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Wounds and writing : building trauma-informed approaches to writing pedagogy.

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WOUNDS AND WRITING: BUILDING TRAUMA-INFORMED APPROACHES TO
WRITING PEDAGOGY

By

Michelle L. Day
B.A., Western Kentucky University, 2011
M.A., University of Louisville, 2014

A Dissertation
Submitted to the Faculty of the
College of Arts and Sciences of the University of Louisville
in Partial Fulfillment of the Requirements
for the Degree of

Doctor of Philosophy
in English/Rhetoric and Composition

Department of English
University of Louisville
Louisville, Kentucky

May 2019

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A Dissertation Approved on

April 16, 2019

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DEDICATION

To the Healer of all wounds, who is always with me in the Valley

And all those who courageously carry on through pain

* * *

won't you celebrate with me

what i have shaped into

a kind of life? [...]

come celebrate

with me that everyday

something has tried to kill me

and has failed.

—*Lucille Clifton*
(*Excerpt from “won’t you celebrate with me”*)

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To my Day, McCoy, Moyer, and Wiseman family—especially my father who taught me perseverance, my mother who taught me integrity, and my sister who taught me authenticity—for showing up for me, always ...

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ABSTRACT

WOUNDS AND WRITING: BUILDING A TRAUMA-INFORMED APPROACH TO WRITING PEDAGOGY

Michelle L. Day

May 10, 2019

This dissertation builds a trauma-informed approach to writing pedagogy informed by writing studies scholarship about trauma and inclusive pedagogy, clinical social work literature on trauma-informed care, and interviews with nine current University of Louisville writing faculty about their experiences academically supporting distressed students. I identify three central touchstones—“students are coddled,” “teacher’s aren’t therapists,” and “institutions don’t support trauma-informed teaching”—in scholarly and public debates regarding what to do about student trauma/distress in higher education. After exploring the valid concerns and misconceptions underpinning these touchstones, I illustrate how clinical research offers a way forward to help writing instructors develop more complex understandings of and responses to trauma’s impact on their classrooms. I conclude by describing six criteria that define Trauma-Informed Writing Pedagogy (TIWP), an approach to writing instruction that faculty and administrators can adapt to their own teaching styles and contexts. Appendix 2 describes TIWP in detail, offering suggestions, resources, and other materials. This instructional approach has important implications for fostering inclusive pedagogies and responding to mental health crises across college campuses.

TABLE OF CONTENTS

ACKNOWLEDGEMENTS	iv
ABSTRACT	vi
LIST OF FIGURES	viii
CHAPTER I: INTRODUCTION	1
CHAPTER II: “Students Are Coddled”	44
CHAPTER III: “Teacher’s Aren’t Therapists”	77
CHAPTER IV: “Institutions Don’t Support Trauma-Informed Teaching”	111
CHAPTER V: CONCLUSION	144
REFERENCES	177
APPENDIX 1	195
APPENDIX 2	198
CURRICULUM VITAE	245

LIST OF FIGURES

FIGURE	PAGE
1. SOCIAL-ECOLOGICAL MODEL DIAGRAM (SAMHSA)	135
2. SOCIAL-ECOLOGICAL MODEL DESCRIPTION (SAMSA)	136

CHAPTER I

INTRODUCTION

Since I began teaching in 2013, I've been surprised about how much personal distress my students have managed while taking my class. Parents have died before or during college after long battles with cancer. Friends have been killed in drunk driving accidents. Long-term romantic partnerships have ended dramatically, disrupting living arrangements and social support systems. Students have become temporarily homeless, gone to rehab while still trying to finish the semester, or contracted serious illnesses or injuries. They've been sexually assaulted or abused by a loved one. They've struggled through long custody battles with former partners and tried to write papers while their children were in the hospital. They've had PTSD from wartime duties; they've struggled with anxiety and depression, sometimes to the point of suicidal thoughts. As I worked with these students, it became clear how trauma and distress are common and central components of students' college experiences. These difficult stories also increased my felt sense that being generally empathetic toward students and their trauma was not good enough, if I wanted to be an effective teacher; as educators, we must teach the real people actually in front of us, and the more we understand about today's college students, the more we understand how trauma impacts their educational well-being.

Research confirms that my experiences with student trauma are unsurprising. For many reasons (a larger number of student veterans entering college, better mental health care

allowing patients to maintain more active lifestyles, etc.), there has been a surge in the number of college students who have experienced trauma (Pritchard et al; Valentino “Rethinking”). Several recent studies at major U.S. universities indicate that at least half and as many as 85% of college students have experienced one or more traumatic events (Vrana et al; Pritchard et al; Moser et al; Carello and Butler). In addition, college students face a high risk for certain types of trauma, such as sexual assault; about 28% of college women, 12.5% of college men, and 38% of gender nonconforming students experience sexual assault while enrolled at a university (Mellins et al). This trauma often becomes explicit in the classroom; a 2017 survey of all University of Louisville faculty indicates that more than half of respondents have multiple students disclose/reveal trauma to them each year, and nearly 69% receive at least one disclosure per year. UofL English department faculty reflect this trend, as 66% of those respondents reported at least one trauma disclosure each year. Additionally, college students experience high rates of other types of mental distress. Several reports show that college students today have higher rates of anxiety, depression, and overwhelming stress, and suicide is the leading cause of death for young people age 15-24, according to a 2009 study by Arria et al.

Composition pedagogy research reflects this statistical prevalence. How to handle student trauma and distress has been an ongoing discussion for the last 50 years, including a large body of current literature on this topic published since 2000 (Ames; Borrowman; deGravelles; Fienberg; MacCurdy; Payne; Valentino “Responding”; Valentino “Rethinking”; special issues of *Reflections* and the *Journal of Advanced Composition*). This work appears motivated by the questions haunting Wendy Bishop’s reflections about trauma and writing program administration:

When my current administrative office was turned over to me with its student-journal suicide file and the out-going director's listing of hot-lines and crisis support numbers, I felt then, as I feel today, that saying what we're not (not being therapists, not counselors, not specialists in affect or dysfunction) is not helping us to understand and prepare to be what we are. (512)

The sheer pervasiveness of trauma, its potential impacts on academic wellbeing, and its presence in writing studies research since the 1970s merits attention from writing instructors who want to be effective, ethical, informed educators. However, the field's current writing pedagogies that address trauma are dissatisfying because they are not comprehensive enough and rely almost exclusively on humanities-based perspectives on trauma (which center on representation and memory) and almost never draw from clinical perspectives from applied fields, such as social work, which work directly with trauma survivors and continually refine best practices for interacting with those survivors.

In response, this dissertation forwards a trauma-informed approach to writing pedagogy based on a review of clinical social work scholarship and interviews with current writing faculty at the University of Louisville, who have a wide range of experience and expertise in academically supporting students who are dealing with trauma or distress. I first explore the central concerns writing faculty have regarding student trauma and distress, as evidenced by writing studies literature and participant interviews, and identify three concern clusters shaping current understandings of academic support for traumatized students: "Students are coddled;" "Teachers aren't therapists;" and "Institutions don't support trauma-informed teaching." Acknowledging both the valid arguments behind these concerns and the assumptions/misunderstandings about student trauma they perpetuate, I demonstrate how

clinical literature offers a way forward through each barrier to deeper understanding of how student trauma does/should influence pedagogy. This examination culminates in the conclusion, where I articulate a pilot version of Trauma-Informed Writing Pedagogy (TIWP), a set of clinically-informed principles and practices that also cohere with writing studies scholarship and are flexible, able to be adapted a range of teaching philosophies and contexts. Though I acknowledge TIWP must be implemented, adapted, and refined over time, this pedagogical approach nevertheless can enable writing instructors across institutions to more ethically respond to trauma's impact on their students/classrooms.

In this introduction chapter, I first explore the history of trauma-related research in writing studies to demonstrate the gaps and introduce how neglected literature from social work and other applied fields can address these gaps; explain the primary methodology and methods used in this dissertation; and outline the chapters that follow.

Review of Literature

This dissertation builds on the long history of trauma as a concept and its uptake in writing studies. Writing studies has a relatively long history of attending to the impact of trauma on our work, especially with students and difficult literary texts. However, this literature often has a dissatisfying understanding of trauma, its impact on learning, and how instructors should respond to it in class. This literature most often invokes theoretical conceptions of trauma from trauma studies (a largely humanities-based discipline) and rarely, if ever, considers more applied, clinical perspectives from social work research. Yet such considerations are vital because trauma is not simply a common theoretical, representational, or even existential crisis, but a practical, embodied, and situated one highly dependent on

individual and contextual factors. In this section, I first overview the history of trauma as a concept before describing the ways in which writing studies has applied this term to our work, devoting particular attention to pedagogical scholarship regarding student trauma. This history demonstrates that, though the field has done important work that highlights the intersections of trauma, writing, and teaching, our privileging of humanities-based perspectives on trauma has limited our understanding of this issue in the classroom. I also explain ways clinical literature could address these gaps by contributing deeper, more complex understanding of trauma and resilience, their ecological nature, and their relationship to education. This grounding in both disciplinary histories and clinical perspectives provides an essential lens through which I interpret study participants' interviews and posit a situated pedagogy of trauma-informed care.

Trauma: A Historical Overview

Most historical accounts of trauma trace its origins back to Western European theorists in the mid- to late- 1800s, with John Erichsen's studies in the 1860s regarding how spine compression might cause distress in railway accident victims (Leys), or Jean-Martin Charcot's studies of female hysteria in the late 19th century (Herman). Charcot and his students—among whom Sigmund Freud and Pierre Janet are premiere—were responsible for forwarding notions of trauma as a psychological phenomenon rather than a physiological one. These early notions of psychological trauma still influence scholarship today, though many theorists, such as Judith Herman and other feminist-informed scholars, have offered salient critiques of especially Freud's conclusions, which are the foundation of psychoanalytic theory.

Freud and Janet, working at the same time, were among the first to posit female hysteria as “a condition caused by psychological trauma. Unbearable emotional reactions to traumatic events produced an altered state of consciousness, which in turn induced the hysteria symptoms” (Herman 12). Trauma at this time meant “the wounding of the mind brought about by sudden, unexpected, emotional shock” that shatters the personality, as epitomized by the hysterical female (Leys 3-6). Hysteria’s power, they suggested, stemmed from repression of painful memories, and treatment thus involved “recovering” those memories from the subconscious in an altered state guided by a therapist (“hypnosis”). In other words, Freud found that “hysterics suffered mainly from reminiscences” and healed only after putting those reminiscences into words (Herman 12). Earlier in his studies, Freud suggested that sexual exploitation was at the core of hysteria, but he later argued that such hysteria was related in large part to repressed infantile wishes and fantasies (the basis of much psychoanalytic theory), which modern feminist theorists like Herman have rejected as denying the significance of actual trauma on the individual psyche, though others found much explanatory power in psychoanalytic concepts, such as projection.

Though support for researching trauma has waxed and waned over the years, two historical moments in the 1900s solidified its validity as an area of inquiry and have shaped modern uses of the term: World War I and the era after the Vietnam War. During and after World War I, many soldiers experienced “shell shock,” or combat-related neuroses that appeared similar to the symptoms of “hysterical women.” Though some still accused shell-shocked soldiers of malingering or otherwise having defective moral character (including being “weak like women”), medical professionals re-ignited interest in discovering how even the best soldiers might be overcome by the terror of war and how recovering repressed

memories, among other treatments, might bring catharsis and allow them to return to military duty (Herman 21). But trauma did not gain sustained attention until the period after the Vietnam War, when soldiers' unprecedented exposure to and participation in war atrocities resulted in many returning home with severe post-traumatic stress disorder (Dass-Brailsford 4-5). At the same time psychiatrists, social workers, activists, and others were working to validate not just *veterans'* experiences, but also the experiences of other marginalized groups, such as women who had been sexually assaulted (Leys). Efforts by activist groups to demonstrate how trauma is an epidemic—rather than the narrow experience of a few weaker-minded groups of people—contributed to a turning point in trauma's history: the *Diagnostic and Statistical Manual-III* (begun in 1974 and published in 1980) included Post-Traumatic Stress Disorder for the first time. This meant that PTSD, and therefore trauma, became a more publicly-ratified, diagnosable condition with identifiable symptoms, impacts, and treatment options across the types of terror (e.g. war, rape, abuse, disaster) that might cause this condition.

Once trauma received validation in this way, more disciplines began to import the concept in their own fields, especially in humanities disciplines, where attention to issues of representation, narrative, and memory are central. In part, this turn was predictable, since Freud had long argued that trauma's force made it nearly incommunicable, and his work involved finding ways to help patients recover the painful memories and put them into words. This meant that, aside from the physical and psychological benefits to the patient, Freudian psychoanalysis raised important questions for scholars interested in the nature of representation itself—about its connection to memory, about the benefits and limitations of narrative for capturing experience, about the mind of the communicator, and so on. Further

cementing this interest from the 1990s on were two key developments: 1) pervasive projects in the early 1990s that sought to document the Holocaust through testimony, film, art, and other representational forms and 2) the development of Lacanian psychoanalysis, in which French psychiatrist Jacques Lacan infused Freudian psychoanalysis with attention to language and the Symbolic Order. Thus, for scholars in humanities disciplines (including writing studies, as discussed in the next section), trauma became linked to questions regarding the nature of language, representation, witnessing, and so on, raising questions about how psychological processes influence representational processes such as writing, and vice versa.

This humanities-based attention to trauma and representation manifested in the field of trauma studies, from which writing scholars draw heavily (as discussed in the next section). Theorists in trauma studies often describe trauma in apocalyptic language and focus on the problems it creates for memory and representation (Berger). For example, Cathy Caruth—one of the most pre-eminent scholars in trauma studies and a professor in English and comparative literature—explains in her seminal edited collection *Unclaimed Experience: Trauma, Narrative, and History* that trauma is “the response to an unexpected or overwhelming violent event or events that are not fully grasped as they occur, but return later in repeated flashbacks, nightmares, and other repetitive phenomena” (94). She thus defines trauma by “latency,” or forgetting; that is, trauma “is not assimilated or experienced fully at the time, but only belatedly, in its repeated possession of the one who experiences it. As she similarly argues in *Trauma: Explorations in Memory*, to be traumatized is precisely to be possessed by an image or event” (4-5), which means that trauma “registers the force of an experience that is not yet fully owned” and “denies our usual modes of access” to narratively

making meaning out of events (Caruth 151). Thus the representational problem caused by trauma is that it is inaccessible by normal modes of meaning making, a notion supported by other trauma studies theorists, such as Shoshana Felman, Dori Laub, and Judith Herman. Laub, for instance, defines trauma in similarly devastating terms by suggesting that traumatic memory possesses “a timelessness and a ubiquity that puts it outside the range of associatively linked experiences, outside the range of comprehension, of recounting and of mastery” (69). However, unlike Caruth who posits trauma as a perpetual forgetting, Laub sees trauma as an event with no closure that makes it a perpetual *presence*, because its story is unable to end (69). Regardless, these authors’ understandings of trauma align through their descriptions of trauma in apocalyptic language that emphasizes its devastation and incomprehensibility, as well as their orientation toward studying the representational problems caused by trauma (and how they might be alleviated through opportunities to “tell” empathetic witnesses about the experience).

The apocalyptic language and focus on representation perhaps speaks to trauma studies’ relationship to Holocaust studies, a branch of scholarship that explores issues as diverse as developing accurate historical records to examining the nature of individual memory/forgetting through testimony. Cathy Caruth, Dominick LaCapra, Shoshana Felman, and Dori Laub—four of the most oft-cited trauma studies scholars taken up by writing studies—treat the Holocaust as not just a trauma but *the* Trauma—an event so massive, so individually and globally devastating, so incomprehensible, that it functioned as a primary touch-point for theorizing the nature of and responses to all trauma. These scholars worked through notions of testimony, memory, and forgetting/silence, to name just a few concepts, in ways that built on but diverged from the patient-therapist perspectives common to older

psychoanalytic theories of trauma. For example, Felman and Laub's seminal book *Testimony: Crises of Witnessing in Literature, Psychoanalysis and History* explores this representational problem through the lens of testimony and witnessing. They define testimony as a "mode of *access to*" the "truth" of traumatic experience and as a necessary mechanism for healing from trauma and particularly Holocaust-related trauma, exploring these ideas in both public representations of the Holocaust and in *classroom* settings as well (3-5). They further assert that witnesses have a central role in trauma testimony, because they are "a party to the creation of knowledge" so that "the testimony to trauma thus includes its hearer" (57). While this might suggest that that healing from trauma requires *remembering*, or putting the experience into words, remembering creates another crisis: translating traumatic memories into coherent narratives "may lose both the presence and the force" of the memory, thus losing some "truth" of the event (153). They further made connections to the classroom quite explicit, theorizing the nature of representation and witnessing alongside their students.

These threads clearly bear significant correlations to issues important to writing studies, so it makes sense that writing studies explorations of trauma would favor humanities-style discussions more so than clinical ones. But the literature on trauma from more applied/clinical fields such as social work or psychology merits greater attention from writing studies, though the field has traditionally neglected anything more clinical than Freudian or Lacanian psychoanalysis. Clinical social work research on trauma particularly departs from such theoretical discussions about the nature of representation to explore applied perspectives—that is, how individuals diversely experience trauma and what kind of support most effectively fosters recovery and resilience. By conducting empirical research on work

with trauma survivors within a range social services (e.g. therapy, rehab, or shelters for domestic violence victims), clinical scholarship contributes to our understanding of not only trauma and healing but also specific practices that work best for working with survivors. In other words, rather than more abstract explorations about the *nature of trauma*, clinical work on trauma prioritizes effective practices for *responding to trauma* while working in settings in which trauma will likely be prevalent.

For example, in contrast to the more metaphorical and abstract definitions offered by humanities-based perspectives, clinical literature privileges concrete and grounded definitions designed to enable practitioners' understanding, encompass the diversity of individual traumatic experiences, and shape practice with survivors. The Substance Abuse and Mental Health Services Administration offers a widely-used definition of trauma as:

an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. (xix)

This definition includes more specific, and comprehensive language that uses concrete descriptions of what constitutes trauma and how it impacts people, while still leaving room for multiplicity in types and responses. Definitions like this one have emerged from *practitioners* working with survivors every day in a variety of contexts and are therefore designed to enable practitioners to serve survivors well. This and other clinical literature uses decades of empirical, validated research on trauma survivors to shape clinicians' and the public's understanding of how trauma impacts individuals and communities, as well as the

most ethical and effective practices for prevention and recovery (as will be discussed at length throughout this dissertation).

However, writing studies research seldom cites clinical literature on trauma, despite being practice-based, constantly refined and updated, and designed to enable anyone who works with trauma survivors to implement the principles across an organization. This privileging makes sense, given the trajectories regarding trauma and representation cited throughout this section that have clear correlations with writing studies perspectives and scholarly activities. However, though perspectives imported from trauma studies have fostered rich discussions (as discussed in the next section), we are in dire need of supplementing this work with clinical literature. I am not suggesting that scholars ignore humanities-based perspectives, because this scholarship works through connections between traumatic experiences as manifested in writing, and such discussions are still relevant to understanding student trauma in the writing classroom. Instead, I am suggesting that this work must be much more informed by clinical perspectives to develop deeper understandings of trauma and its pedagogical implications, particularly since the data shows that students who have experienced trauma make up the growing majority of our classrooms.

