satisfaction at least annually.
2 Mostly in place
1 Partially in place
0 Not in place: Our district leadership team* does not collect data on staff well-being or job satisfaction.

To what extent does your district leadership team* ensure qualified staff are available to provide social-emotional behavioral interventions* at each school?

3 Fully in place: Our district leadership team* utilizes a continuous improvement* process to ensure each school has access to qualified staff to provide social-emotional behavioral interventions*.
2 Mostly in place
1 Partially in place
0 Not in place: There are no qualified staff available to provide social-emotional behavioral interventions* at any school.
District-Wide Policies & Procedures:  * denotes glossary term

Questions pertaining to policies and practices at the district level that support school-level social-emotional health policies and practices*.

**DWP-1**

To what extent does your district offer free or subsidized school employee wellness programs (e.g., physical activity, healthy eating, financial literacy, tobacco cessation)?

3  Fully in place: Our district communicates to district and school employees about the services offered in the district wellness programs at least quarterly. Not in place: Our district does not offer any of these programs.
2  Mostly in place
1  Partially in place
0  Not in place: Our district does not offer any of these programs.

**DWP-2**

To what extent does your district offer an Employee Assistance Program (EAP) that offers resources, referrals and counseling?

3  Fully in place: Our district communicates to district and school employees about the services offered in the district EAP at least quarterly.
2  Mostly in place
1  Partially in place
0  Not in place: Our district does not offer an EAP.

**DWP-3**

To what extent does your district have policies and procedures related to work-life-balance?

3  Fully in place: Our district communicates policies and procedures related to work-life balance at least twice a year to district- and school-level staff.
2  Mostly in place
1  Partially in place
0  Not in place: Our district has not established expectations related to work-life balance.

**DWP-4**

To what extent does your district have policies and procedures that address suicide prevention?

3  Fully in place: Our district has policies and procedures in place that address prevention, assessment, intervention and response to suicide.
2  Mostly in place
1  Partially in place
0  Not in place: Our district has no such policy or procedure in place.
**DWP-5**

To what extent does your district provide support to staff who submit Medicaid reimbursement for eligible services?

3 Fully in place: Our district utilizes a clearly defined process that includes designated work time for staff to submit Medicaid reimbursement.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not designate time during the workday for this purpose.

**DWP-6**

To what extent does your district ensure that professional learning opportunities on social-emotional health policies and practices* (i.e., social and emotional learning*, trauma-informed approaches*, student-centered discipline*, and staff well-being) are available to district- and school-level staff?

3 Fully in place: Our district allocates adequate resources to ensure staff receive continuous professional learning* opportunities, including training and coaching.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not provide professional learning opportunities on social-emotional health policies and practices*.

**DWP-7**

To what extent does your district ensure that school-level staff can take breaks when feeling overwhelmed at work?

3 Fully in place: Our district allocates adequate resources and communicates policies and procedures related to school-staff’s ability to take breaks when feeling overwhelmed at work.
2 Mostly in place
1 Partially in place
0 Not in place: Our district has not established expectations related to school-staff’s ability to take breaks when feeling overwhelmed at work.

**DWP-8**

To what extent does your district have policies and procedures that addresses issues of school safety?

3 Fully in place: Our district has policies and procedures that address issues of school safety including bullying as well as crisis prevention and response.
2 Mostly in place
1 Partially in place
0 Not in place: Our district has no such policy or procedure in place.
To what extent does your district have policies and procedures on student-centered discipline?

3  Fully in place: Our district has policies and procedures on student-centered discipline that use the principles of reflection, restoration and instruction.
2  Mostly in place
1  Partially in place
0  Not in place: Our district has no such policy or procedure in place.
District-Level Collaboration: * denotes glossary term
Questions pertaining to the development of relationships among district staff, school leadership, parents and the community.

**DLC-1**

To what extent do district- and school-level staff have opportunities to provide input on district-level social-emotional health policies and practices* (i.e., social and emotional learning*, trauma-informed approaches*, student-centered discipline*, and staff well-being)?

3  Fully in place: District- and school-level staff (including non-instructional staff*) have opportunities to provide input on district social-emotional health policies and practices* at least annually.
2  Mostly in place
1  Partially in place
0  Not in place: Our district does not offer opportunities for staff to provide input on district social-emotional health policies and practices*.

**DLC-2**

To what extent do students have developmentally appropriate opportunities to provide input on district policies and practices related to social and emotional learning* and student-centered discipline*?

3  Fully in place: Students have opportunities to provide input on district policies and practices related to social and emotional learning* and student-centered discipline* at least once annually.
2  Mostly in place
1  Partially in place
0  Not in place: Our district does not provide such opportunities to students.

**DLC-3**

To what extent do caregivers have opportunities to provide feedback on district policies and practices related to social and emotional learning* and student-centered discipline*?

3  Fully in place: Caregivers have opportunities to provide feedback on district policies and practices related to social and emotional learning* and student-centered discipline* at least once annually.
2  Mostly in place
1  Partially in place
0  Not in place: Our district does not provide such opportunities to caregivers.
DLC-4

To what extent does your Board of Education have opportunities to provide feedback on district-level social-emotional health policies and practices* (i.e., social and emotional learning*, trauma-informed approaches*, student-centered discipline*, and staff well-being)?

3 Fully in place: Our district collaborates with the Board of Education on district-level social-emotional health policies and practices* and features school successes at least quarterly.
2 Mostly in place
1 Partially in place
0 Not in place: Our district and Board of Education do not address these policies and practices.

DLC-5

To what extent does your district partner with community organizations (e.g., community mental health providers, law enforcement, youth development organizations, etc.) to support district-level social-emotional health policies and practices* (i.e., social and emotional learning*, trauma-informed approaches*, student-centered discipline*, and staff well-being)?

3 Fully in place: Our district collaboration with community organizations includes shared objectives, regular communication and sustainability planning.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not collaborate with community organizations.

DLC-6

To what extent does your district have a process in place to collaborate with staff and/or local bargaining unit to achieve and sustain wages, benefits and working conditions that support staff job satisfaction?

3 Fully in place: Our district collaboration with staff or local bargaining unit includes shared objectives, regular communication and a mechanism to ensure staff-buy in.
2 Mostly in place
1 Partially in place
0 Not in place: Our district does not have a process for collaborating with local bargaining agent(s).
### GLOSSARY
This is the glossary of terms for the RISE Index: District Edition.

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<th>Term</th>
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<tr>
<td>active supervision</td>
<td>An approach used in schools to proactively monitor large, often unstructured areas, to ensure safety, promote connection, and reduce problem behaviors.</td>
<td>Brackett, S. (2010). <em>Active Supervision: Study Guide</em> Retrieved April 5, 2019 from <a href="https://www.sbbh.pitt.edu/files/Pow">https://www.sbbh.pitt.edu/files/Pow</a>...</td>
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<td>alignment</td>
<td>The process of a) Examining current practices across all areas (instruction, support, improvement, special education, mental health, academics); b) Determining the extent to which these practices are implemented with fidelity and produce desired outcomes; c) Analyzing the information to determine which programs should be stopped, started or continued.</td>
<td>National Technical Assistance Center on Positive Behavior Interventions and Support. (2017). Technical guide for alignment of initiatives, programs, practices in school districts. Eugene</td>
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<td>continuous professional learning</td>
<td>Refers to the continuous process of learning inclusive of traditional professional development, coaching and feedback with the goal of increasing implementation of</td>
<td>Learning Forward. (n.d.). Standards for Professional Learning. Retrieved April 11, 2019, from <a href="https://learningforward.org">https://learningforward.org</a></td>
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<td>Term</td>
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<td>implementation within the context of a learning community.</td>
<td>/standards-for-professional-learning</td>
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<td>cultural responsiveness</td>
<td>According to the Wisconsin Department of Public Instruction, culturally responsiveness is “the degree to which a school’s programs, practices, procedures, and policies account for and adapt to the broad diversity of students’ race, language, and culture”</td>
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<tr>
<td>diversity</td>
<td>According to the University of Houston, diversity is “psychological, physical, and social differences that occur among any and all individuals; A diverse group, community, or organization is one in which a variety of social and cultural characteristics exist.”</td>
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<tr>
<td>equity</td>
<td>According to the University of Houston equity is “the guarantee of fair treatment, access, opportunity, and advancement for all students, faculty, and staff, while at the same time striving to identify and eliminate barriers that have prevented the full participation of some groups.”</td>
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| evidence-based | The RISE Index uses “evidence-based” to refer to any of the four Tiers described in Every Student Succeeds Act (ESSA):  
Tier 1 - Strong Evidence: supported by one or more well-designed and well-implemented randomized control experimental study.  
Tier 2 - Moderate Evidence: supported by one or more well-designed and well-implemented quasi-experimental study.  
Tier 3 - Promising Evidence: supported by one or more well-designed and well-implemented correlational study.  
Tier 4 - Demonstrates a Rationale: practices that have a well-defined logic model or theory of action, are supported by research. |
| inclusion | According to the University of Houston inclusion is “the act of creating involvement, environments and empowerment in which any individual or group can be and feel welcomed, respected, supported, and valued to fully participate” |
| leadership team | A team that leads the implementation of school-wide practices and policies. A leadership team should consistent of administration, teacher-leaders and other |