Trauma in Writing Studies

Writing studies scholars have engaged trauma in an impressively diverse range of composition pedagogy and rhetorical scholarship. Key threads in this history include efforts: to see students confront difficult and important social issues, like xenophobia or genocide (Ames; Marbach; Payne); to help students use writing to heal from distressing or traumatic circumstances (Harris; Bishop; MacCurdy; Bracher “Writing Cure”); to combat the silence

that often accompanies trauma (Cole; Kaufman; Thompson); to discuss and promote ethical representation and reception of others' trauma (Hesford); to help promote transformative learning through educational "crisis" moments (Bracher; Britzman and Pitt); and other purposes. Additionally, trauma has arisen incidentally, especially in discussions about writing's affective or personal dimensions. For instance, expressive pedagogies led to student-journal or personal narrative assignments that invited students to open up about personal experiences, which in turn elicited stories about trauma or other distress, sometimes even breaking silences on issues they had not discussed publicly before (Gere 204). Others have explored: cultural rhetorics or issues of race in class discussions (Cole; deGravelles); the role of emotion and affect in the constructing events (Ames); the violent nature of education and literacy education in particular (Stuckey; DeSalvo); encountering difference responsibly (Wallace; Rinaldi); working with specific populations of students with marginalized experiences (Stenberg; Valentino "Rethinking"); and more specific teaching strategies to use in difficult classroom contexts (Salibrici and Salter; Spear; Ames; Morgan). Such discussions often don't *start* with trauma, but while examining issues that arise in the classroom *end up* discussing trauma either cursorily or as a concept that has become central to the theory of teaching they propose. Regardless of purpose, this literature—especially work focused on pedagogy—frequently argues for the healing potential of writing for individuals and society in ways that function on an anemic understanding of trauma, as well as overemphasizing the place of a single writing classroom in promoting healing, which neglects ecological perspectives on trauma/resilience and practical considerations for ethically interacting with survivors. In this section, I highlight these limitations and demonstrate why clinical literature provides more complex, ecological, and practical

perspectives on trauma and healing that can address our field's current gap on trauma's impact on our teaching.

Especially after the 1990s, instructors explored what it would look like to engage the healing power of writing directly in their classrooms, motivated by a sense of ethical responsibility to students and acknowledgement of the psychological/emotional dimensions of education and writing. For instance, as early as 1994, JoAnn Campbell advocated for meditation in the writing process as a way to foster healing through writing in the classroom and help “blocked” or anxious writers to get unblocked. Acknowledging cautions that writing teachers aren't therapists, she nevertheless contends that instructors must “acknowledge that students are not only intellectual but also physical, emotional, and spiritual beings—and that these elements are as present in a classroom as the politics and power we now address” (250). In a similar vein, Jeffrey Berman advocates for “risky writing,” or opportunities for students to write about trauma—from rape to encountering racial prejudice to loss of a loved one—asking them to self-disclose stories that are typically shrouded in secrecy and shame. He proposes a few strategies to minimize risk of these disclosures—such as teaching the importance of empathy—so that students can work through such difficult experiences through writing (e.g. the “writing cure”). Others, such as Mark Bracher in *The Writing Cure*, have more fully embraced psychoanalytic perspectives (à la Freud and Lacan) on students-as-writing-subjects. Bracher discusses how writing teachers can help students explore their limiting “identity vulnerabilities” (feelings that key aspects of one's identity are being threatened by the Other) that impede writing and healthy functioning as individuals in society and lead them to commit literal and metaphoric violence. Wendy Bishop and Amy L. Hodges specifically advocate for letter writing assignments that help students heal because of their

conversational nature and because they recreate a sense of control that makes them safer spaces for the kind of private reflection that leads to healing. These discussions are explored more at length in Chapter 3, as well as critiques of these perspectives as anti-intellectual pseudo-therapy that takes unnecessary legal and emotional risks (Alton; Pfeiffer; Van Engen; Rosenblatt). But the threads listed above are a small glimpse into the significant work on writing pedagogy and trauma that has developed so far.

After the Sept. 11, 2001 terrorist attacks, these “writing-as-healing” discussions have extended into how writing can heal societies, often positing individual students as microcosms of societal symptoms. Perhaps the clearest example of this work comes from Shane Borrowman’s edited collection *Trauma and the Teaching of Writing*, in which instructors explore issues regarding: definitions and discourses about trauma; composition instructors’ roles in helping students respond to national tragedies; and activities that foster students’ critical understandings of public conversations about traumatic events, among other issues. Most of these chapters center on representation and critical reception of testimony or public conversations about trauma, and all were specifically aimed at pedagogical strategies for helping *students* engage with public rhetoric about Sept. 11 and other national traumas. Similar threads appear in a 2002 two-part special issue of the *Journal of Advanced Composition* on “Trauma and Rhetoric.” In these issues, scholars discuss topics as varied as trauma in various literary works (Tougaw; Mehta; Brinks; Chambers; Kaufman) or how we might conceive of education itself as necessarily a (productive) crisis (Britzman and Pitt), and as broad as the possible connections between disability and trauma studies (Berger) or as narrow as the need for more inclusive birth narratives (Colton). More recent work continues this trend; for example, Daniel Cole’s 2011 article on using Native American rhetoric as a

focus in the composition classroom centers on survival and resistance—often from individual-as-collective traumas. Such an approach, he argues, allows writing classrooms to critique Western traditions that perpetuate cultural traumas against marginalized groups like Native Americans. In these discussions, writing possesses the ability to “heal” society through teaching students about the ethics of representation and interpretation, teaching them to be critical consumers and producers of rhetorics impacting trauma (lessons which are also portrayed as healing for individual students).

A more recent turn within this “writing-as-healing-for-society” paradigm comes from service-learning or community engagement scholarship, which has suggested that writing about trauma in the context of community work can promote societal healing through greater critical understanding of others’ trauma and building empathy across difference. For instance, a special issue of *Reflections* on Hurricane Katrina discusses instructional choices made in response to this natural disaster. Baumgartner and Discher discuss a service-learning partnership between their class in Toledo, Ohio and a class of students at the University of New Orleans. The class involved reading trauma narratives by students who had survived Hurricane Katrina and then participating in disaster relief trips to the New Orleans area. For these authors, reading trauma narratives allowed them to help their students develop a sense of connectedness to “others” with different experiences for the purposes of seeing themselves as change agents, even on issues as big and devastating as natural disasters, which in turn invites students to question their cultural frames of reference and foster a sense of collective responsibility to work against systemic inequalities. Pignetti similarly used Katrina as a “teachable moment” by asking her students to read blogs of Katrina narratives in which survivors tried to sustain public attention to their continued suffering. Like Pignetti, the other

authors in the special issue don't question the inherent value of using trauma for teachable moments and collective action toward social change. Furthermore, they posit that the most important ingredient for healing is empathy, which instructors develop in their students by exposing them to others' trauma.

As evidenced by this review of literature, the field has paid needed attention to how trauma intersects with our work—as scholars, as teachers, as scholar-teacher-activists—and the role writing can play in individual and community resilience. However, despite their value for acknowledging *that* trauma impacts learning/writing and *that* writing impacts healing, this literature does less for sophisticated understandings of *how* trauma impacts learning/writing, what ethical practices best promote psychological safety, how to address complicated issues regarding confidentiality and mandatory reporting, or how to ensure that students disclosing trauma encounter the empathy that these authors suggest as the solution to emotional/psychological risks students take in revealing sensitive personal information. Furthermore, they do not question the circumstances under which writing might or might not be beneficial to those processing traumatic experiences, citing some studies that have demonstrated the healing potential of writing without adequate understanding of the clinical conditions under which scholars have drawn those conclusions (Carello and Butler). These insufficiencies stem from the way writing studies has tended to draw much more heavily on the psychoanalytical and trauma studies concepts that have some explanatory power for our work with students but ignoring the clinical literature that examines exactly how, under what circumstances, and with what ethical practices these pedagogies might be experienced as healing rather than ineffective or, at worst, harmful.

Furthermore, the field's explorations on trauma so far often neglect an ecological perspective on trauma and resilience, even when acknowledging the systemic inequalities that perpetuate trauma. According to Dass-Brailsford, ecological perspectives on trauma view violence as ecological threats that "threaten the capacity of communities to promote health," and they also "assume that mental health issues are influenced by multiple intersecting factors, which include individual characteristics, family, school, community, and other contexts" (76). Harvey further contends that sources and expressions of both trauma and resilience are diverse because they are impacted by a wide range of ecological factors. Thus, it is theoretically untenable to view trauma as stemming from a single origin, as experienced/expressed essentially the same way by everyone, and as able to be healed in a single powerful moment (or) by encountering an empathetic witness.

However, even though ecological metaphors for writing have proliferated across writing studies scholarship (Edbauer; Fleckenstein et al; Rivers and Weber; Fraiberg; Weisser), these metaphors have not informed the field's understanding of trauma and healing, particularly in scholarship focused on classroom pedagogy. In fact, Bracher, Berman, Campbell, and Bishop and Hodges all focus their arguments on individual, powerful moments of disclosure within a writing classroom to an audience of (hopefully) empathetic listeners that fostered some sort of healing for students (and, sometimes, instructors). Cole, Payne, Hesford, and Goggin and Goggin all suggest the writing classroom as a balm that breaks social silences and dominant narratives about past traumas in order to prevent others in the future, positing critical reading and ethical representation as the key tools that accomplish this societal healing. Baumgartner and Discher and Pignetti contend that students can be taught to be ethical, critical social actors working against trauma in the context of *a*

service-learning course where they develop empathy. I'm not arguing that discussions are entirely wrong or unproductive; in fact, some components of Trauma-Informed Writing Pedagogy emerge from these scholar's insights. Nevertheless, writing studies scholarship on trauma privileges the context of a single writing classroom at the expense of more sophisticated—and accurate—understandings of trauma *and* healing as ecological, though clinical literature provides rich discussions on this topic (as discussed in Chapter 4).

Yet another major limitation concerns the insufficient and usually brief (if at all) practical discussions about the lived realities of interacting with trauma survivors, which clinical literature discusses at length. Though the scholars referenced above explore the benefits of students disclosing trauma in the classroom (at times suggesting we should invite these disclosures), there remains much less (if any) discussion regarding research-validated principles and practices for instructors responding to these disclosures, nor has there been adequate rendering of possible risks to students. For example, while the trauma studies definitions of trauma and its impacts (which writing studies relies on) may be useful for some projects, these definitions do not encompass the diverse ways survivors may experience and respond to trauma, which may be, for instance, less an apocalyptic, incommunicable existential crisis and more physical, or at least one that the survivors themselves feel comfortable putting into words. Additionally, there is very little discussion of day-to-day concerns such as warding against compassion fatigue, or mandatory reporting policies, which may require instructors to break confidentiality with their students and which may actually endanger students (for example, if it results in an investigation in which an abuser becomes aware that the victim has told their secret). There is also little attention to the role of triggering—how sensory reminders of a traumatic experience can cause an individual to re-

experience the original trauma as if it were actually happening—and how to help students who are emotionally overwhelmed to calm down. Further, the scholarship cited in this section does not include research on what kind of language/actions are actually be experienced by survivors as validating and empathetic, or how stable living conditions or legal justice might be equally or more important components of healing than confessional writing in a classroom. Clinical perspectives do address these and many other practical considerations through research that continually updates best practices for interacting with survivors based on extensive studies regarding what is experienced by actual survivors as empowering and healing.

Finally, the uptake of this limited scholarship in teaching practice has privileged the “powerful,” “moving,” or “honest” personal narrative about trauma in ways that are misleading. Ann Ruggles Gere locates this trope in personal writing pedagogies of the 1980s, in which personal writing—thought to elicit a more authentic writerly voice—often resulted in students telling their instructors stories about traumatic experiences. These trauma narratives appeared in scholarship and collections that publish student work, and the literature suggests instructors also give accolades in class to the students who produce these narratives (Gere 204). One problem with this trend is that it claims to prove what it cannot—that students who write about their trauma and express some degree of healing through writing have actually healed from trauma, for good, when clinical literature suggests healing is an uneven and cyclical process, sometimes a journey that never quite reaches its destination. Furthermore, research on literacy narratives has indicated that students are quite savvy at knowing what narratives professors expect and performing accordingly (Williams; Webb-Sunderhaus). Thus, it is difficult to determine what benefits, if any, a student has

received from discussions or written prompts that engage trauma and to what extent the student may be repeating the “powerful personal narrative” that the instructor wants to hear. In fact, as Carello and Butler point out, clinical studies that verify writing’s healing potential take place under conditions very different from (and more controlled than) the writing classroom, and attempting to engage trauma through writing may in fact be more damaging than helpful. Clinical literature on the relationship between writing and healing might help us reconsider the conditions that are necessary for writing to actually be healing, as well as expose us to a much more diverse and complex range of trauma narratives from survivors and the social workers who work with them.

This desire to explore trauma in writing classrooms is a laudable and necessary effort; as I’ll discuss at length in the chapters that follow, ignoring or downplaying the role of trauma in the writing classroom does a disservice to students and the role we play in creating the conditions for effective learning environments. However, the field’s attention to trauma and writing pedagogy must be much better informed by deeper, more complex, ecological, research-validated, and practice-oriented perspectives on trauma, as well as its impact on education. Writing studies therefore has much to gain from infusing clinical perspectives into current understandings of trauma in the classroom. For example, SAMSHA and Dass-Brailsford provide foundational and accessible perspectives on the range of experiences that can be traumatic and the myriad ways individuals and cultures might respond to trauma, as well as models and practices that have proven beneficial for interacting with trauma survivors. These and other works (such as Elliott et al and Harvey) detail the range of ecological factors that cause trauma and that are most likely to promote healing, before exploring how “best practices” apply (or don’t) within specific settings along this ecological

spectrum. Others are investigating how this research applies (and doesn't) to educational settings (Pritchard et al; Carello and Butler; Sitler). Clinicians have also researched the prevalence of trauma and PTSD among college students and how that impacts their ability to adjust to college life (Moser et al; Silver et al; Vrana et al). This is just a small sampling of the rich clinical literature that could not only deepen faculty's understandings of trauma and its impact on learning but also provide research-based best practices for engaging it ethically in the classroom.

The exigence for considering clinical perspectives is clear, given the well-established prevalence of student trauma in college writing classrooms, as well as the consistency with which trauma has appeared in writing studies scholarship in the last 50 years. Furthermore, this is a timely issue for scholars to consider as public debate about student trauma, mental health, and distress at universities continues to proliferate contentiously. Particularly relevant are discussions about trigger warnings in higher education (examined at length in Chapter 2). In 2013, which *Slate* proclaimed as the year of the trigger warning, students increasingly called upon universities to require trigger warnings for material that might be experienced as (re)traumatizing or otherwise distressing. Some faculty responded with increased use of trigger warnings, but debate crucially centered around identifying problems caused by trigger warnings (and the related practice of "safe spaces"). Faculty and university administration pushed back against calls for trigger warnings, arguing that they impede intellectual freedom (Bass and Clark; Bianco; Cooper), coddle students from the realities of adulthood (Halberstam; Essig), prevent real and substantial learning (Boostrom; Cooper; Essig), mark an attempt by students not to be challenged (Boostrom; Cooper; Essig; Bianco), and reflect neoliberal co-opting and individualizing of traumas at the expense of more structural causes

(Halberstam; Alvarez and Schneider; Cecire). Others, such as feminist scholar Angela Carter, disagree with these critiques, positing that trigger warnings are an “opt-in” strategy, a way to shape classroom space so that all students can participate more fully. Understanding “triggering” in particular, and trauma in general, from a clinical perspective might help scholars in writing studies to more thoughtfully engage in these broader discussions in higher education, which exert much influence on how instructors view students, student learning, and the responsibilities of the instructor.

Method(ologie)s

This dissertation builds a trauma-informed approach to writing pedagogy that can be adapted to a range of teaching styles and contexts and that draws from clinical scholarship on trauma, related writing studies research, and the lived experiences and expertise of current writing instructors. I began this project by posing the following research questions: What questions, concerns, barriers, and opportunities frame writing instructors’ perception of and response to student trauma? How does clinical literature speak to these issues? What would a trauma-informed writing pedagogy look like, informed by clinical research and the expertise of writing instructors? I explored these questions through extensive reviews of social work and writing studies literature on trauma, leaning also on my five years teaching college writing at UofL and my familiarity with clinical research from several years of volunteer work for the Center for Women and Families, which required 40-hours of training in Trauma-Informed Care. In addition to this background, I relied heavily on qualitative data from semi-structured interviews—conducted using a feminist- and trauma- informed ethical approach—with nine current Composition Program faculty at the University of Louisville.

Feminist- and Trauma- Informed Approach to Research Ethics

This study draws from feminist-informed and (to a lesser extent) participatory methodologies to ensure that while I research trauma-informed care for writing studies, I also *practice* a trauma-informed approach to research. This approach represents an ethical necessity, because I'm asking participants to discuss trauma directly, which may elicit their own histories of trauma (and related emotional responses) and because trauma is such a pervasive experience that trauma-informed care practitioners advocate for “universal” precautions in any setting. Adapting SAMHSA's definition of Trauma-Informed Care to the research process, trauma-informed research 1) acknowledges the pervasiveness of trauma in society and responds to the impact of trauma by 2) emphasizing physical, psychological, and emotional safety in the research setting; 3) creating opportunities for research participants to increase their sense of personal capacity and inner strength; and 4) anticipating/avoiding re-traumatizing behaviors and processes (SAMHSA xix).

Because Trauma-Informed Care is an approach to service, not an approach to research, I look to related principles from feminist and participatory methodologies, which contain long traditions of attention to research practices that form more empowering research relationships and carefully negotiate issues of risk/safety. I draw here from the vast body of literature on feminist research (Fonow and Cook; Gluck; Harding; Kirsch; Kirsch and Royster; Powell and Takayoshi; Sullivan), participatory action research (Brydon-Miller et al; Coghlan and Brydon-Miller; Stevens et al; Williams and Brydon-Miller), and others writing from similar—though not explicitly feminist or participatory— paradigms of reciprocal, collaborative, and (self-)reflexive scholarly practices (Haswell and Haswell; Newkirk, Raoul; Rousculp; Rose; Takayoshi).

Infusing research methods with acknowledgement of trauma's pervasiveness begins in no small part just through attempting to create trauma-informed research methods, and it continues through the feminist principles of reflexivity and positionality. Such principles assert that all knowledge/experience is filtered through personal factors, such as prior experiences, personality, socio-cultural context, and so on. Fonow and Cook identify reflexivity (of self, the research process, and structural inequalities) and attention to affective components of research as two of the most personal and central components of feminist research. These principles urge researchers to critically reflect on the constructed-ness of knowledge and the effects of research on research subjects and the researchers themselves (2). They also contend that researchers must pay attention to the personal and cultural frames of reference that shape their own and participants' experiences, as well as the emotional dimensions of research.

I translated these principles into trauma-informed research practices in several ways. First, I recognized that participants may be trauma survivors themselves, and explicitly discussing trauma may trigger or otherwise invite negative emotional responses. I therefore acknowledged the emotional risks to participants before interviews took place. Second, I took care to devote attention not only to what participants are saying in interviews, but also to the affective dimensions of their responses, being particularly mindful of whether participants may need time to decompress during or after interviews. Third, I acknowledge my own identity and experiences of trauma and working with trauma survivors shape my understanding of this issue in particular ways that may conflict with participants' understandings of trauma. However, I sought to check these perspectives and interpret

participants' interview responses with humility—especially those views that conflict with my own.

Emphasizing physical, psychological, and emotional safety and anticipating/avoiding re-traumatizing behaviors/processes are related concepts in Trauma-Informed Care literature, and there is some precedent in feminist and participatory research methods for implementing such concerns for safety into the research process (though they might not frame or phrase it in the same way as clinicians). Feminist researchers advocate for critical reflection on trust and vulnerability in interview settings and for explicitness with regard to the differing stakes and risks involved in all research settings, particularly interviews (Kirsch; Gluck). Similar discussions can be found in scholarship on participatory research methods. For instance, Mary Brydon-Miller and Bronwyn Williams write that participatory action research must involve collaboration and democratic decision-making based in mutual respect. But creating this sense of trust and respect in the research setting can also be problematic. For example, Thomas Newkirk cautions against “seduction and betrayal” in the research process, which refers to how researchers seduce participants into trusting them enough to reveal intimate details about themselves, and then betray participants by finding only “bad news” that critiques participants' words or behaviors. Kirsch similarly notes that feminist interviewing also tends to create a more intimate interview environment that imitates (but is not) friendship and thus invites participants to divulge risky information they might not ordinarily reveal.

Such a dilemma is particularly problematic for trauma-informed approaches because it resembles the manipulative power dynamics inherent in many traumatic experiences, and it also pathologizes and dehumanizes the research subject, both particularly harmful impacts

for those with a traumatic history. Drawing on Kirsch's and Newkirk's critiques, I note that while critiques of faculty understandings of trauma are central to improving the experiences of traumatized students, they may be detrimental to the reputation of the faculty members involved, particularly because the current Composition Program director is on my dissertation committee, and I may publish study results in academic journals read by participants' colleagues.

These concerns provided several implications for how to foster safety in trauma-informed research practice. First, I was explicit about the emotional and professional risks involved in this research and offered opportunities before, during, and after interviews for participants to shape their participation in the study. In line with this principle, I allowed participants to read their own transcripts and my use of their interviews in dissertation chapters, which allowed them the opportunity to clarify their interview responses, to respond to my interpretations of what they said, and raise questions about any material they felt did not protect their personal or professional wellbeing. Second, I attended to the physical space of the interview, and whether participants experience it as safe and comfortable, such as by asking participants where they'd prefer to meet, whether they'd like the door to be open or closed, and so on. Third, I avoided forcing or coercing participants into disclosing experiences that they would not otherwise disclose, because of the intimate setting of an interview with a researcher who presents herself as empathetic and trustworthy, such as by reminding participants that they may decline to give information at any time and taking care with follow-up questions to not probe too deeply on experiences participants seem to be avoiding. Fourth, I took care in writing up research findings to interpret participants' responses generously, particularly when I found their beliefs or practices regarding student

trauma to be problematic. In these moments, I took a step back, examined my own resistance to the participants' comments, and sought to understand the logic behind what the participant was saying, before drawing conclusions about what these comments meant for my study.

Finally, *creating opportunities for research participants to increase their sense of personal capacity and inner strength* was implemented through the feminist/participatory principles of reciprocity and collaboration between researchers and participants. Another telling feature of feminist and participatory research is the “action orientation” (feminism) or “obligation to intervene” (PAR). Brydon-Miller and Williams argue that participatory methods challenge “the assumption that to be valid, the research process must be objective and value-neutral, acknowledging instead that all knowledge generation is embedded in systems of power,” and similar formulations can be found in feminist research (246). Though action and the obligation to intervene are crucial elements in feminist and participatory methods, some scholars question whether taking an interested stance in a research project creates researcher bias (critiques that have been address by many, including, Kirsch, Fonow and Cook, and Brydon-Miller and Williams). These researcher concerns aside, Trauma-Informed Care, from the perspective of a practitioner, suggests that we must prioritize an action-oriented stance with survivors, so we might say the interested stances of feminist and participatory research are appropriate also for a trauma-informed approach to research.

In the context of an interview study seeking to be trauma-informed, these principles manifested through leveraging opportunities to give something back to interviewees. For example, I provided interested participants resources on Trauma-Informed Care to enable trauma-informed teaching, letting them know they could contact me later if they wanted assistance responding to issues of student trauma in their classrooms (and one did). I also

provided one instructor with an email about her participation in this study that she could use for professionalization purposes, to demonstrate her commitment to active participation in the department. I also often broke from my interview plan to explore questions that instructors had about, for example, resources they didn't already know about for referring distressed students, if/when/how to give trigger warnings on some assignments, or other ways they might have responded to difficult student problems they had in the past.

The trauma-informed methods above therefore seek to foreground the needs and perspectives of interview participants, incorporating safety into the research process while seeking to build a trauma-informed writing pedagogy that is inclusive of faculty's lived experiences working with students. This interview process with diverse participants serves a crucial function in forwarding an instructional approach grounded in these lived experiences that is more likely to actually be taken up by instructors in the Composition Program.

Research Site, Participants, and Process

At the beginning of this study, I conducted semi-structured interviews with nine diverse instructors from the University of Louisville's Composition Program, housed in the English Department. Faculty interviews serve as primary data that helped me situate a trauma-informed approach to writing instruction within a specific institutional context and within faculty's lived experiences in the classroom. This qualitative approach also stems from my stance that the *meanings* faculty attribute to student trauma as either an idea or a lived reality shape their responses to this issue in practice, and any training or resources I forward must be responsive to what faculty already know or believe about student trauma. In these interviews, I learned about faculty's experiences with/responses to student trauma,

identified key trends orienting their understanding of student trauma, explored in what ways they do and don't feel equipped to respond to student trauma, and gauged their relative receptiveness to incorporate trauma-informed principles/practices into their teaching. These interviews allowed me to posit a trauma-informed pedagogy that is infused with faculty perspectives on the lived realities of classroom teaching and learning and that is based on what might allow this approach to *actually* be taken up in classrooms/writing programs.

This dissertation also allows me to ground the trauma-informed pedagogy I built within the context of a specific writing program—the University of Louisville's Composition Program. I bound this study around UofL's Composition Program in part because I am already familiar with the pedagogical culture in this program, having been a member since 2013 years as both an instructor and Assistant Director of Composition, and this familiarity enables me to contextualize the trauma-informed principles I propose according to, for example, the culture of pedagogy in the department. More important, clinical scholarship suggests that support for trauma survivors must involve deep consideration of *context* (SAMHSA; Elliot et al; Sharp and Ligenza). That is, individual experiences of and responses to trauma are *highly situated* and dependent on a broad range of factors, such as educational status, cultural background, institutional culture, etc. Furthermore, because student services vary between universities, training for faculty in these issues must be cognizant of what kinds of resources and training are (or are not) available. I therefore used UofL as a case study, because its instructors somewhat share a context for their instructional choices (e.g. the same body of students, similar professional development opportunities, institutional context, student services options).

Furthermore, the location of composition classes within UofL also makes it an appropriate site for this research. Instructors in this program teach the entry-level writing classes that most university students are required to take upon entering college, regardless of major, and Composition faculty therefore work with a higher percentage of UofL students than most other university departments. For instance, in the single semester of Fall 2016, 17% of all undergrads enrolled at UofL were taking one of the six classes offered by the Composition Program, and that proportion is similar each semester. Because writing classrooms often have smaller maximum class sizes (22 or 26 at UofL) and typically involve more small-group and one-on-one instruction and personal writing than other courses, issues of student trauma are more likely to become explicit than in less intimate classrooms (Borrowman; MacCurdy). Furthermore, some course themes (a recent freshman course themed around silence, for instance), may invite readings, discussions, or student writing that deals with trauma. The Composition Program is therefore well-positioned to benefit from research on trauma-informed pedagogy to better support students and faculty.

My nine participants consisted of three graduate teaching assistants, three part-time lecturers, and three tenured professors (two in literature and one in composition). Six of these faculty (all three part-time lecturers at various stages of their careers, one graduate student at the end of the Ph.D., and two tenured literature faculty) were identified from a university-wide Spring 2017¹ survey about trauma in the classroom that I conducted, which asked participants to indicate their interest in continuing with the study. The remaining three participants were recruited through emails on English department listservs. Because I wanted

¹ While not officially part of this dissertation study, information from this survey—which was distributed to a random sampling of all UofL instructors—will provide background, contextualizing information for interview responses. That is, the survey alerts me to key trends in faculty awareness of trauma across the university and allows for some data comparison across departments, even though I am only interviewing Composition Program faculty.

a range of levels of teaching experiences and teaching backgrounds, I supplemented the six faculty I already identified with three others: a graduate student just beginning the PhD program, a graduate student in the middle of the PhD program, and a tenured composition faculty member (the only composition faculty member who volunteered for the study). These participants were further relatively diverse in terms of teaching status, class, race/ethnicity, educational background, gender identity, trauma history, and other factors. Thus, while not intended to be a statistically representative sample, my pool of participants offered a diverse set of perspectives on student trauma and trauma in general, leading to richer qualitative insights on how different writing faculty at UofL understand and respond to trauma in their work.

Faculty interviews explored participants' beliefs/practices about teaching in general; their understandings of, experiences with, and responses to trauma in the classroom; and initial reactions to the central overarching tenets of trauma-informed care. The semi-structured interviews invited subjective reflection from participants on what they think trauma is, how it manifests in the classroom, whether it affects their work, and what resources they think they need to adequately address this issue in their role as instructors. It also collected general information about instructors' teaching values, dispositions, and perceived strengths and weaknesses, in order to locate faculty's beliefs about and experiences with trauma within their overall understanding of their teacherly identity. These interviews thus provided a look at attitudes toward teaching and students in general and in regards trauma in particular, information that is necessary for situating trauma-informed teaching within a particular pedagogical context. Additionally, in the interviews, I asked participants to respond to a text (created by me) that outlined the main principles/practices of trauma-

informed care identified from a wide range of foundational clinical scholarship and that I knew would in some way be part of the trauma-informed writing pedagogy I wanted to create. Interview questions inquired about faculty responses to this pedagogy—what seemed useful, problematic, intriguing, unrealistic, and so on—and how likely they would be to implement this approach into their teaching (or whether they already did). A full list of research questions and other interview materials are included in Appendix 1, but the four main topics discussed included:

- “Tell me about yourself as a teacher.”
- “What do you already know about trauma, and what do you want to know?”
- “Tell me about some experiences you have had with students in class that influence how you do or don’t account for trauma in your teaching.”
- “I am interested in designing a trauma-informed pedagogy for a variety of classroom settings. *[Brief description of handout describing trauma-informed principles and practices]* How likely would you be to adopt some of these trauma-informed approaches in your teaching? Your colleagues?”

To analyze data from interviews, I used a flexible and recursive coding process as outlined by Johnny Saldaña’s *The Coding Manual for Qualitative Researchers*, who defines coding as a multi-stage, cyclical process that requires creativity and honesty to code and recode data. My approach began with a few pre-set (or pre-determined) codes based on my research questions: “experience,” “definition,” “response,” “pedagogy,” “barrier,” and “opportunity.” These pre-set codes helped organize data on a broader scale to identify where participants have addressed issues related to my main research questions. Other pre-set codes were adapted from the overarching tenets of trauma-informed care as summarized by

SAMHSA: “acknowledge” (acknowledging the pervasiveness of trauma in society), “learning” (awareness of the need to always learn more about trauma and how people from diverse cultural groups experience it), “physical safety,” “psychological/emotional safety,” “empowerment” (indicating any awareness of strategies to help survivors regain a sense of control, capability, and inner strength), and “avoiding re-traumatization.” These codes enabled me to analyze to what extent faculty are or understand themselves to be engaging trauma already in ways supported by trauma-informed care literature.

I also relied heavily on *emergent* codes, that is, themes that arose during the process of conducting, transcribing, and reviewing interviews. Researchers develop emergent codes by reading interview transcripts multiple times, noting themes that emerge among responses, then re-reading to note where, how, how often, and under what circumstances those themes emerge among participants’ responses (Saldaña). Emergent thematic codes helped me learn from my participants what issues are important to them in thinking through trauma in the classroom, rather than only reading through the pre-set codes that analyze data based on what I think is important. In other words, the emergent codes look for “the unexpected” and helped me identify the most central framing concepts that shape how writing instructors perceive and respond to student trauma in their classrooms. During the analysis process, I identified many such emergent codes that appeared across at least several interviews and addressed my main question about what experiences, questions, concerns, barriers, and opportunities shape writing instructors’ current understanding of and responses to trauma. Though all of these codes provided useful information, most emergent themes did not appear in enough participants’ transcripts to signify a significant trend or framing factor for writing instructors’

perspectives on trauma. However, there were several notable exceptions, which helped shaped chapter topics.

One notable exception was references to therapy or counseling, and even more specifically, the code “not therapists,” when participants acknowledged (sometimes in exactly the same words as each other) that they are not or did not want to be like therapists or counselors to their students. All but one participant made such a statement to defend a range of positions regarding how they respond to distressed students. This trend mirrors writing studies literature that, as I discuss in Chapter 3, pervasively mentions how writing teachers are “not therapists,” regardless of whether the scholar is writing to defend pedagogies that directly engage trauma and healing or to reject such pedagogies. “Therapy/counseling” was a similarly pervasive code (appearing in all but one transcript), and it marked places that faculty discussed how experiences with therapy or counseling (or relationships with therapists or counselors), shaped their understanding of how they should respond to student trauma. Again, this trend appeared reflected in writing studies literature, where scholars often borrow concepts/practices from counseling, therapy, or related perspectives to explain classroom phenomena and/or respond to distressed students more effectively, even if they simultaneously distance themselves from counselors or therapists (Muriel Harris; Tobin; Jeannette Harris; Murray). Thus, the idea that “teachers are not therapists” has clearly become a major frame shaping how the field understands our responsibility with regard to student trauma, and this frame became the central topic of exploration in Chapter 3.

Other chapter topics emerged from how several codes co-occurred frequently. One place this happened was in interview sections where participants discussed an impressively diverse range of support they’re willing to give students struggling with trauma, mental

illness, or other distress, including exempting students from assignments, offering extensions, forgiving absences or late work, giving content warnings, researching the student's particular issue, "just" listening, monitoring the situation but not getting directly involved, asking questions about whether the student already has support, providing referrals, and other accommodations. Each of these support types was associated with a unique sub-code and grouped under the larger code "response type." More than half of all instances of "response type" codes co-occurred with pre-determined codes for physical or emotional safety. Within these co-occurrences, faculty discussed a teaching practice that they do in order to promote physical or emotional safety (sometimes literally using the word safety, sometimes a related word such as comfort), and they almost always followed this discussion with disclaimers about how these practices can go too far or qualifications for the circumstances under which they will not offer this kind of support. Usually, this qualification involved a fear related to compromising academic rigor. It also almost always co-occurred with a code in the "student type" category, in which faculty noted a type of student—"needy," "self-sabotaging," "resistant/defensive," etc.—that caused them to place limits on the supports they're willing to give. Students like these may, at best, not get the most out of their education, or, at worst, take advantage of their instructor. The way these codes clustered together made a narrative structure appear, in which instructors acknowledge support they give to students in order to promote safety, immediately followed by (unprompted) qualifiers or disclaimers. These trends bear similarities to popular and contentious public conversations debating higher education's use of trigger warnings and safe spaces (two practices with origins as a response to trauma survivors). In these conversations, notions of the "coddled," "sensitive," and "immature" student circulate widely to defend positions against safety measures like trigger

warnings or safe spaces or to offer qualifications for their use. Thus, these trends in faculty interviews and the arguably most popular public discussion related to student trauma demonstrate that concerns about how “students are coddled” (or might be) by classroom safety measures forms a central framing factor in how faculty understand and respond to trauma, and given that safety is also a central principle advocated in clinical literature on trauma-informed care, it formed the topic of another chapter discussion (Chapter 2).

A third trend appeared based on another cluster of codes that qualified information regarding faculty’s perspectives on institutional resources that support them as they support struggling students. For example, the code “referrals,” which marks places where faculty discussed referring students to resources outside the classroom, appeared in every interview, usually more than once. In addition, the code “resources” marks places where faculty discussed university and other resources they turn to when inquiring about how best to support particular students, as well as places they discussed which resources they use most frequently and why. Analyzing these codes side by side, it became apparent that faculty relied on a relatively small proportion of university resources available for supporting students—usually the Counseling Center, the Writing Center, and to lesser extents, the Disability Resources Center or REACH—especially when making referrals or seeking to learn more about how to help students struggling with particular issues. This reliance on just a few of the universities’ extensive student support services appeared connected to stories of successful and unsuccessful interventions with students; participants had (almost) only positive things to say about referring students to the Counseling Center or the Writing Center but had less confidence in working with other university student support offices. In fact, several faculty told stories about negative experiences supporting distressed students in

which institutional resources did not offer them the help they'd hoped for. Additionally, when participants offered their suggestions for how to improve instructors' ability to respond effectively to student trauma, the majority of their suggestions were for new university-sponsored offices, trainings (especially for graduate students), or other resources. Perceptions of institutional (in)effectiveness therefore significantly influenced faculty understandings of student trauma in their writing classrooms, as well as what support they are willing/able to offer. This trend, combined with how central context/institutions are in clinical literature advocating for trauma-informed practices and in WPA literature on the necessity of site-specific programming for faculty, meant that a chapter (Chapter 4) exploring institutional support—or perceived ways that “institutions don't support trauma-informed teaching”—would be crucial for the Trauma-Informed Writing Pedagogy I wanted to build.

In sum, connections among emergent codes and pre-determined codes identified several salient issues that frame how writing instructors perceive student trauma and writing pedagogy, in ways that reflected similar shaping threads in key public, writing studies, and clinical discussions regarding students, trauma, and education. Thus, these themes inform the shape of body chapters, which are described in the next section.

Chapter Outline: Building a Trauma-Informed Approach to Writing Pedagogy

Because I wanted my approach to trauma-informed writing pedagogy to respond to the concerns, expertise, and lived realities of writing instructors (as seen by my study participants and writing studies research), the dissertation chapters that follow explore each of the three main concerns cited above that I identified through interviews and literature review. Each chapter explains the valid and misleading discussions writing instructors have

had about these concerns before illustrating threads in clinical literature that most usefully speak to them, by providing a more accurate, deeper perspective on student trauma as it impacts the writing classroom. These chapters culminate in the conclusion chapter and Appendix 1, which together articulate Trauma-Informed Writing Pedagogy, based on the analysis previous three chapters.

Chapter 2, “‘Students Are Coddled’: Toward a More Complex Understanding of Safety in Writing Classrooms,” discusses how tensions between rigor and safety present a barrier to trauma-informed writing instruction. Locating this discussion in writing studies scholarship on safety and the intersections of pedagogy, inclusivity, and affect, I first explore iterations of the idea that “students are coddled” by efforts to promote trigger warnings, safe spaces, and safe classrooms on college campuses. Concerns about coddling students stem from justifiable concerns about academic rigor, intellectual freedom, and instructor autonomy; however, these concerns also conflate discomfort with triggering, misrepresent the nature of retraumatization and its impact on academic success, oversimplify the concept of classroom safety, and ultimately exclude the perspectives of traumatized students from the classroom space. I then look to UofL instructors and clinical literature to consider how instructors can create effective learning conditions by minimizing the possibilities of retraumatization, while also not coddling students by assuming they need our protection and are unable to work through discomfort and pain. Furthermore, I argue that clinical literature on trauma-informed teaching and the empowerment model offers a way forward through these conflicts between rigor and safety.

In Chapter 3, “‘Teachers Aren’t Therapists’: Exploring Compassion, Boundaries, and the Role of the Writing Instructor,” I continue focusing on tensions within the classroom

space by examining how the oft-cited truism “teachers aren’t therapists” points to conflicts between compassion and boundaries in the role of writing instructors. I first trace the history of writing studies research that uses counseling, psychology, and psychoanalytic concepts to inform writing pedagogy, and, in particular, to advocate for therapeutic approaches to writing pedagogy. “Teachers aren’t therapists” became a touchstone in this conversation, as both an oppositional reaction by skeptics and an obligatory nod by proponents of pedagogies that attempted to leverage writing’s healing potential. Several important realities inform the admonition that teachers are not, and should not try to be, therapists. These include: instructors should not tamper with psychological processes they don’t understand; an over-focus on the personal can promote navel-gazing and individualism at the expense of academic (and) writing development; directly engaging students’ trauma can create several ethical and liability issues; and so on. However, this chapter also demonstrates how this truism does not adequately reflect the nature of writing instructors’ work with students, our role in students’ mental health, our responsibilities for creating effective learning environments, and the skills instructors feel they need to work effectively and ethically with students who are in distress. I then turn again to the expertise of study participants and clinical literature to move beyond the truism that “teachers aren’t therapists” to conceptualize what role we do play in supporting students through challenges affecting their academic performance. Clinical scholarship on RICH relationships, Mental Health First Aid, active listening, and self-care offers such a way forward.