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<td>multi-gated approach</td>
<td>According to the Wisconsin Department of Public Instruction, multi-gated approach is process where “an educator, typically a classroom teacher, is provided professional development on identifying students with internalizing and/or externalizing behaviors. From that point, the educator ranks each student on a cluster of these characteristics. A small number of students are flagged (typically three to five students) are then passed through gate one and a formal screening measure is conducted.”</td>
<td>Wisconsin Department of Public Instruction (2018), Mental Health Screening Resource Guide. Retrieved May 29th, 2019 from <a href="https://dpi.wi.gov/sites/default/files/imce/sspw/pdf/mental_health_screening_guide_web.pdf">https://dpi.wi.gov/sites/default/files/imce/sspw/pdf/mental_health_screening_guide_web.pdf</a></td>
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<tr>
<td>non-instructional staff</td>
<td>Staff employed by school district that are not primary involved in direct curricular instruction.</td>
<td>US Department of Education. (n.d.). Definitions. Retrieved April 5, 2019, from <a href="https://www.ed.gov/race-top/district-competition/definitions">https://www.ed.gov/race-top/district-competition/definitions</a></td>
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<tr>
<td>qualified staff (aka specialized instructional support personnel)</td>
<td>According to the Every Student Succeeds Act, “(i) school counselors, school social workers, and school psychologists;” and “(ii) other qualified professional personnel, such as school nurses, speech language pathologists, and school librarians, involved in providing assessment, diagnosis, counseling, educational, therapeutic, and other necessary services...as part of a comprehensive program to meet student needs.”</td>
<td>National Alliance of Specialized Instructional Support Personnel. (n.d.). Federal Definitions. Retrieved April 5, 2019, from <a href="http://nasisp.org/services-resources/federal-definitions/">http://nasisp.org/services-resources/federal-definitions/</a></td>
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<tr>
<td>referral pathway</td>
<td>A referral pathway is the steps taken after a student has been identified as needing social-emotional or behavioral interventions.</td>
<td>Substance Abuse and Mental Health Services Administration (2015). School mental health referral pathways (SMHRP) toolkit. Retrieved from <a href="https://knowledge.samhsa.gov/resources/school-mental-health-referral-pathways-toolkit">https://knowledge.samhsa.gov/resources/school-mental-health-referral-pathways-toolkit</a></td>
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<td>resource mapping</td>
<td>“a method to link regional, community, and school resources with an agreed upon vision,</td>
<td>Positive Behavioral Interventions &amp; Supports</td>
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<td>Term</td>
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<td>self-regulate</td>
<td>Self-regulation is the ability to manage your emotions and behavior in accordance with the demands of the situation. It includes being able to resist highly emotional reactions to upsetting stimuli, to calm yourself down when you get upset, to adjust to a change in expectations and to handle frustration without an outburst.</td>
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<tr>
<td>social and emotional learning</td>
<td>“the process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.”</td>
<td>Collaborative for Academic, Social, and Emotional Learning. (n.d.). What is SEL? Retrieved April 5, 2019, from <a href="https://casel.org/what-is-sel/">https://casel.org/what-is-sel/</a></td>
</tr>
<tr>
<td>social-emotional and behavioral (SEB) interventions</td>
<td>School-based interventions designed to increase a student’s social and emotional learning skills or positive behavior.</td>
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<td>student-centered discipline</td>
<td>“student-centered classroom discipline policies contribute to a supportive environment and provide developmentally-appropriate opportunities for students to learn, problem-solve, and take ownership of their behavior”</td>
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| student-level behavioral crisis | According to the University of Texas, “a situation in which an individual’s usual style of coping is no longer effective, and the emotional or physiological response begins to escalate. As emotions intensify, coping becomes less effective, until the person may become disoriented, non-functional, or attempt harm.” | University of Texas at Austin Counseling and Mental Health Center (n.d.) How You Can Help Students in Distress: A Guide for Faculty and Staff. Retrieved May 29, 2019 from https://cmhc.utexas.edu/studentindistress.html |
| trauma-informed approaches | The Substance Abuse and Mental Health Services Administration utilizes six guiding principles for trauma-informed care:  
- Safety  
- Trustworthiness & transparency  
- Peer support  
- Collaboration  
- Empowerment, voice and choice  
| trauma-informed lens | The process of systemically applying the 6 guiding principles of a trauma-informed approach to school policies and practices. | |
| universal screening | Universal screening refers to the systemic assessment of all students within a school or grade-level on a particular social-emotional or behavioral concept(s) of importance to the school community. | Ikeda, M.J., Neesen, E., & Witt, J.C. (2009). Best Practices in Universal Screening. In A. Thomas & J.Grimes (Eds.), Best practices in school psychology V (pp.103-114). Bethesda, MD: National Association of School Psychologists. |
References


ProQOL.org. n.d. Professional Quality of Life Elements Theory and Measurement: Compassion Satisfaction and Compassion Fatigue, Burnout, Secondary Traumatic Stress, Vicarious Traumatization and Vicarious Transformation. Retrieved @ https://proqol.org/ March 8, 2019