I move beyond individual classrooms to broader institutions in Chapter 4, “‘Institutions Don’t Support Trauma-Informed Teaching’: Shaping Institutions to Support Trauma-Informed Pedagogies.” This chapter begins by describing the disconnect between the

university's extensive financial, personnel, and structural resources designated to supporting students in distress, and instructors' sense that the institution does not adequately support them and their struggling students. Locating this discussion in the field's rich scholarship on building inclusive educational institutions, I first explore faculty's concerns regarding the effectiveness of institutional support for their efforts to address issues of student trauma and distress. Among these concerns are whether institutional policies and procedures put them at greater risk of liability or breaking students' trust, whether institutionally-sponsored professional development is effective versus redundant, whether student services offices provide effective support to students who are referred to them by faculty, and whether institutions support uniformity, rather than teachers' abilities to make context-specific, flexible choices. I then illustrate how the persistence of these concerns despite expansive, available student support services provide an opportunity to re-conceptualize the terms of student support structures, including a better understanding of instructors', administrators', and students' shared responsibility, what a "successful" intervention looks like, what proactive support might include, and the relationship between principles and policies. The chapter concludes by highlighting how clinical literature on the social-ecological model and building trauma-informed organizations might serve these efforts.

These discussions culminate in an articulation of trauma-informed approaches to writing pedagogy in Chapter 5, "Trauma-Informed Writing Pedagogy: Six Criteria for Supporting Resilience, Inclusivity, and Effective Teaching." In this chapter, I mesh and build on the theories, debates, principles, and practices introduced in Chapters 2-4 to identify six criteria defining trauma-informed approaches to writing pedagogy. This concluding chapter explains the six criteria in detail and introduces Appendix 2—"Trauma Informed Approaches

to Writing Pedagogy: A Guidebook for Instructors and Administrators”—in which I elaborate on the criteria and provide tools and guidelines for how instructors and administrators might apply them in practice. These criteria are designed to be flexible, able to be adapted to a variety of teaching styles and contexts, but they are built from the most salient clinical literature that responds directly to concerns articulated by study participants and writing studies research. This articulation of Trauma-Informed Writing Pedagogy (TIWP) is intended to be a pilot version through which faculty can begin promoting trauma-informed principles and practices in their own classrooms, writing programs, and universities, but it must be recursively refined and updated overtime. Nevertheless, TIWP has implications for responding to an increasingly diverse student population that has been impacted by trauma and distress, as well as contributing to the health of the discipline and our ability to contribute to public conversations about writing, students, and pedagogy that have implications for our work.

Over the course of these chapters, I contribute new perspectives on our role as writing instructors in responding to student trauma, as well as specific strategies for doing so. I will revise limited commonplaces regarding trauma and expand the types of literature the field draws on in formulating theories of how trauma impacts our work. Through this work, I will join the project of educators from diverse fields attempting to create college environments that are more inclusive of trauma survivors’ experiences. More specifically, I provide a user-friendly guidebook that repackages my dissertation research into a format that can be mobilized by writing instructors and support their efforts to respond ethically to the student trauma survivors they work with every day.

CHAPTER II

“STUDENTS ARE CODDLED”: TOWARD A MORE COMPLEX UNDERSTANDING OF SAFETY IN WRITING CLASSROOMS

We are experiencing one of the greatest threats to the university as we know it. It is not about enrollments, revenues, regulation, rankings, or leadership. It is about the ability to engage in unfettered debate at American colleges. It is about the assurance of intellectual freedom, about what can and cannot be discussed.

—*Scott A. Bass and Mary L. Clark*

Every semester, I tell my students that my classroom is a "safe space" for — not against — discussion. I tell them they can say what they want with the language in their arsenal, but they should expect to be engaged by their peers and by myself. My classrooms are safe spaces not because we avoid talking about delicate matters, but because we have the freedom to discuss them.

—*Marcie Bianco*

Trigger warnings are a very dangerous form of censorship because they're done in the name of civility. Learning is painful. It's often ugly and traumatic. How different my life would be if I hadn't read *Crime and Punishment* because it's misogynist and violent. How terrible my teaching would be if I hadn't spent years researching spectacle lynchings and eugenics and freak shows in order to teach courses on race and American culture [...] Let's all put on our big-girl panties (or big-boy tighty whities, as in the case of the Wellesley statue) and face that world together.

—*Laurie Essig*

It's hard to discuss college student trauma without addressing the contentious national debate about trigger warnings and safe spaces, two popular measures designed to support psychological safety. In 2013, which *Slate* proclaimed as the year of the trigger warning,

students nationwide increasingly called upon universities to require trigger warnings for material that might be experienced as (re)traumatizing or otherwise distressing. Around the same time, students and educators also increased calls for classrooms to be “safe” and created safe spaces on campus, especially when speakers deemed harmful to vulnerable student populations came to campus. Many administrators and instructors argued passionately against trigger warnings in particular, making trigger warnings perhaps the most high-profile example of broader discussions about psychological safety at college. Fears circulated about how trigger warnings—especially if *required* by institutions—could impede intellectual freedom (Bass and Clark; Bianco; Cooper), coddle students from the realities of adulthood (Halberstam; Essig; Lukianoff and Haidt), prevent real and substantial learning (Boostrom; Cooper; Essig), allow students to avoid being challenged (Boostrom; Cooper; Essig; Bianco), and reflect neoliberal co-opting and individualizing of traumas at the expense of more structural causes (Halberstam; Alvarez and Schneider; Cecire). Others made similar arguments against the rise of safe spaces—an environment that seeks to provide students a haven from exposure to discrimination, harassment, or other emotional/physical harm—on college campuses, declaring such spaces as at best childish or at worst intolerant (Shulevitz; Flemming Rose; Ellison; Bateman).

Such objections reflect broader concerns about maintaining educational rigor (i.e. not coddling students) in an age where some students and educators across disciplines have called for greater attention (e.g. through trigger warnings) to psychological safety in educational spaces, because trauma and other distress affects the vast majority of college students (Barrett; Pritchard et al; Frazier et al; Bernat et al; Vrana and Lauterbach).

Psychological safety in an educational context generally refers to reducing the possibility that

students (especially those affected by trauma and/or systemic oppression) might be psychologically, emotionally, or otherwise harmed by classroom activities. In part, conversations about psychological safety arose from the fact that more students than ever are able to attend college despite social, disability, or mental illness factors that historically have precluded them from postsecondary education (Pritchard; Carter; Price). Such students often experienced histories of injustice against them or their communities and may benefit from classroom accommodations that acknowledge and counteract these oppressive histories. On the other hand, much writing has detailed public anxieties about coddled, entitled millennials who refuse to grow up (c.f. Kyle Smith's *The New York Post* op-ed piece) and lamented the commodification of the university, in which students are demanding consumers rather than eager learners (c.f. former AAU president Hunter Rawlings's *Washington Post* editorial). To some educators, student requests for trigger warnings, safe spaces, or other accommodations (such as alternate assignments, forgiving absence policies) only serve to further erode the purpose and goals of a college education, rather than helping traumatized students learn more effectively. Psychological safety, they argue, opposes education, which is inherently uncomfortable, challenging, and painful. In other words, students don't need to be coddled in "safe classrooms." Instead, they need to grow up.

Participation in these discussions about psychological safety in composition scholarship is surprisingly minimal; however, this concept is particularly relevant to writing instructors, given our field's decades-long interest in effective and inclusive pedagogy and the fact that 68-84 percent of the college student population (the majority of which finds itself composition classes during college) has experienced at least one traumatic event (Frazier et al; Pritchard et al; Vrana and Lauterbach; Bernat et al). Indeed, my study

participants detailed many ways that student trauma affects their classrooms and how they try to make the space effective for all learners, even though they simultaneously worry that they might sometimes be too understanding, too accommodating—too *safe*. For example, James described one student who was dealing with a variety of past and current trauma and how James both desired to help this student succeed and feared that he was “winding up creating an individual set of rules for this one student.” Another instructor—Thor—questions whether making accommodations for traumatized students sometimes actually reinforces feelings of helplessness and dependency that trauma causes. Such concerns highlight teacher anxieties about psychological safety in the classroom and make it clear that writing instructors would benefit from more sustained and complex discussions regarding pedagogical responses to student trauma—including trigger warnings and safe spaces—and the resulting tensions.

This chapter contributes to the trauma-informed writing pedagogy I’m building in this dissertation by exploring one central tension illuminated by interviewees, scholarship, and public conversations about student trauma—the tension between promoting psychological safety in the classroom and maintaining academic rigor. After illustrating how safety intersects with key concerns about pedagogy in composition scholarship, I explore this tension by first acknowledging the important concerns raised by arguments *against* classroom psychological safety measures—especially trigger warnings—before illustrating how these arguments spread misunderstandings about psychological safety and trauma/distress in the classroom. I argue that clinical scholarship on trauma-informed care can address the gaps in educators’ understanding of trauma and safety in the classroom to provide principles that allow for a more complex negotiation of “not coddling students” while also being responsive to the realities of trauma and its impact on learning.

Psychological safety, inclusion, and affect in composition's pedagogical scholarship

Given the proliferation of articles on safe spaces and trigger warnings in public forums, it's surprising that there's not more sustained attention to the notion of safety in the classroom in composition scholarship, particularly in the last five years since trigger warnings and safe spaces have gained greater notoriety. However, as stated above, psychological safety remains a highly relevant concept for the work of composition instructors, a field long invested in effective pedagogy and inclusive teaching and increasingly invested in engaging public conversations about these issues (c.f. Adler-Kassner and Wardle). Below, I demonstrate where psychological safety has and could intersect with pedagogical scholarship in our field, in order to argue that exploring this concept—especially in the context of trauma—would deepen our understanding of how we engage difference in the classroom.

Specific references to psychological safety are minimal in composition scholarship, though (as discussed in the introduction chapter) discussions of trauma and working with traumatized students are more common and often imply concerns about safety. The field's older scholarship on trauma from the 1990s and early 2000s mentions or implies safety in articles about how engaging difficult personal experiences in writing classrooms can help survivors heal, and this literature provides some suggestions on how to minimize the risks of such personal disclosures (Campbell; Berman; Bishop and Hodges; Borrowman). Jeffrey Berman, for example, describes elements of safety he uses to minimize the risks of personal writing in his "risky writing classrooms," such as empathy, grading pass/fail, allowing anonymity, weekly conferences, and so on. More recent scholarship has continued to argue that instructors should foster psychological safety in the classroom, positing different ways to

think about what purpose safety might serve. For example, Adrian Curtin argues that writing classroom activities can allow both *thinking* (intellectual life) and *feeling* (“real” life) to coexist and provide a “safe” space for students to work through “unsafe” crises. Rob Fraunce discusses bodies and bodily performance of gender and sexual identity to argue that instructors must attend to safety, defined not just as physical safety, but also fostering a respectful environment for growth and play, intellectually and spiritually” (par. 6).

Other recent scholarship has instead criticized safe spaces in particular as inappropriate for the classroom, though not rejecting psychological safety measures outright. Liam Corley discusses classroom strategies aimed at welcoming, relevant, and excellent instruction that consists of discussions that are rarely “safe, comfortable, or predictable” so that students do not stagnate in safeness (par. 7). Jonathan Alexander and Jacqueline Rhodes demonstrate how “safe” discussion can flatten difference and keep students from having critical interactions with it. Thus, there exists a small tradition in the field for exploring how writing classrooms should and should not promote psychological safety, but beyond these notable examples that productively examine whether safety is a useful construct for the writing classroom, there has been little formal debate in major journals about the role safety might play in composition classrooms, nor has this scholarship considered clinical perspectives on safety, which is necessary (as I argue below and throughout this dissertation), especially in the context of student trauma.

Other more popular conversations in composition scholarship don’t explicitly address but still intersect with classroom psychological safety, particularly when viewing safety (as I do in this dissertation) as an ethical response to trauma survivors and trauma’s impact on learning. One such conversation involves difference and inclusive pedagogies designed to

respond to difference among students. Owing to our expanding exploration of identity and its dimensions, much scholarship about writing pedagogy has investigated the role of difference in the classroom and how we might ethically respond to and value it as instructors (Alexander and Rhodes; Williams; Brent; Winans; Cleary; Hart and Thompson; Webb-Sunderhaus; Kerschbaum; Winans; Lu and Horner; Micciche). For instance, Staci M. Perryman-Clark describes her strategies for fostering linguistic diversity by valuing the language practices of her African-American students, and in doing so, she critiques how the field's stated commitment to linguistic diversity has waned. Some current scholars further posit that many common instructor practices are exclusive of identity and difference (Powell; Poe et al, Perryman-Clark; Lu and Horner; Royster; Inoue; Price; Miller). For instance, in his College Composition and Communication award-winning book on anti-racist writing assessment, Inoue writes about how "white habitus" dominates academic discourse and instructors must engage deliberately anti-racist practices in order to sustain equitable classrooms. In fact, the tradition of understanding and valuing "different" student experiences can be traced back to the field's scholarship in the 1970s and 1980s, when open admissions policies meant a diversifying student body that necessitated new pedagogical theories and practices to account for who it was exactly that instructors were teaching and how those identities meant they know/learn differently (Shaughnessy; Brodkey; Mike Rose; Brandt; Sternglass). Thus, we might say attention to inclusive pedagogies represents a modern articulation of concerns that have long been a central part of the field's disciplinary identity. Trauma represents a salient and prevalent factor of difference/identity that deserves more explicit attention in literature on inclusive writing pedagogies, as does psychological safety, as a possible pedagogical response designed to be inclusive of that difference.

Another important area of the field's scholarship that could benefit from sustained discussions of psychological safety and trauma concerns pedagogy and affect, or how our field might apply more theoretical conversations about affect to a classroom context. Scholars are paying increasing attention to how affect impacts pedagogy and learning in writing classroom (Worsham; Ames; Winans; Gere; Borrowman; Lindquist). For example, Melissa Ames shares her experience teaching a class on post-9/11 narratives to explore the role students' emotions play in constructing accounts of national tragedies. Similarly, Amy E. Winans considers how emotion and thought are connected and argues for teachers to cultivate emotional literacy among students through "nurturing an engaged, ongoing critical inquiry regarding emotions, an inquiry that allows us to attend effectively to difference and identity" (152). These discussions thus examine how affect positively and negatively impacts learning and how teachers might productively engage affect in their pedagogies. However, in order to fully understand the diversity of ways affect impacts classroom activities and relationship, scholars must pay greater attention to how students' affective experiences *related to trauma* manifest (overtly and invisibly) in writing classrooms, particularly given that trauma is so pervasive among college students. Composition scholars on pedagogy and affect could particularly benefit from engaging clinical literature that discusses how traumatic affect might manifest in the classroom (e.g. through triggering, disruptive or resistant behaviors, apathy, and so on) and specific principles that foster psychological safety when facilitating classroom activities most likely to evoke strong affective responses.

Scholarly threads concerning pedagogy, such as those related to inclusivity and affect, therefore intersect closely with psychological safety in the classroom—which I forward in this dissertation as a concept informing inclusive pedagogical responses to student

trauma survivors and affective responses to trauma (experienced or witnessed) in the classroom. Pursuing these intersections with attention to clinical literature can supplement the field's current understanding of inclusive, effective teaching by more adequately acknowledging trauma's impact on educational experiences. To demonstrate how we might leverage these intersections in service of building the trauma-informed approach to writing pedagogy I propose in this dissertation, the rest of this chapter considers what concerns have been raised regarding psychological safety measures in the classroom and how these concerns—though valid and important—have also perpetuated misunderstandings and assumptions regarding psychological safety and measures designed to promote such safety, such as trigger warnings. I conclude by examining threads in clinical literature on trauma-informed care that could foster more complex understandings of trauma and safety to promote classroom environments that are responsive to the tensions between psychological safety and challenging students intellectually.

Psychological safety as a threat to academic rigor and intellectual freedom

Debates about psychological safety in the classroom reach their most contentious point in the trigger warnings debates, and for this reason, examining the objections articulated by trigger warning opponents helpfully illuminates key pressures underpinning larger discussions about student trauma and psychological safety in the classroom. Dozens of articles have expressed vehement opposition to trigger warnings as a threat that was spreading like a “virus” or “cancer,” despite the fact that very few universities made trigger warnings an institutional policy in response to students' calls for this measure (Gerdes). The outcry against trigger warnings was so strong in large part because educators were concerned

that trigger warnings—especially if *required* by university administration rather than being left up to individual instructors’ discretion—might oppose the educational rigor and intellectual freedom they felt was already under duress. Below, I sketch main threats trigger warnings posed (as indicated by the more than 50 articles written against them by mid-2014, according to Gerdes) and highlight what broader concerns about psychological safety in the classroom they raise, especially in regards to coddling students—concerns which must be accounted for in the trauma-informed writing pedagogy I’ll propose in my conclusion, but which also perpetuate inaccurate or insufficient understandings of student trauma and the goals of psychological safety.

Some educators worry that trigger warnings allow students to avoid meaningful discussions about difficult issues that, although causing discomfort, are necessary for the students’ academic and personal development. The American Association of University Professors (AAUP), for instance, wrote in its position statement against trigger warnings that they are “infantilizing and anti-intellectual” (par. 3). In particular, they argue that trigger warnings may discourage learning about controversial topics regarding sex, race, class, capitalism, and colonialism, which students must engage critically in order to “grapple with ethical problems they have never considered, and, more generally, expand their horizons so as to become informed and responsible democratic citizens” (par. 7). Marcie Bianco similarly calls trigger warnings an “anti-intellectual” measure that prevents students from encountering difference (par. 22; 7). While acknowledging that some of these discussions may be unsafe for students who have been traumatized (e.g. by racism or sexism), Cooper contends that learning about these topics is necessary for education, and teachers have a responsibility to resist students’ attempts to avoid being challenged; otherwise, we risk “creating a generation

of students who [...] are therefore ill-equipped to confront the challenging time in which we are living and prevail” (par. 6). After all, some argue, research has not demonstrated that trigger warnings provide any real benefit to survivors (Bianco; Essig; Halberstam; Bellet et al). Halberstam even argues that trigger warnings might worsen traumatic affect—contrary to their intention to protect—by causing students to internalize narratives of damage and feel more “damaged” than they would have otherwise.² Thus, the risks of anti-intellectualism do not seem worth the dubious benefits to these critics.

The critiques summarized in the previous paragraph also apply to other accommodations intended to make classrooms safer, a fact made particularly clear by my study participants. Participants were weary of how forgiving absences/late work or providing students alternative assignments might undermine the rigor of their courses, and though they all valued listening when students discussed personal distress, they also questioned whether this could distract from accomplishing course goals and take too much of their own emotional energy. For example, Thor, who has been teaching at universities for five years, believes there must be limits to how much attention an instructor gives to even traumatized students, because too much “helping” can reinforce feelings of *helplessness* caused by trauma instead of allowing the individual to move “from their place of trauma to a place where they feel that they can be capable and move forward.” This feeling largely stems from his own experiences in counseling, as well as his intended teaching ethos, in which he tries to act as a guide or coach more than an authority figure with his students. Most participants also stated that instructors’ primary responsibility is to educate, not counsel, and thus it’s necessary to set limits on some accommodations, including trigger warnings, in order to

² There is some limited clinical support for this position, which I discuss later in this chapter (see Bellet et al).

protect the integrity of the educational space and avoid encouraging students to “stay stuck” in their trauma (an idea articulated most clearly by Joseph, Cathy, and Thor, but at least mentioned by all but one participant). These feelings are somewhat supported by social work scholar Betty J. Barrett and sociologist Jack Mezirow, who have both argued that pedagogies that emphasize supporting students without sufficiently challenging them create dependent students who don’t learn effectively learn, rather than psychologically safe ones.

Beyond concerns about student development, instructors at the University of Louisville (UofL) and beyond worry about whether institutional requirements about psychological safety measures in their classrooms limit their own professional opportunities and autonomy. Kendall Gerdes illustrates that fears about the erosion of instructors’ intellectual freedom are perhaps the most notable commonplace in public conversations about trigger warnings. Scott A. Bass and Mary L. Clark call trigger warnings (and, by implication, safe spaces) “one of the greatest threats to the university as we know it” because it endangers “assurances of intellectual freedom, about what can and cannot be discussed” (par. 1). They fear that “If we deny one speaker, restrict one book, or limit one faculty member, we have abandoned the very purpose of our institutions” (par. 8). This concern is compounded by the fact that, as many authors and my study participants pointed out, it’s impossible to anticipate every possible trigger, and consequently, the list of topics that require a trigger warning might extend beyond reasonable limits, possibly putting instructors at more risk of disciplinary action. In fact, both Bianco and the AAUP worry that administrative policies requiring trigger warnings would unfairly affect instructors with the least job security—adjuncts and other non-tenure-track instructors—by allowing students to

file complaints that effectively censor instructors' course materials under penalty of being fired or receiving reduced course loads.

Others are less alarmed by the threat to job security and more concerned about the day-to-day impact of trigger warnings and other psychological safety measures on professional boundaries intended to protect teacher's time and energy. For instance, Jenny Jarvie writes that trigger warnings "risk opening the door to a never-ending litany of requests," even frivolous ones, such as a petition by Wellesley College students against a sculpture of a man in his underwear (par. 14). This category of concern resonated with more of my interview participants, especially in regards to other "safe" practices they try to implement. For instance, Dr. Von discussed the need for boundaries with regard to hearing students' trauma stories, because, although compassion and listening are important, "You don't wanna be emotionally blackmailed. You don't ever wanna be put in a position in which that emotion affects the grade you give." Dr. Von learned this lesson over almost 30 years of teaching and encountering all kinds of distressed students. Cathy, who has been teaching more than 30 years, acknowledged a similar tension where some students become "excessively needy" and can take up too much of the instructors' time—something she had to learn to navigate as a younger teacher when a distressed student attended her office hours so often just to chat, that she was unable to give full attention to other aspects of her teaching. A long-time literature faculty member, James, worried about whether having so many accommodations for one particularly distressed student has created unfair practices that are not ultimately serving the students' education. Though this concern about boundaries was most often articulated by more experienced teachers, younger teachers like Kathryn, who has been teaching for about 9 years, report sometimes limiting their engagement with student

distress due to their own emotional exhaustion, especially when balancing their own graduate studies and personal issues alongside their teaching. Thus, participants across disciplines, experience levels, and teaching styles find that psychological safety measures, though useful for portraying themselves as caring teachers, simultaneously put pressure on professional boundaries in ways that make participants feel uneasy.

Finally, opponents of trigger warnings and safe spaces sometimes worry that these measures might threaten foundational aspects of American democracy and thwart efforts against injustice. Some cite the valuable historical lessons about injustice that might be discouraged as trigger warnings proliferate. For instance, Cooper shows lynching photographs and *Fruitvale Station*—a film about an African-American man who was gunned down by a BART police officer—in her classes and worries that trigger warning requirements might ultimately stigmatize these texts, effectively discouraging her from using them at all. Several columnists worry that seminal novels such as *Things Fall Apart* by Chinua Achebe or *Crime and Punishment* by Fyodor Dostoyevsky might be un-discussable if trigger warnings were to proliferate. Though acknowledging that texts and topics like these are indeed painful and anxiety-producing, instructors nevertheless argue that encountering painful texts is necessary in order to help society address historical and present injustices. As Cooper puts it, “Having the discussion may be difficult for students, but it creates a context for inclusion that is absolutely necessary, especially in a nation so deeply invested in understanding itself as democratic” (par. 8). Trigger warnings, on the other hand, forward what Jarvie calls “an over-preoccupation with one’s own feelings—much to the detriment of society as a whole” (par. 15).

Educators also cite more subtle ways that trigger warnings might reinforce rather than combat injustices. For instance, Halberstam argues that trigger warnings usher in “the re-emergence of a rhetoric of harm and trauma [could cast] all social difference in terms of hurt feelings and [divide] up politically allied subjects into hierarchies of roundedness” (par. 4). On the other hand, Essig argues that trigger warnings are directed toward protecting *women*, especially female survivors of sexual assault; therefore, calls for trigger warnings reinforce “the figure of the lady: delicate, pure, and vulnerable (and always in need of protection)” (par. 9). In fact, there is some limited clinical evidence that trigger warnings may slightly increase “soft stigma” toward trauma survivors, leading certain subsets of readers to perceive trauma survivors as unable to function in ways other people can (Bellet et al). Others suggest that trigger warnings may prescribe how individuals are supposed to respond to difficult material rather than allowing the diversity of responses necessary for critical discussion about injustice.

Trigger warnings thus evoke larger concerns among diverse scholars and faculty about whether psychological safety measures in the classroom might not serve students in the long run by preventing them from learning to be uncomfortable and engaging difficult issues and by placing limitations on how instructors are able to teach these lessons. In other words, this discussion foregrounds concerns that protecting or helping students might actually coddle them, stunting their growth into mature, well-adjusted adults who contribute the health of American democracy. Educators also fear that coddling could endanger the professional standing of instructors and, ultimately, intellectual freedom, as it compels instructors to accommodate even the slightest student sensitivity. Though the intensity of these objections often approaches a “slippery slope” mentality, they are nevertheless valid

concerns that must be acknowledged in building a trauma-informed writing pedagogy designed to enhance—not limit—student learning and support for instructors.

Misconceptions about psychological safety illustrated by the trigger warning debates

While the previous section highlights dangers raised by those more skeptical of classroom psychological safety, objections to trigger warnings also reveal substantial misconceptions about students and trauma that are unproductive for effective teaching. Drawing largely on clinical literature, this section discusses what knowledge about student trauma and psychological safety the aforementioned fears have ignored or misunderstood to show why—despite potential dangers—psychological safety in the classroom remains an important concept for fostering inclusive teaching with regard to student trauma.

When authors writing against trigger warnings argue that they shelter students from discomfort or critique, they often assume that students are unable or unwilling to be made uncomfortable or to deal with difficult, painful material, without the prodding of the instructor (Bass and Clark; Bianco; Cooper; Essig; Jarvie). This notion creates several problems, a primary one being that it conflates triggering and discomfort, though these are not the same thing, according to clinical literature. The Substance Abuse and Mental Health Services Administration (SAMHSA) defines a trigger as “any sensory reminder of the traumatic event” that can cause intense flashbacks in which an individual “is reexperiencing a previous traumatic experience as if it were actually happening in that moment” (*TIP 57 68*). Angela Carter describes the difference this way:

Experiences of re-traumatization or being triggered are not the same as being challenged outside of one’s comfort zone, being reminded of a bad feeling, or

having to sit with disturbing truths [...] To be triggered is to mentally and physically re-experience a past trauma in such an embodied manner that one's affective response literally takes over the ability to be present in one's bodymind. (4)

Similarly, general stress and discomfort are not exactly the same as traumatic stress. Drawing on the *Diagnostic and Statistical Manual*, clinician Abigail Powers Lott defines traumatic stress as stemming from direct or indirect exposure to actual or threatened death, serious injury, or sexual violence through “terrible events” that are “generally outside the range of daily human experience [and] are emotionally painful, intense, and distressing” (par. 4). These experiences can develop into Post-Traumatic Stress Disorder—a particularly acute though relatively rare form of traumatic stress—in which individuals may re-experience the trauma in distressing ways, become hypervigilant, develop negative beliefs about themselves or others, and/or experience pronounced mood alterations (par. 6). However, even those who do not develop PTSD may still experience depression, substance abuse issues, and anxiety disorders, among other symptoms (par. 7). Students with traumatic histories are thus more likely to exhibit disruptive/resistant behavior in class, drop out of classes/college, have lower grade point averages, have trouble adjusting academically and emotionally, have trouble connecting with peers or the instructor, and experience retraumatization³ and other psychological cognitive problems that might impede the students' full engagement with course material (Pritchard et al; Carello & Butler; SAMSHA). And this only traces psychological, emotional, and behavioral factors affecting learning. Students may also face practical concerns related to trauma, such as decreased financial and social support (e.g.

³ According to SAMHSA, retraumatization refers to not only “the effect of being exposed to multiple [traumatic] events, but also implies the process of re-experiencing traumatic stress as a result of a current situation that mirrors or replicates in some way the prior traumatic experiences” (xviii).

when leaving an abusive family or romantic relationship), increased time spent on activities to deal with trauma (e.g. going to court or counseling, processing insurance claims, health care visits), and so on.

Thus, when authors equate triggering with discomfort, curling up in a ball and sobbing (Essig), or personal frailty (Jarvie), they oversimplify and misrepresent trauma responses and portray trauma survivors as over-sensitive and weak, needing a push in the direction of emotional maturity, rather than viewing them as already resilient. Clearly, to describe traumatic stress and triggering simply as discomfort would be inaccurate. Discomfort appears within the normal range of human experiences and human capacity for processing difficult experiences and material. Indeed, as many instructors have noted, discomfort may even be a necessary precursor to meaningful learning. Traumatic stress, on the other hand, presents an obstacle to learning and can possibly cause long-term negative impacts on an individual's physical, psychological, emotional, social, and spiritual well-being (SAMHSA). Though clinicians acknowledge that completely avoiding materials or situations that remind survivors of trauma is counterproductive to healing (Bellet et al), they also note that exacerbating traumatic stress leads to worsening of symptoms and the possibility of retraumatization—in other words, harm, not learning (SAMHSA; Carello and Butler; Dass-Brailsford).

Related to this oversimplification of triggering and traumatic stress is the oversimplification of possible classroom responses to student trauma. Trigger warning debates overemphasize the role of such warnings in a much larger issue regarding how to ethically respond to student trauma as educators. The authors cited in the previous section posit students' reactions to retraumatizing material as a problem to be solved merely by, in

Essig's words students "putting on their big-girl panties" or "big-boy tighty whities," as if there are no other options besides giving trigger warnings or, to use the colloquial expression, sucking it up. However, this public focus on debating trigger warnings (and safe spaces) overshadows the fact that there are many approaches to promoting classroom environments that are healthier for trauma survivors, as I argue throughout this dissertation and as evidenced by the range of ways interview participants attend to psychological safety in their classes. In other words, too much attention to trigger warnings risks oversimplifying trauma's impact on learning to only one possible reaction (triggering) and ignoring the diversity of approaches for responding to that impact.

The overemphasis on trigger warnings in public debate also risks reducing psychological safety in the classroom to an issue of how students might respond to disturbing texts or discussions, missing the complexity of circumstances that my participants noted shape their understanding of safe classroom practices. Daniel, for example, recalls a writing assignment in which a young woman disclosed an abusive past relationship and how he felt compelled to encourage the student to cultivate healthy boundaries in her relationships, and he has encountered many such scenarios over his more than 20 years of teaching, regardless of whether his assignments asked for such personal disclosures. Cathy, on the other hand, considers safety less in terms of specific, trauma-related disclosures, and more holistically as a pedagogical choice—that is, whether her grading practices, in-class activities, and relationships with students supports students' ability to develop confidence in their writing and be honest with her as the instructor. This stems from her commitment to viewing her students as "whole people," a pedagogical positioning taught to her long ago by her first composition director at UofL. Focusing instead on *instructor* psychological safety, Dr. Von

reflects on how Title IX mandatory reporting rules—though not without negative consequences on students—supports her need to establish boundaries with students and protect her emotional health, because she can make a report to a person with authority to help the student instead of feeling obligated to do so herself. Conversely, Jack, a graduate student with similar teaching experience to Kathryn, fears that the same mandatory reporting rules that make Dr. Von feel more protected might force teachers to break trust with their students, even though trust is a central aspect of many professors' teacherly ethos (including Jack and several other participants). This difference perhaps speaks to Jack's background in graduate courses in women's and gender studies that questions how mandatory reporting might sometimes discourage victims from seeking help. I include so many examples here in order to show how there are many more complex topics that matter to instructors across teaching backgrounds and experience levels than trigger warnings and that we might productively foreground when considering trauma and safety in the classroom.

Another misunderstanding circulated by the trigger warning debates is the notion that trauma is good and benefits education. Essig, for example, claims that learning is not only painful, but “ugly and traumatic,” and that “real education” requires these things (par. 8; 11). Such assertions appear to function on imprecise and largely unproductive definitions of trauma. The popular notion that “learning itself is traumatic” equates trauma with an existential kind of pain. That is, education is traumatic for students because it causes them to come face-to-face with uncomfortable truths and to undergo transformation in the process, a transformation that is emotionally painful but ultimately beneficial. As I discussed in the introduction, composition literature privileges perspectives on trauma as existential crisis or as a metaphor for transformation, but this definition belittles literal traumatic experiences by

equating them with routine challenges. This inaccuracy is made clear by comparison with clinical definitions. SAMHSA defines trauma as experiences, events, or circumstances that cause intense physical and psychological stress reactions by threatening physical and/or emotional harm (*TIP 57* xix). Trauma thus “has lasting adverse effects on the individual’s physical, social, emotional, or spiritual well- being” (SAMHSA *TIP 57* xix). It has in common with popular definitions the idea that an individual or group experiences crisis and transformation, but the impacts of trauma are not defined as good and necessary. Of course, clinicians and counselors note, individuals are incredibly resilient and able to make good come out of tragedy, but that does not make trauma itself inherently good and educational. Furthermore, the consequences of trauma, according to clinicians, are not simply intellectual or emotional, but physical, social, and spiritual as well.

Consequently, Carello and Butler critique these assumptions of trauma as an educational value. Though they acknowledge that trauma is endemic in current society, they caution against “marching it into the classroom to be prodded, provoked, and endured,” which is less likely to “transform trauma” than “to potentially recapitulate it” (163). In other words, we might agree that “teaching about trauma is essential to comprehending and confronting the human experience,” but we must also take care that we “honor the humanity and dignity of both trauma’s victims and those who are learning about them” and “proceed with compassion and responsibility toward both” (Carello and Butler 164). Assumptions of trauma’s good-ness for education, they and other clinicians claim, do not create a classroom environment conducive to the mental and emotional resilience that fosters effective learning.

A related concern is how misunderstanding traumatic stress can serve to “other” trauma survivors and portray their perspectives/responses as extraneous to the learning space.

For instance, drawing on Margaret Price's *Mad At School*, Carter argues that, even though higher education has made great strides toward accommodation and inclusion for those dealing with mental illness/disability—which can sometimes result from/in trauma—there remains a tenacious though implicit notion that mental illness/disability and associated emotional responses are contrary to the “rational realm” of the classroom, and “crazy” students are thus referred outside the classroom to external resources (e.g. counseling centers, disability offices, tutoring centers) but their unique perspectives are not simultaneously welcome. Though such referrals may be appropriate, Carter argues that the persistent stigma surrounding mental illness/disability and trauma responses excludes such students from meaningful membership in classroom communities and contributes to drop-out rates of 56.1% for students with "mental illness" and 23.6% for students "serious emotional disturbance" (9).

Such exclusionary attitudes toward students experiencing traumatic stress are evident in the AAUP statement against trigger warnings. The statement concludes that “cases of serious trauma should be referred to student health services” after they are explicitly disclosed to instructors, rather than instructors pre-emptively anticipating trauma in their course design (par. 9). It further asserts that students who have experienced trauma should disclose their trauma to instructors in advance and request specific accommodations, but accommodations should not affect “other students’ exposure to material that has educational value” (par. 9).⁴ These suggestions offer some practical utility as strategies for

⁴ It's worth noting that this suggestion does not exactly match what happens at UofL. Students are instead encouraged to consult with the Disability Resource Center or the Counseling Center to request specific educational accommodations, a practice that is designed to help protect the student's confidentiality and avoid forcing them to disclose their experiences to their instructors. However, even this structure does rely on students being in a place where they are able and comfortable enough to disclose trauma for the purposes of seeking the accommodations that can optimize their learning experience.

accommodating traumatized students, but AAUP overlooks much information about the experience of these students. For example, there are many reasons trauma survivors might not disclose their trauma and potential triggers to instructors (e.g. lack of trust, fear of their ability to regulate emotions, embarrassment or shame, being unaware of what their triggers are). Second, it assumes traumatic stress is an atypical student experience that requires only occasional accommodation, even though studies show that the majority of college students have experienced trauma, particularly females and racial minorities (Frazier et al; Pritchard et al; Vrana and Lauterbach).⁵ And third, it stigmatizes survivors as atypical members of classroom communities whose inability to emotionally regulate might get “in the way” of other students’ learning, rather than treating them as resilient individuals whose perspectives might enrich all students’ classroom experiences.

Another way this literature is problematic is that it villainizes and ostracizes students, sometimes misrepresenting the nature of their requests for accommodation. This stems from a prevailing assumption that trigger warnings are an “opt-out” strategy—where students avoid material that makes them uncomfortable—rather than an “opt-in” strategy—a way to shape classroom space so that all students can participate more fully (Carter). Rather than making trigger warnings an issue of access, this perspective simplifies it into an issue of students’ desire to avoid being challenged. One particularly compelling example comes from Essig’s article, in which she decries a Rutgers’ student newspaper op-ed piece as “absurd” because it calls for trigger warnings on “nearly everything” (3). In reality, the student who wrote the piece acknowledges *both* the dangers of censorship as well as the potential damage trauma survivors might face as a result of particularly graphic texts (Wythe). As a

⁵ These studies use a definition of trauma that is similar to or slightly narrower than the definition (drawn from SAMHSA) that I use in this dissertation.

compromise, the student author proposes a variety of ways instructors might alert students to potentially retraumatizing material, not so that they can avoid the material altogether, but so they can avoid being blindsided by it (Wythe). The suggestion is a far cry from the attack on intellectual freedom and educational discomfort Essig makes it out to be, and she's not the only author who has misrepresented students' requests for trigger warnings and other safety measures as simply misguided altruism or desire to avoid the discomfort of education. Instead, it's possible to understand the goal of psychological safety in the classroom as one of access and inclusion pursued in partnership with students, allowing all students to more fully "opt in" to classroom activities, even if we might disagree about the best methods for achieving that goal (Carter).

Finally, critiques of trigger warnings have oversimplified intellectual/academic freedom, raising important questions about what intellectual freedom means for today's colleges, and, specifically, whose intellectual freedom we're protecting. Gerdes notes that academic freedom is a long-held community value among conservative and liberal intellectuals alike, and she defines it as "a partly legal and partly folk doctrine that some argue should extend to cover not only research but also what college teachers may teach and how they may teach it" (6). Instructors' academic freedom is thought to serve not only instructors, but also their students, because it allows students to engage a greater diversity of ideas and modes of learning. The debate over trigger warnings and safe spaces thus brings instructors' academic or intellectual freedom to the forefront while largely ignoring *students'* right to intellectual freedom. As Gerdes argues:

And yet the problem with appeals to academic freedom in the debate over trigger warnings is that such appeals necessarily pit the rights of instructors

against the rights of students. It's not uncommon for students requesting accommodations (even legally required accommodations) to be met with resistance and even out-right refusal if their instructors feel the requests threaten their authority and academic freedom in the classroom (for a recent example, see Flaherty, "A Hill"). But for students, especially advocates of trigger warnings, the practice of academic freedom is inseparable from the accessibility of a class and its curriculum." (6)

Gerdes thus highlights the conflicts between instructors' freedom (to choose the texts/activities they feel best represent what they want to teach students) and students' freedom (to learn in accessible classrooms that accommodate their full participation). Therefore, this debate has not adequately considered whose intellectual freedom is being protected in the classroom.

Growing pains: how clinical scholarship can help writing instructors navigate student psychological safety

The challenge, then, becomes "not coddling students" without minimizing the significance (and prevalence) of student trauma's impact on learning and classroom relationships. Put another way, how do writing teachers minimize the possibilities of retraumatization in order to maximize the effectiveness of the learning space, while also not coddling students by assuming they need our protection and are unable to work through discomfort and pain? Clinical literature on trauma, retraumatization, and empowerment can help us navigate this question without relying on limiting/inaccurate understandings of

trauma (and triggering) and by forwarding flexible guiding principles regarding psychological safety that can be adapted to diverse classrooms and teaching styles.

Leaning into the principles and goals of “trauma-informed teaching”—a re-purposing of Trauma-Informed Care⁶ for educational contexts—as proposed by clinicians can help us navigate ethical complexities regarding student trauma. As previously mentioned, Carello and Butler define trauma-informed teaching as teaching that understands “how violence, victimization, and other traumatic experiences may have figured into the lives of the individuals involved and [applies] that understanding the provision of services and design of systems so that they accommodate the needs and vulnerabilities of trauma survivors” (156). Education (*not* therapy) is still the primary goal of trauma-informed teaching, but student psychological safety is a necessary condition for it. In this framework, pedagogical practices anticipate the presence of trauma survivors, not to infantilize or protect students but to create learning conditions that are most fruitful for *all* learners. Trauma-Informed Care has much to say about practices that promote physical, psychological, and emotional safety and anticipate and avoid re-traumatizing behaviors/processes while still creating opportunities for survivors to regain a sense of control, inner strength, and competence—necessary components for trauma resilience. Such practices serve trauma-informed teaching’s educational goals—and respond to the concerns of trigger warning opponents—because the goal is not to coddle, protect, or remove all challenges, but to support survivors’ self-reliance and skill development—to *learn*, and to mature as adults—in an environment that distinguishes

⁶ As a reminder, Trauma-Informed Care was defined in the introduction chapter an approach to service that acknowledges the pervasiveness and impact of trauma and responds to this impact by emphasizing physical, psychological, and emotional safety; creating opportunities for survivors to regain a sense of control and inner strength (“empowerment”); and anticipating and avoiding re-traumatizing behaviors and processes (SAMHSA TIP 57 xix).

between *harm* and *discomfort*. That is, trauma-informed teaching aligns with both Barrett's and Mezirow's calls to pedagogies that balance support and challenge.

One concept in Trauma-Informed Care that is particularly useful for trauma-informed teaching is empowerment. Empowerment in a clinical context is “a process whereby the social worker engages in a set of activities with the client [...] that aim to reduce the powerlessness” that trauma creates (Soloman, qtd. in Vaughn and Stamp 155). This process of empowerment involves mutual respect for the knowledge that both client and staff bring to the relationship, and activities that build on clients' strengths so that their “sense of inner strength is increased” (Elliott et al 466). Such interventions are *necessarily* collaborative with the survivor and take into consideration the survivor's life experiences, cultural background, social supports, and other ecological factors (Elliott et al.; Dass-Brailsford). Key characteristics of empowerment according to clinical literature—based on decades of research—includes: helping individuals identify and build on their strengths/resources, instead of focusing on perceived deficits; privileging giving information, choices, and opportunities for collaboration, as much as appropriate; working toward self-efficacy, or an individual's belief in their own ability to successfully achieve goals/personal change; acknowledging cultural plurality and possible personal biases; believing in client's ability to solve their own problems; and building skills of self-reflection, problem solving and decision making, effective communication, and authentic listening (SAMHSA *TIP 57* 124-125; Dass-Brailsford). These practices aim to expand individuals' resources, support networks, and sense of self-efficacy so that they “become less and less reliant on professional services” and are able to contribute to the success of others (Elliott et al. 465-466).

Of course, the relationship between teacher and student doesn't exactly match the relationship between clients and service providers articulated in Trauma-Informed Care, but looking at empowerment through a trauma-informed *teaching* lens indicates some important correlations and distinctions. Instructors work toward expanding students' resources and skills in the content area of their classes, and writing instructors in particular are often committed to promoting skills of self-reflection, problem-solving, effective communication, and authentic listening (as evidenced by pedagogical scholarship and conference themes) that translate into many contexts. At many institutions, including UofL where all of my interview participants teach, outcomes for writing courses include building the students' confidence in their own writing strengths and ability to identify resources and support networks for improving their writing, rather than relying on negative perceptions of themselves as writers based on past experiences. Much composition literature has further advocated for mutual respect and collaboration in teacher-student and student-student relationships, as well as learner-centered pedagogical strategies in which instructors focusing on providing students with information and options that they can actively take ownership over in their own writing. Furthermore, composition literature on knowledge transfer in particular has a stated goal of helping students to become less reliant on the instructor telling students what they need to know and instead giving them tools for figuring it out as they move through other educational and professional contexts. These are just a few of the ways the goals of empowerment in trauma-informed teaching correlate with the goals of writing instructors, which indicates that, when instructors intentionally infuse these goals/practices with an understanding of trauma, there is much potential for trauma-informed teaching that promotes

the sense of self-efficacy that leads to trauma resilience while still treating educating as the primary goal.

Of course, any conception of empowerment is not without conflicts and ethical dilemmas (as evidenced by the fraughtness of this term in writing studies scholarship). For instance, scholars note that there are inherent power imbalances in any relationship, depending on factors such as cultural privilege/oppression, relative relational authority and access to resources, and so on (Elliott et al; Vaughn and Stamp). Others wonder whether it is even possible to be involved in someone else's empowerment or if such actions meant to "help" only further take power and control away from the person you're seeking to empower. Still others wonder how to account for diversity in what makes people feel empowered, as well as how conceptions of empowerment focus on safety of survivors without adequately acknowledging the potential for service providers—who may be trauma survivors themselves—to experience compassion fatigue, secondary trauma, or retraumatization (Barrett; SAMHSA). More specific to trigger warnings, there is some evidence from Bellet et al that such warnings preceding written texts, though intended to be empowering, may increase individuals' sense that they are more vulnerable to emotional disturbances caused by trauma, a belief which is risk factor for developing PTSD (though that effect was small and limited to participants who hadn't experienced trauma before and already believed that words have the power to harm). Clinical scholarship on empowerment seeks to make such dilemmas explicit and to expect nuance and complexity in how empowerment principles might play out in individual cases. This complexity only further serves to make empowerment (as clinicians define it) a fruitful concept for thinking about the complexities

of building safe relationships and spaces in which all participants are encouraged to advocate for themselves and build a greater sense of competence, connection, and inner strength.

In addition to what trauma-informed teaching and related empowering strategies *do* mean in practice, it's important to acknowledge what's absent from the above definitions. First, the clinical literature on empowerment does not advocate for removing the discomfort caused by engaging difficult material or being critiqued. That is, safety in the classroom does not have to be understood as the absence of stress or judgment, but avoiding specifically harmful or retraumatizing practices and promoting skills that allow students to encounter stress, judgment, or distress with greater resilience. Second, safety from an empowerment perspective does not have to account for every possible trigger, every possible perceived “threat” in the classroom, or every possible means of empowerment for each individual. However, in its reliance on choice, collaboration, and connection, this version of empowerment defines safety as all individuals being open and willing to learn about what they and others experience as safe and/or potentially retraumatizing, as well as providing opportunities to voice their own psychological safety needs. Third, safety does not have to mean being sheltered from distressing texts or discussions; in fact, as Bellet et al point out, avoiding stressors completely is a known factor that limits healing. Rather, classroom psychological safety means carefully constructing a supportive environment that acknowledges—rather than pathologizing— affective responses to education, an environment in which students’ recovery from prior trauma is not harmed during this process. Fourth, safety cannot be achieved through practices that threaten the intellectual freedom of instructors and the integrity of their courses, because, as SAMHSA argues, it will be difficult for staff—or in the case of the classroom, teachers—to support the empowerment and safety

of others if they don't feel their own empowerment and safety is supported. Thus, trauma-informed teaching's perspective on empowerment and safety does not have to exhibit the real concerns cited by professors critiquing trigger warnings and safe spaces, but it does identify principles and practices that create a supportive, non-retraumatizing environment in which students can experience the discomfort of learning.

In sum, trauma-informed teaching responds to the issue of student psychological safety in the classroom by first keeping the following goals in mind:

- Acknowledge how violence, victimization, and other traumatic experiences figure into individuals' educational experiences, and recognize that psychological safety is a necessary condition of effective learning.
- Develop a collaborative relationship between instructor and student where, as much as appropriate, goals and safety can be negotiated, even if implicitly.
- Respect the knowledge, experiences, and cultural background students bring to the classroom environment, particularly the knowledge they bring about their own learning and life experiences.
- Aim for course content and activities that increase students' sense of competence so that students are increasingly less reliant on the instructor and are able to contribute to the success of others.

As acknowledged in clinical literature, the principles identified above might translate to diverse practices depending on the context and individuals involved. I elaborate on some of these flexible practices in my concluding chapter and Appendix 2, but here, I offer some reflective questions to introduce ways the above principles might translate to writing pedagogy:

- What definition of safety do I use in my classroom? What teaching practices already implement this definition of safety and minimize the possibilities of retraumatization in all dimensions of the class, including:
 - Chosen texts
 - Discussion
 - Partner/Group
 - Formal and Informal Writing
 - Instructor and Peer Feedback (including assessment)
 - Physical Space of Class and Individual Conferences
 - Use of Technology and Media
- What aspects of my teaching might combat or reinforce stigma related to trauma and mental illness, and how can these practices become more trauma-informed?
- What aspects of my teaching my increase students' ability to advocate for themselves and their needs and identify productive resources and social connections for accomplishing their goals professionally and personally (skills that promotes trauma resilience and empowerment)?
- In what ways can I include activities that foster collaboration and mutual respect among all members of my classroom?
- How can I make my classroom more accessible to the needs, vulnerabilities, and strengths of differently-abled, diverse learners? How can I create policies that assume and value the presence of trauma survivors, instead of othering them to creating unfair obstacles for them?

- What institutional support already exists to engage in trauma-informed teaching practices that promote psychological safety? What institutional supports are needed?

Trauma-informed teaching and empowerment therefore offer nuanced understandings of psychological safety as a negotiation, a process founded on research-based understandings of trauma and safety that seek to create a supportive—though not necessarily “comfortable”—learning environment. Education as the primary goal of this pedagogy serves the goals of empowerment by reducing students’ sense of incompetence or helplessness and encouraging them to recognize and use their own strengths in service of personal change, healing, and the success of others. Strategies for applying these principles into the specific pedagogical practices that define the trauma-informed writing pedagogy I’m building will be detailed in the concluding chapter and Appendix 2.

Conclusion

In this chapter, I have demonstrated how educators’ often vehement resistance to trigger warnings and other measures to support psychological safety in the classroom productively illuminate some important concerns regarding the needs to challenge students, protect instructors’ intellectual freedom, and avoid the censoring of texts/activities that contribute to students’ abilities to identify and combat injustice. However, I have also shown how these productive critiques are made in terms that oversimplify or misrepresent trauma and safety. Clinical literature on trauma-informed care can correct these misconceptions and offer principles underpinning psychological safety and empowerment that can forward a trauma-informed approach to writing pedagogy that supports students’ safety without

preventing them from being challenged to critically engage uncomfortable ideas. In short, this chapter has explored how classroom psychological safety does not have to equal coddling students.

Implementing the clinical understandings of trauma and empowerment as outlined above are crucial for the field to be effective, inclusive teachers. However, though my focus in this project is implementing psychological safety strategies to support student psychological wellbeing and academic success, these efforts by administrators and individual faculty cannot disregard concern for *instructors'* sense of safety, issues that are taken up in the following chapters. Chapter 2, for instance, discusses the importance of instructor self care, professional boundaries, and attention to compassion fatigue. Chapter 3 discusses the necessity of institutional support for trauma-informed teaching, including policies and processes that help instructors feel supported as they seek to support students. The conclusion and Appendix 2 present concrete strategies for developing policies, training, and other materials that attend to instructor psychological and professional wellbeing while implementing strategies primarily designed to support student trauma survivors in the classroom.

CHAPTER III

“TEACHERS AREN’T THERAPISTS”: EXPLORING COMPASSION, BOUNDARIES, AND THE ROLE OF THE WRITING INSTRUCTOR

Um, we’re told a lot, “We’re not their counselor” or anything like that, so then, if they do open up, like, “Handle it the best you can,” but, like, “Don’t feel bad, because you’re not trained,” but then it’s like, “But I still feel bad. This is a really tough situation.”

—*Lauren*

I think a lot of writing instructors shy away at that moment [of student trauma disclosure], because they’re saying, you know, “I’m not a counselor. I don’t wanna deal with this.” I’m not a counselor, but one of the things—one thing [composition scholar Michelle Payne] found, was that, students are often writing about these things—they have counselors. They don’t want counseling at that moment. They want to write about this. They wanna be heard. And I thought that insight was incredibly helpful to me, and gave me a way to talk to students about it when things like that came up.

—*Joseph*

Oh god this was a long time ago. He was a creative writing student . . . his mom had just died . . . (pause) and he just wanted to come to my office hours and talk. Hang out and talk. And he wasn’t talking about anything, um, personal—you know, it wasn’t like therapy. He just kind of wanted the contact. Uh . . . (pause) and it was way too much for me. I had to go hide in the bathroom.

—*Cathy*

That’s just always something I feel strongly about, is that, as teachers, we need to figure out ways to help our students that maybe doesn’t always follow the “right” path. Um, although you have to be careful about that too, cause, like, obviously we aren’t therapists, and we can’t take on the emotional labor that sometimes that is. Um, but I also think that we should value what students tell us, more than, getting some sort of third-party authentication for something, and then you can help them.

—*Kathryn*

The argument that “writing teachers aren’t therapists”—a formidable critique against therapeutic models of writing and classrooms—appeared decades ago in composition scholarship. As the above quotes from UofL professors demonstrate, this oft-cited truism remains a touchstone for current composition instructors supporting a range of responses to student trauma and how instructors should relate to students. Yet composition scholarship has seldom unpacked what it means for teachers to both “not be therapists” and still be tasked with responding to student trauma that often manifests in the classroom. This responsibility particularly impacts writing instructors, who often teach several sections of the entry-level writing classes that most university students are required to take upon entering college, regardless of major. At UofL, instructors in the English department work with a higher percentage of UofL students than many other departments; for example, 17% of all undergraduates enrolled at UofL in Fall 2016 were taking a class in department’s Composition Program, and that proportion is similar every semester. Furthermore, because writing classrooms have smaller maximum class sizes (22 to 26 at UofL) and more small-group and one-on-one instruction than many other courses, issues of trauma are more likely to become explicit (Borrowman; MacCurdy). Writing instructors at UofL and beyond thus find themselves interacting with and responding to student trauma in ways perhaps not supported by simple declarations that they aren’t therapists.

In this chapter, I explore the conflicts between therapeutic models of writing instruction and the “teachers aren’t therapists” response to such models in order to continue building the trauma-informed pedagogy I advocate for in this dissertation. I first trace the history of this notion in composition’s pedagogical scholarship since the 1980s and how it impacts writing instructors today, as seen through my interviewees. I then explain the most

salient concerns raised by critics of therapeutic models of writing instruction before illustrating the misconceptions about student trauma in the classroom that these critics perpetuate. The chapter concludes by drawing on clinical literature to show how we might move beyond both “writing as therapy” and “teachers aren’t therapists” to, in the words of Wendy Bishop, “understand and prepare to be what we are” (512).

Therapeutic models of writing instruction in composition scholarship and pedagogy

That writing teachers are “not therapists” is now a commonplace theme in composition pedagogy that productively critiques pedagogical practices aiming to promote healing/therapy in the writing classroom, pedagogies that were most prevalent in the 1990s. However, despite being discussed for almost 50 years, exchanges between “writing as therapy” and “teachers aren’t therapists” perspectives haven’t extended much beyond this binary framing of the issue, and in the process have created a confusing and conflicted relationship between composition and therapy. In this section, I trace the history of these exchanges about therapeutic models of writing instruction to highlight the key concerns and touchstones underlying the debate. I further examine how participants’ interviews illustrate that similar concerns and ambiguity are still prevalent today, in order to demonstrate why we need a deeper understanding of connections between writing and therapy informed by clinical scholarship, to better support teachers as they interact with student trauma.

Though the idea of therapeutic writing pedagogy appeared in the field’s major journals as early as the 1970s (Margolis; Arbur; Duke), therapeutic models were most popular during two eras of composition scholarship: the late 1980s and 1990s and the few

years after Sept. 11, 2001.⁷ First, pedagogies that emphasized “writing as healing” reached their highest frequency in composition in the late 1980s and the 1990s, inspired by the expressivist and personal writing movements and taking various forms throughout these decades. More tentative calls for “writing as healing” approaches began in the 1980s. For instance, in 1982, James Moffett theorized connections between writing, meditation, and therapy, positing that both writing and therapy “aim at clear thinking, effective relating, and satisfying self-expression,” among other cognitive skills (234). Thus, though asserting that therapeutic benefits are “nothing for a school teacher to strive for” because they are not psychiatrists, Moffett forwards a writing pedagogy that incorporates meditation to address individual students’ “inner speech,” which he believed could promote therapeutic benefits as a “natural fallout” (234). Focusing on a specific and central component of expressivist pedagogies, Muriel Harris’s seminal work *Teaching One-to-One: The Writing Conference* draws explicitly from therapy and counseling frameworks on listening and interpersonal relationships, even comparing writing teachers to counselors, social workers and therapists, for whom individual conferences and “helping relationships” are also central components of their work. However, she quickly differentiates writing teachers from therapists, claiming that therapists “are more likely to see their clients as ‘disabled,’⁸ a condition that need not apply to writers” and that the “goal of the writing teacher is instructional, not therapeutic” (46). Thus, there was a growing trend in the 1980s to leverage the similarities between writing and therapy in classrooms that focused on expressivist and personal writing

⁷ These time periods are based on systematic database searches. I used *JSTOR* and *Project MUSE* to collect all articles in *College Composition and Communication*, *College English*, and *Pedagogy* that dealt with writing and/as therapy. I placed each article on a timeline from the 1970s to today to determine which time periods saw the most published discussions of these issues.

⁸ It’s worth noting that, though some counselors may feel this way, the current paradigm in counseling and therapy is to view clients as capable and active agents in their own healing and to view maladaptive behaviors or symptoms as logical (even if ultimately counterproductive) means of coping with stress.

pedagogies, similarities based largely on the centrality of one-to-one conferencing in both, but this scholarship was uneasy about such connections, offering disclaimers that writing may be therapeutic but teachers are not and should not try to be therapists (Tobin “Reading Students”).

In the 1990s, calls for writing and/as therapy in the classroom appeared with growing force, and these writers tended to be much less hesitant to advocate for approaches to writing instruction that fostered student healing on purpose, not simply as a natural fallout. Such boldness is perhaps largely thanks to the work of social psychologist James Pennebaker, whose seminal 1990 essay “Opening Up: The Healing Power of Expressing Emotions” concluded that writing regularly in a controlled setting about painful experiences improved students’ mental and physical health. Compositionist JoAnn Campbell cites Pennebaker in her argument for using meditation to foster healing through writing, which she argued would help “blocked” or anxious writers in particular. Judith Harris also draws on Pennebaker to advocate for a “psychoanalytical pedagogy” that “sheds light on intrapsychic and interpsychic processes that are always implicated in writing” to help teachers and students to understand the “unconscious factors perambulating just under the surface of a writer’s discourse and that we are all vulnerable to them” (181). In this way, she argues, writing instructors can contribute to students’ emotional healing as a primary goal alongside writing education, acknowledging “students’ self-knowledge as a preliminary stage for world knowledge” (189). These and other authors therefore use Pennebaker’s work as an empirical justification for incorporating a view of writing as healing into their pedagogies.

Scholars during this time period also appeared emboldened by how uses of psychoanalysis or other psychological and counseling-based approaches appeared to help

instructors work through difficult experiences in the classroom, such as resistant students, trauma disclosures, blocked writing processes, unsatisfactory writing improvement, and so on (Tobin “Reading Students”; Deletiner; Murphy; Bishop; Anderson and MacCurdy; Rinaldi; Berman). Wendy Bishop in particular discusses how students’ emotional crises often appear in their writing, arguing that instructors need to reconsider the degree to which they *do* act in a counseling role, even suggesting that training in basic counseling and psychoanalytical theories may be necessary to prepare writing teachers for the realities of their work. Mark Bracher also sees a “writing as healing” instructional approach as an ethical necessity for instructors. He urges writing instructors to use writing to “cure” the “identity vulnerabilities” (feeling that one’s identity is being threatened by the Other) that impede students’ writing and healthy functioning as citizens, and he more fully embraces psychoanalytic traditions by applying them to the teacher-student relationship. Instructors during this time also adapted therapeutic approaches to writing outside the classroom, such as Jacqueline Rinaldi’s work with a writing group for adults who have multiple sclerosis or C. Jan Swearingen’s community workshop on “spirituality and creativity.” Thus, authors in this time period made stronger calls for writing as therapy/healing, and though they still acknowledge that they are not trained therapists, they are nevertheless much less shy about proclaiming healing as a goal for the classroom, alongside improved writing skills. Anecdotal evidence provided in these essays indicates some students in these classes/programs reported experiencing positive psychological benefits, though no clear evidence exists about the impact of these pedagogies on students’ psychological wellbeing, particularly after the class ended.

The second time period that saw increased calls for therapeutic models of writing instruction were the few years following Sept. 11, 2001. This time period similarly saw an increase in writing about the therapeutic potential of writing, though with fewer psychoanalytical undertones and explicit inflections of therapy. These “writing-as-healing” discussions turned toward how writing could heal societies, often positing individual students as microcosms of societal symptoms. Perhaps the clearest example of this work comes from Shane Borrowman’s edited collection *Trauma and the Teaching of Writing*, in which instructors explore composition instructors’ roles in helping students respond to national tragedies and propose activities that foster students’ critical understandings of public conversations about traumatic events, among other issues. Similar threads appear in a 2002 two-part special issue of the *Journal of Advanced Composition* on “Trauma and Rhetoric,” such as Britzman and Pitt’s essay on education as necessarily a (productive) crisis, in which the authors explore the intersections of trauma and learning and the teacher’s role in leading students through that crisis. Yet as years passed beyond the national tragedy of 9/11, fewer essays about therapeutic models of writing instruction—or even about trauma more generally—appeared in major journals, thanks in large part to the critiques of writing-as-therapy that I detail in the next section.

This history since the 1980s has been influenced by much broader discussions in the field that motivated both scholars forwarding these models and those offering passionate critiques against them. First, conflicts about “writing as healing” are deeply inflected with tensions between expressivist and social-constructionist perspectives that question the relationship between the individual and the social, the public and the private. Those in favor of therapeutic models of writing invested themselves in dissolving the binary between private

and public lives, arguing as the expressivists did that “the personal” belonged in the classroom because students are individuals with complex internal/emotional lives that impact their writing education. Further, they argued, student writers can (and should) draw from their experiences to produce meaningful writing and to develop authentic writerly voices with which to speak to public issues (Matalene; Moffett), sometimes also arguing that this can have a de-stigmatizing effect regarding mental illness and certain types of distress. Yet other scholars saw such arguments as over-privileging the personal/individual aspects of writing at the expense of social factors. As social-constructionist perspectives gained traction beginning the 1980s, some scholars critiqued the expressivist pedagogies of people like Peter Elbow and Donald Murray as overly-individualistic, sometimes wacky or not academically challenging, and ineffective for producing social change or collective action (Berlin; Jeannette Harris; Bartholomae). Instead, social-constructionists focused on language as a social phenomenon, which sees “[t]he material, the social, and the subjective [as] at once the producers and products of ideology” (Berlin 489). Though advocates of therapeutic models of writing adamantly denied these critiques, arguing that individual and the social go hand-in-hand in their pedagogies, similar critiques as those leveled at expressivism filtered towards therapeutic writing pedagogies because such pedagogies relied heavily on personal writing and examining personal thoughts, feelings, and experiences.

A second broader conversation influencing scholars on both sides of the “writing as healing” debates involves the degree to which emotion should be in the purview of how the field understands writing and teaching. Some scholars have observed that *pathos* has often been marginalized as a component of rhetorical studies and instruction, appearing to be anti-intellectual and counterproductive for academic values of rationality and objectivity. Authors

such as James Moffett and Carolyn Matalene suggest that this creates a false dichotomy between rationality and subjectivity/emotion and downplays the role emotion plays in motivating or inhibiting the writing process. This position is complemented by scholars such as Lynn Worsham, who argues that instructors' work of decolonizing educational spaces must occur at the affective level, and Sally Chandler, who explores the connections between emotional and written discourses. By contrast, scholars who critique therapeutic models of writing instruction often also worry about excessively individualistic pedagogies that encourage students to express their feelings without learning to establish a healthy, scholarly objectivity that understands all knowledge—and subjects—as socially constructed (Van Engen; Crosswhite and Schoen; Bartholomae; Berlin). Thus, advocates for therapeutic models of writing instruction find themselves in the crosshairs of this larger debate about the degree to which emotions should be brought to the center in the writing classroom.

In addition to these conflicts that intersect with broader theoretical discussions in the field, this history of exchanges reveals two key touchstones that continue to characterize the field's ongoing evaluations of therapeutic models of writing instructions. First, "teachers aren't therapists" has been a touchstone in both arguments for *and* against therapeutic approaches to writing instruction. Some, such as Mark Bracher, have unapologetically forwarded a moral responsibility for writing instructors to engage in healing. But Lad Tobin notes that, in most cases scholars willing to draw comparisons to/expertise from therapy are often quick to distance themselves from *therapists* (using the above-cited James Moffett essay as particularly telling case). To Tobin, it seems that "most writing teachers know that therapeutic models can help us explain and explore the teacher-student relationship, but because they find this comparison threatening, they publicly deny it" (339-340). So, even

scholars who think as differently about this issue as Carole Deletiner—who argues for writing classrooms that allow students to engage and process personal pain—and Kathleen Pfeiffer—who passionately critiques Deletiner’s essay as anti-intellectual and dangerous—both matter-of-factly state that they/teachers aren’t therapists. The fact that the “teachers aren’t therapists” truism is cited both in favor and against “writing as healing” creates some ambiguity and inconsistency, making it difficult to articulate what the statement means for today’s instructors.

Another touchstone is how both opponents and proponents of writing as healing rely heavily on (sometimes, quite similar) stories from instructors about particularly troubling student revelations, though they draw conflicting conclusions from these stories. For instance, where Wendy Bishop reflects on students contemplating suicide or experiencing loss and concludes that “we need to understand the degree to which writing may be a therapeutic process and the degree to which teachers and administrators can or should undertake counseling roles” (504), Cheryl Alton concludes the opposite from her experience with students’ writing about their experiences with divorce, abortion, abuse, and homicide:

Once we open Pandora’s box and give students the “you can tell me anything signal [...] we become personally involved with confidences and dilemmas that we have not been adequately trained to handle [...] Other than suggesting counseling and telling the student that we care, there is nothing more that can be done [...] Frankly [students’ personal problems] are none of our business, no matter how we like the student. (667)

In other words, Bishop sees student distress and concludes that there clearly must be more we can do to help, while Alton sees student distress and concludes there is clearly nothing we

can/should do to help, besides refer to counseling, because the risks are too dangerous. Bishop and Alton cite the same types of anecdotal classroom evidence but draw opposite conclusions about what knowledge should be gleaned from these stories. Therefore, instructors cite both “teacher’s aren’t therapists” and use stories of student distress to defend a range of—and sometimes opposite—positions regarding therapeutic classrooms, which speaks to the inherent confusion and ambiguity in composition’s current understanding of how teachers can/should respond to student trauma. This ambiguity is particularly concerning because the stakes are so high; as previously discussed, trauma has intense and long-lasting personal and educational impacts.

I conclude this historical tracing with a look at how these conversations and conflicts are still relevant today, as evidenced by my study participants. That “teachers aren’t therapists” remains a conflicted touchstone for instructors today—like those at UofL—is reflected in interviews across participants with different experience levels and personal and professional backgrounds. Lauren, Thor, Kathryn, and Joseph all specifically stated that they are not therapists or counselors, while several others implied a similar sentiment. These statements preceded discussions about how 1) the interviewee’s teaching practices might seem similar to therapy or counseling but aren’t, or 2) how knowing they aren’t therapists doesn’t capture what they feel responsible for with regard to their students’ trauma. For example, both James and Lauren (who’s been teaching for five years) stated that they know it’s important to not act like students’ counselors, and yet, in reflecting on specific troubling interactions with students, they couldn’t shake the sense that there was more they could have done to help those students work past their trauma and to have a more successful experience in their classroom and in college in general. Taken together, all these diverse instructors

appear to recognize both 1) the importance of professional boundaries and 2) the necessity of compassion, care, or similar values to be effective teachers. Rather than serving as a productive guiding principle, “teachers aren’t therapists” seems to only highlight interviewees’ felt conflicts concerning compassion and healthy boundaries; they may not be, feel equipped to be, or want to be therapists, and yet when students inevitably disclose or exhibit symptoms of distress, they feel compelled to address such cases in ways that imply therapeutic practices or values.

Interviews also illuminated the increasing difficulties instructors face in addressing student trauma and “not being therapists” given institutional requirements concerning types of student trauma, especially Title IX mandatory reporting rules regarding sexual assault. These changes are creating greater conflict for instructors about the admonition that, because they “aren’t therapists,” they should be referring distressed students to external resources. For instance, Nick and Kathryn worry that Title IX might hurt especially female students’ willingness to acknowledge emotional difficulties related to sexual assault if they know the teacher may have to report the incident, a position partially stemming from graduate school discussions about and personal experiences with the difficulties of disclosure in especially institutional spaces. Instructors might also—in the process of seeking information needed to make an appropriate referral—be forced to make a mandatory report and potentially break a student’s confidence. On the other hand, Dr. Von feels comforted by Title IX; her experiences with emotional (and) traumatized students have led her to an increasingly firm commitment to maintaining boundaries with her students, such as by explicitly asking students not to reveal personal details. Thus, positions in the English Department about the impacts of Title IX are conflicted, based in large part on instructors’ personal (and) teaching

experiences with the difficulties involved in disclosures, with little institutional guidance about how to navigate these difficulties. As these interviews indicate, the decades-long admonition that “teachers aren’t therapists” does not adequately capture the difficult ethical choices instructors must make about referrals and mandatory reporting in the case of their students’ trauma disclosures.

This history and its application to current teachers at UofL illustrate the need for the field to unpack the statement that “teachers aren’t therapists.” In the next two sections, I dive deeper into the implications of this truism to illustrate the important dangers it illuminates, as well as the major misconceptions it perpetuates. This exploration identifies the most productive points in the discussion for finding a way forward that doesn’t conflate teaching with therapy nor deny how we come in contact with student trauma as teachers.

Critiques of therapeutic models of writing instruction

On the surface, the argument that “teachers aren’t therapists” seems pretty straightforward. Teachers aren’t trained to perform therapeutic processes and, because complex, high-stakes mental health issues are involved in therapy, pretending to be qualified to support therapy is naive at best and psychologically dangerous at worst; instead, writing teachers should be what they are—people who teach writing. While this argument seems simple on the surface, it is associated with a range of complex critiques against therapeutic writing models. In this section, I summarize those main critiques to make clear why “teachers aren’t therapists” has gained such prominence in composition instructors’ understanding of their work.

First, scholars argue that therapeutic models of writing instruction are ineffective for promoting healing, both because teachers have only amateur knowledge of psychology and therapy and because it likely encourages students to tell instructors they've experienced healing—regardless of whether it's true—in order to please the instructor and/or receive a good grade. For instance, Louise Rosenblatt equates healing-oriented classrooms with a “tampering with personality carried on by well-intentioned but ill-informed adults” who don't understand the psychological processes they're engaging (208). On the other hand, Cheryl Alton worries about whether “crossing lines” as suggested by Deletiner might cause students to expect good grades for “writing tearjerkers” (Alton and Pfeiffer 667). Other scholarship has confirmed that students often write stories they think instructors will find powerful or discuss how the class has helped them in order to please the instructor, regardless of whether it's true (Williams; Webb-Sunderhaus). Thus, opponents of therapeutic models of writing worry not just that they might tamper with psychological processes instructors don't understand and worsen students' mental health issues, and that it's difficult to evaluate whether such models have actually achieved their healing goals. Because these scholars doubt writing instructors' ability to effectively promote healing, they believe instructors should instead focus on what they are trained to promote and evaluate—the development of writing skills.

Second, some argue therapeutic models of writing instruction are ineffective for writing and academic development, saying that these models encourage navel-gazing and individualism at the expense of true academic inquiry and development of writing skills. More specifically, they argue teaching-as-therapy is ineffective for helping students learn because it causes them to focus too much on themselves and their feelings, which they

further portray as antithetical to academic learning. Pfeiffer argues almost angrily that classrooms like those described by Deletiner create “a weepy world of confessions and revelations” that “is a fundamentally egocentric sort of self-absorption” and “might help a student recover his or her lost inner child, but it will do little in the way of developing a sophisticated communicative ability, analytical skills, or a clear-sighted understanding of the world” (671). Others argue that students don’t necessarily want to learn in classrooms that only engage how they feel about texts, a point made by Abram Van Engen, who says, “Therapy-based English classes answer students knocking at the door [of knowledge about the world] not by opening it, but by asking them how they liked the knocking” (14). In other words, inviting students to write about personal, painful experiences offers an ineffective means by which to engage them in lessons about communicative competence.

Additionally, scholars further argue that therapeutic models of writing instruction create ethical dilemmas for instructors that especially make it harder to respond effectively and honestly to student work. In particular, when students write intensely-personal stories, it can put teachers in difficult ethical positions about how to give feedback/grades. For example, Pfeiffer recalls how allowing a student to write an essay about a personal trauma (losing a child) and giving it an “honest” grade of C caused both the student and the instructor emotional harm and created tension in their working relationship (670). In cases like these, it may not always be clear to the student *what* is being evaluated/graded: the student’s experience or their ability to apply writing skills. For Tobin, empathizing too much with a student who had recounted trauma in her work for his class caused him to overestimate the strength of a later essay and give it a higher grade than it deserved, raising the question of whether inviting students to write emotional stories makes it harder to

maintain objectivity when grading (334). Others, like Dan Morgan, wonder about how to respond in comments on papers; for example, what should an instructor do if a student expresses positive feelings about current or past abusive relationships, or if the student admits to legal wrongdoing? Thus, instructors express doubt about their ability to offer fair grades and feedback when students discuss personal tragedy, or they worry about whether their honest criticism about weaknesses in the writing—though necessary for the students’ development as a writer—may cause the student emotional harm. Some instructors (though not all) who cite these difficulties conclude that it’s best to avoid the ethical difficulties altogether by discouraging students from writing about trauma or other personal distress.

In addition to threatening instructors’ integrity and effectiveness, “teachers aren’t therapists” highlights dangers of teaching-as-therapy for the integrity and reputation of writing studies as a discipline. For example, Van Engen notes the prevalent public critique of English classes as “therapy,” where students just talk about how they *feel* about texts instead of learning anything useful. Furthermore, teaching-as-therapy approaches seem to some to privilege a dubious morality in regards to the role of teachers, potentially risking some ethical trouble. Colleges have, after all, been accused of indoctrinating students with progressive values (Montopoli; Freidersdorf; Bahls) or coddling students’ feelings rather than challenging them to intellectual rigor and openness (Lukianoff and Haidt). Thus, some instructors wonder whether teaching-as-therapy might confirm the fears of the public about whether instructors are shirking their responsibility to educate students with integrity and objectivity, and instead using the classroom as an opportunity to psychologically shape students according to instructors’ own ideological investments.

Other instructors are uncomfortable with how therapeutic approaches to writing instruction might compromise the field's ethical commitments to viewing students from strengths-based perspective. In particular, these scholars worry that writing-as-therapy assumes students are sick or diseased, in need of a cure from an instructor. Diane Stelzer Morrow cites a number of composition scholars who raise objections about metaphors of the teacher-student relationship that place teachers in a healing role similar to doctors or therapists and portray students as sick, diseased, or disabled (219). As mentioned earlier, Muriel Harris claims that therapists are more likely to see their clients as disabled and in need of help to get back on their feet, which doesn't fit with compositionists' goal of viewing student writers from a strengths-based perspective (46). Others, such as Robert Brooke, have argued that even when instructors use a psychoanalytical approach to teaching, they should be careful not to lapse into writing instruction as a form of therapy, "especially if 'therapy' is naively understood as the cure of somehow 'diseased' students" (690). Such discomfort with deficit perspectives of students goes back a long way in composition scholarship, such as in Mina Shaughnessy's seminal essay "Diving In: An Introduction to Basic Writing," which argues against viewing students as incompetent, empty vessels waiting to be filled by an instructor. Instructors across decades have cited Shaughnessy to oppose other deficit-based perspectives of students (c.f. Adler-Kassner). Given this history, some instructors are reluctant to engage therapeutic models of writing instruction because they fear it forwards deficit perspectives on students and gives teachers too much authority to "cure" students' writing, cognitive, emotional, and other deficits.

Beyond critiques of ineffectiveness and compromised integrity, scholars have critiqued therapeutic models of writing instruction as explicitly *dangerous*. Instructors who

hold this perspective argue that teaching-as-therapy is dangerous for *students*, because untrained teachers might worsen the emotional issues they seek to help resolve (Alton and Pfeiffer; Valentino “Responding When a Life Depends On It”). Alton particularly worries that this might happen during grading, and that her comments on essays about personal tragedy might push distressed students “over the edge” (667). Instructors also worry that teaching-as-therapy is dangerous for *instructors* because it compromises important professional boundaries that can place them in legal or physical harm. That is, taking on a therapist role can emotionally over-burden instructors who already have a lot on their plates (putting them at risk for vicarious trauma or compassion fatigue), and it can literally put teachers in physical danger or legal trouble, such as if they do not follow mandatory reporting laws correctly or a student retaliates against a teacher who made such a report (Alton and Pfeiffer; Morgan). Carello and Butler confirm that engaging student trauma directly can be emotionally damaging and triggering for instructors who do not approach student trauma in a trauma-informed manner (159). Thus, therapeutic writing pedagogies seem to place students and instructors at greater risk for emotional, physical, or other harm.

Connections between writing instructors and therapy have been dismissed by many as wishy-washy, anti-intellectual, and overburdening—at best a mediocre option, at worst dangerous pseudo-psychologizing. These instructors don’t want to be responsible for something they can’t promise—emotional health and healing—and they don’t want the guilt or emotional burden of dealing with students’ personal problems. Furthermore, they don’t want to risk being so distracted by “therapy” that they fail to teach the writing skills they’re tasked with teaching. Such objections are important and illustrate how when building a

trauma-informed approach to writing pedagogy, we must be careful not to place greater limitations and risks of harm on instructors or teachers in the process.

Questioning the truism: why saying we're "not therapists" is not enough

The concerns cited above represent important critiques of pedagogical practices that seek to engage student trauma directly on a level that we're not trained for as compositionists, and such concerns are echoed by social work scholars Carello and Butler, who worry about the number of faculty they see in humanities disciplines using therapeutic instructional approaches without understanding the psychological processes involved nor the clinical conditions under which writing has been shown to promote healing in previous studies. However, the notion that "teachers aren't therapists"—when flattened into a truism and not supplemented with teachers' lived experiences in the classroom—also forwards some problematic misconceptions for compositionists who want to be effective teachers. In this section, I explore these misconceptions and explain how they undercut our abilities to be effective writing instructors. I further argue that, even though teachers aren't therapists, they are still responsible for considering students' mental health inasmuch as this is a condition for creating productive learning environments.

First, "teachers aren't therapists" oversimplifies the role teachers play in students' mental health, particularly given that, as I've discussed previously, mental health is a necessary condition of learning (Carello and Butler). Writing instructors may not have advanced knowledge of psychological processes, trauma processing, coping practices, and so on, but they are nevertheless responsible for shaping learning conditions in their classrooms and are engaged in a helping relationship with students, often working one-on-one and

learning more personal information about students than many other instructors in the university. As a result, there are some well-documented connections between teaching and therapy that are highlighted even by critics *against* therapeutic models of writing. Lad Tobin cites examples of these scholars, including James Moffett, Donald Murray, Thomas Carnicelli, and Stephan Zelnick, who all variously argue that writing instruction involves: calling attention to latent thought processes; promoting self-discovery about the students' writerly identity; exploring unconscious motivations, desires, and fears that might influence teacher-student or student-student relationships; helping students make order out of a chaos of thoughts, feelings, and information; and so on (Tobin 340-341). Others, such as Wendy Bishop and Amy L. Hodges, make connections between teaching and therapy more boldly. Bishop and Hodges consider how epistolary writing assignments look very similar to therapeutic spaces of informal self-reflection with an empathetic witness. Therefore, prominent scholars in the field across several decades have confirmed that writing and therapy/healing bear important similarities that it would be negligent to ignore, particularly given how teachers are constantly interacting with student's (and their own) learned coping practices. Such practices affect classroom behavior and relationships with others, and, as my study participants indicate, instructors often find themselves tasked with responding to students' revelations of personal distress, regardless of whether they're looking for it. So, despite "not being therapists," teachers nevertheless engage in processes, conversations, and activities that (perhaps uncomfortably) make us also involved in student mental health in learning environments.

"Teachers aren't therapists" also creates an inaccurate picture of what expertise and skills instructors feel they need to teach well, because they often report drawing from

therapists and counselors when teaching. This—as well as how trauma-informed training can help faculty make informed choices regarding how to draw on personal experiences with counseling/counselors when responding to students—was made particularly clear in interviews with my study participants. Several participants—mostly clearly Joseph and Thor—when asked how they developed their responses to students’ trauma in the classroom, stated that they were informed by their relationship with therapists/counselors or their experiences in therapy. For example, Thor discussed how his counselor productively modeled both boundaries and compassion to him—not forcing him to disclose personal material, listening to his emotions but helping him not to sulk in them, etc. That experience informs Thor’s own sense of how to create both boundaries and compassion in the classroom as he seeks to make his classroom an effective learning space for all writers. Additionally, several instructors indicated that they had called the Counseling Center or talked to their own therapists to learn about the best ways to respond to specific distressed students, or distressed students in general. On the other hand, Daniel, a literature faculty member draws more theoretically from literary experts in scriptotherapy or Holocaust studies and noted several times the need for writing instructors to be more “psychologically savvy” if they want to teach effectively. Both Kathryn and Lauren expressed dissatisfaction with the notion that they “aren’t therapists” because it doesn’t seem to describe the skills they think they need as teachers responding to their students writing and promoting their academic success, nor does it increase their felt sense that they have served students well. Lauren in particular says “I still feel bad, because it’s a tough situation,” even though mentors have told her to handle such situations the best she can and move on. And, much like referring students to the Disability Resource Center has often not benefitted her disabled students’ in the ways she

hoped, Kathryn is leery of referring distressed students to a third-party office, particularly when she feels capable of demonstrating to students that she values what they've told her and helping them find ways to overcome barriers to their academic success.

I detail these many examples to emphasize how saying “teachers aren’t therapists”—a statement most of my participants made themselves—doesn’t describe what teachers feel called to do and what knowledge they feel they need to do it well. Interviewees provide telling stories about how current instructors find the expertise of therapists/counselors is sometimes more helpful than prior training in composition about classroom management when navigating issues of student trauma and mental health. They also demonstrated that their desires to foster effective students learning requires them to engage student mental health as either a protective or inhibiting factor for their writing development and success in college, and as teachers, they feel compelled to engage therapy perspectives—especially those gleaned from their own past relationships with therapists—in order to be effective. In lieu of adequate training, these instructors must draw heavily on prior experiences, especially with counseling, to determine how best to proceed with distressed students, gleaning much wisdom from these experiences. However, this approach can also be dangerous without adequate training to illustrate when prior experiences may or may not be relevant to the current situation with a student; in other words, though personal experiences present and rich and powerful resources for professional decision-making, faculty also need clinical-, evidence- informed training which is institutionally-supported to help gauge in what ways such personal experiences may or may not be appropriate for working with specific students. Therefore, using the fact that “teachers aren’t therapists” to advocate against bringing clinical practices into the classroom neglects the realities of writing instruction.

Related to the oversimplification of instructors' role with regard to student mental health is the oversimplification of what *outside* resources and professionals are available to help students. Often, the declaration that “teachers aren’t therapists” is followed by an additional argument teachers should rely on making referrals to campus counseling services or student affairs offices if they’re worried about a student, and that that’s all they can do (Alton and Pfeiffer; AAUP). However, this assumes that the student understands how to act on a referral or is in an emotional state to be receptive to them, and it also assumes referred resources are actually available. Scholarship and interviews with UofL instructors indicates these are far from safe assumptions. Morgan’s essay, for instance, notes that not only is making an unsolicited referral to counseling sometimes ethically questionable (perhaps crossing students’ personal boundaries or making assumptions about them), but not all institutions have adequate resources to support students in crisis should they accept the referral, which means referrals may not actually help students address their needs. Interview participant James similarly questions whether his referrals to students (or requests that student services offices follow up with students) have ever borne fruit, because in most cases, the students on whose behalf he made referrals disappeared from class or made no academic improvements afterward. Kathryn expresses more direct skepticism with referring to campus resources, noting her dissatisfaction with disability resources in particular and her preference to work with students directly on accommodations herself. Additionally, some students—especially depressed or suicidal ones—may not act on referrals, for a variety of reasons, such as fear of judgment, stigma associated with seeking help, doubt that referred resources will be helpful, negative prior experiences with seeking assistance, and lack of physical/emotional energy required to reach out for assistance, among many other reasons. And, even if a student

does not experience or overcomes these obstacles, there's no guarantee the recommended resources will be available. For instance, in Fall 2018, there was a period when UofL's Counseling Center shut down its waiting list because it was so overwhelmed with requests for counseling. Thus, the assumption that intervening in students' mental health is the job of campus counselors or other student services does not quite capture the reality that referred help may not be available, and instructors may actually be in the best position to intervene with students who are in crisis, even though there certainly are limitations on what instructors can/should do to intervene. This further indicates another training need that administrators could facilitate, with attention to clinical literature; as discussed further in Chapter 3, there is a need to make sure faculty understand the existing systems in place to address students' needs and how they do or should be functioning to help distressed students (though sometimes these resources may be under-resourced, overwhelmed, or underperforming).

A related concern is the assumption that choosing to discourage students from sharing personal information is a neutral choice that increases objectivity in the classroom. The main version of this argument concerns grading; critics of therapeutic writing instruction often worry in particular that engaging students' personal histories of pain might cause them to unfairly evaluate student work (Alton and Pfeiffer). Another version of this argument concerns whether teachers feel free to be honest about their negative evaluations of student work if they are obligated to non-judgmentalism regarding students' personal experiences (Barrett; Van Engen). A final version concerns whether engaging personal pain and healing focuses too intently on subjective experiences of reality at the expense of academic, logic based perspectives (c.f. Matalene). By contrast, Tobin makes the helpful observation that, when he was unconscious of how psychoanalysis might inform his teaching, he was less

aware of unconscious desires, motivations, and fears that influenced his relationship to his students. That is, he was more likely to favor students who made him feel secure than those who activated his insecurities (347). This observation by Tobin coheres with the well-established principle in social work that suggests teachers may inadvertently bring their own trauma or other stressors into interactions with students, which may color their objectivity in grading and evaluating student performance, and the self-awareness created by clinical work on self-care/awareness is designed to help mitigate this danger. Related, Matalene goes on to question the inherent assumption that the personal and emotional are antithetical to the rational, academic work instructors are supposed to support. Instead, she concludes that “we try to *sound* rational as we argue our very personal points of view,” and that “starting with distant issues and asking students to go and be rational about them” does not help students maintain academic objectivity, but instead “reveals our own fear of feeling, our own discomfort with empowering student writers” (264). Therefore, saying “teachers aren’t therapists” does not solve the ethical problems involved in therapeutic writing instruction, but denies them, and discourages students from sharing personal information can actually privilege certain types of knowledge and experience over others, as well as creating a false binary between “the intellectual” and “the personal.”

Finally, some who argue passionately that “teachers aren’t therapists” do so by misrepresenting what therapy is and does, defining therapy by one version of it and dismissing aspects of therapy that might have more appropriate applications to the writing classroom. These authors equate therapy with an anti-intellectual process of wallowing in one’s feelings, such the Pfeiffer quote mentioned earlier, in which she fears writing classrooms becoming a “weepy world of confessions and revelations,” full of “teeth-

gnashing and soul-baring [that] might help a student recover his or her lost inner child” (671). Similarly, Van Engen relates therapy to “how students feel about things” and defines therapeutic questions as questions of “feeling” (12). By contrast, the American Psychological Association defines therapy as a collaborative process designed to “help people of all ages live happier, healthier and more productive lives” by applying “research-based techniques to help people develop more effective habits,” including habits of mind (“Therapy” par. 1). There are diverse approaches to therapy, including cognitive behavior, interpersonal and psychodynamic, prolonged exposure, and so on, but all types of therapy seek to help people work through problems in “a supportive environment that allows you to talk openly with someone who is objective, neutral and nonjudgmental” (“Therapy” par. 1). Even though exploring feelings is certainly an important component of therapy, the main purpose is to support people in developing effective habits, healthy thinking, and work through problems (practical and emotional), so that they can live healthier and more productive lives. This conception of therapy is a far cry from the conceptions used to critique therapeutic writing classrooms. Having an accurate understanding of therapy might not convince instructors to promote therapy in the classroom (nor should it); however, it is important for not contributing the stigmas related to mental health and therapy that function as a barrier for students seeking help for personal distress, as well as developing a more complex understanding of the ways in which teaching does (even without knowing it) contribute to resilience. Mischaracterizations like the ones mentioned in this section do a disservice to both therapy and healing, and teaching and learning.

Saying “teachers aren’t therapists,” when flattened into a truism, thus can actually mean, “Teachers aren’t therapists, and therefore there’s nothing they can/should do to help

their students through personal issues.” Certainly, teachers are not responsible for students’ mental health in the same way a therapist is, but that does not mean there are no productive steps they can take to make positive impacts, especially given educators’ stated commitment to promoting academic success and the previously discussed necessity of emotional safety for learning (Carello and Butler). In other words, despite the many troubling risks highlighted by the statement “teachers aren’t therapists,” instructors must nevertheless be prepared for the inevitability of dealing with students’ emotional lives, directly or indirectly. Acknowledging what it is *not* ethical for us to do, the next section draws on clinical scholarship to explore what we *can* do as instructors who are well-positioned to positively influence students’ academic success and mental health.

Negotiating the role of writing instructors in student mental health

Lad Tobin asked in his essay on the role of the composition instructor: “So how do we write more interesting and satisfying roles for ourselves to play in the writing class? And how do we develop a clearer and more realistic notion of the way that our responses and non-responses shape student writing?” (339). Taking up his questions, this section moves beyond both “writing as therapy” and “teachers aren’t therapists” to propose facets of clinical scholarship that might enable us to negotiate both realities—that we aren’t trained therapists and that mental health is a necessary precondition for student learning that writing teachers are intimately involved with.

One key resource from clinical scholarship involves information about healthy relationships between service-provider and client. A prominent example is the RICH relationships model, used widely in a range of social service settings, including those

unrelated to therapy. RICH stands for Respect, Information, Connection, and Hope, and defines a framework of relational collaboration that “helps to develop safety and trust, the essential building blocks of healing human connections” (Elliott et al 467). Because trauma—especially trauma caused by abusive, “power over” relationships—creates feelings of powerlessness, RICH relationships recognize power imbalances and seek to share power, such as giving options and choices rather than directives, by prioritizing collaboration, and being consistent, predictable, non-shaming, and non-blaming (467).

Clinical scholarship on relationships, like the RICH model, can therefore help writing instructors think through how their relationship with students might foster healing and mental health by highlighting specific goals and values involved in healing relationships *without* delving into processes and activities that should remain the realm of trained therapists. This approach also already aligns with many current best practices for writing pedagogy. Respect for students’ prior knowledge and experiences, for instance, is already a staple of composition pedagogy, as are collaborative activities and assignments that help students connect with peers. The RICH model concepts of Respect and Connection can therefore help instructors consider in what ways previously held goals might also more intentionally promote positive student mental health benefits. Furthermore, it can be argued that the whole point of teaching is information sharing, and that writing instructors share information about writing so that students can make more informed choices about writing that enables them to pursue their academic, personal, and professional goals. A model like RICH relationships helps instructors think through how current pedagogical commitments can be trauma-informed and more intentionally promote students’ resilience from trauma and distress.

Another segment of social work literature that's particularly useful for informing how writing instructors understand their role with regard to student trauma is literature on mental health (or psychological) first aid. Mental Health First Aid was developed "to educate members of the public about how to support someone who is developing a mental illness, or someone who is in an immediate mental health crisis" (Morawska et al). It focuses on the "basics" of mental health, trauma, and early intervention—including identifying symptoms and responding ethically and empathetically—with an understanding that healing for the individual in crisis will likely require a broad range of resources and services that the person providing "first aid" is not responsible for, including therapy. A wide range of research on mental health/psychological first aid has determined its effectiveness for a variety of contexts, countries, and communities (Anthony et al; Svensson et al; Morawska et al; Hadlaczky et al) as well as applying first aid principles to the work of specific professions, such as first responders and teachers (Massey et al; SAMHSA "Psychological First Aid for First Responders"; Schreiber et al). The Substance Abuse and Mental Health Services Administration (SAMSHA) summarizes the key components of psychological first aid as involving communication that is calm, warm, concrete, consensus-based, and respectful, qualities that they explore in detail while offering practical advice for how to accomplish such values when working with distressed individuals. These publications also offer advice on how distressed individuals might become resistant or agitated and how to respond without escalating the person's distress. Such concrete, practice-based advice for educators has been proposed by others in social work and social work education, and writing teachers can draw on this literature to understand how to ethically respond to emotionally-intense situations in the classroom and intervene appropriately with students they fear may be undergoing a crisis

or just need extra help to deal with the personal or mental health issues that are impacting their ability to complete the course successfully.

This literature also articulates better strategies for how to identify when a person is in a “mental health crisis,” or trajectories that involve “intense feelings of personal distress (e.g., anxiety, depression, anger, panic, hopelessness), obvious changes in functioning (e.g., neglect of personal hygiene, unusual behavior) or catastrophic life events (e.g., disruptions in personal relationships, support systems or living arrangements; loss of autonomy or parental rights; victimization or natural disasters)” (SAMHSA “Practice Guidelines” 3). SAMHSA proposes ten essential values for responding when an individual indicates a mental health crisis, including avoiding harm, intervening in person-centered ways, shared responsibility, establishing feelings of personal safety, focusing on strengths and the personal as a credible source on their own lives, prioritizing recovery/resilience, and natural supports, and prevention (SAMHSA “Practice Guidelines”). This literature can help composition instructors be better informed about when and how to make referrals to students for outside resources, such as counseling, where they would receive more direct help processing distressing circumstances.

An integral component of mental health first aid and social work practice in general involves effective listening approaches. Composition does already have a long history of scholarship on listening (Kirsch and Royster; Muriel Harris; Ceraso; Ratcliffe; Cain; Powell and Takayoshi) that explores what listener dispositions are most likely to result in ethical, empathic listening, usually involving speakers who are historically marginalized and/or misunderstood. Clinical scholarship on active (or empathic) listening adds to these perspectives specific practices based on empirical evidence about healthy responses to

individuals who are discussing their trauma (Nugent and Halvorson; SAMHSA “Practice Guidelines”). This literature has explored types of active listening and which are most effective. For instance, Nugent and Halvorson distinguish between Type A (which is “neutral with respect to a client’s interpretation of an event or situation or implies the existence of alternate interpretations) and Type B (which “presupposes the accuracy or correctness of a client’s interpretation of an event or situation”) active listening approaches (155). The authors found that active listening is quite complex, and different types of active listening produce different short-term affective responses; practitioners must therefore pay close attention to how they phrase and structure their active listening responses (173). This and other related social work literature on listening offers much practical advice to compositions for determining the best way to understand and respond to student trauma survivors’ stories, particularly when students are currently undergoing distress related to their trauma. This does not suggest that composition instructors need to *seek out* such stories; indeed, doing so would be considered intrusive and counterproductive according to the above cited listening models. However, they do offer specific listening practices that research shows are more likely to be experienced by survivors as productive and empowering, and instructors may therefore use this literature to feel more prepared to respond to intense personal stories.

Though the above “caring” behaviors outlined in this section can have positive impacts on instructors sense of job competence and satisfaction (known as “compassion satisfaction”), exposure to individuals’ distress in a caring relationship can also have negative psychological and professional impacts; for this reason, clinical scholarship on compassion fatigue and vicarious trauma are essential for composition instructors, even those who do not receive many direct disclosures of trauma from their students. Compassion fatigue and

vicarious or secondary trauma are related phenomena that describe what happens to people when they're caring for others, especially others who have survived trauma (Gentry; SAMHSA *TIP 57*; Figley; Adams et al; Newell and MacNeil). J. Eric Gentry describes compassion fatigue as similar to "job burnout" (emotional exhaustion, depersonalization, and decreased sense of personal accomplishment) caused by bearing witness to the pain of others, which can cause symptoms such as intrusion, avoidance, and arousal (39-41). Vicarious or secondary trauma is a related though perhaps more acute effect of bearing witness in a caring relationship, defined as "the transmission of traumatic stress through observation and/or hearing others' stories of traumatic events and the resultant shifts/distortions that occur in the caregiver's perceptual and meaning systems" (Gentry 41). Clinical scholars have observed that such negative impacts of caring are exacerbated by isolation, the ambiguous nature of "success" in caring professions, the emotional drain involved in empathy, individuals' inability to manage anxiety, and the denial of compassion fatigue symptoms. On the other hand, strategies such as awareness, connection, self-soothing, self-care, narrating experiences, and so on can prevent and treat symptoms of compassion fatigue and vicarious trauma (Gentry). This literature also discusses how to support social work *students* in preventing and healing from compassion fatigue that can happen in the classroom and as they progress into professionals (Cunningham; Napoli and Bonifas; Sommer). From this literature, composition instructors can glean information on the types/levels, causes, symptoms, and prevention/treatment of compassion fatigue, burnout, and vicarious or secondary trauma, as well as suggestions on how to prepare new (and) graduate teachers to be aware of these possible negative impacts of caring for students.

This literature does not make a person a therapist, nor can all aspects be directly applied from a social work/therapy context into an education context. In fact, social work educators have written about the necessity of translating trauma-informed principles from clinical settings to educational settings, because even trained therapists recognize that they occupy a different role in a classroom space than a counseling office (Plaut; Rasmussen and Mishna; Congress). However, this literature can be translated, as I have done in this dissertation's conclusion and Appendix 2, into appropriate applications for educational spaces and help instructors not to suddenly become trained therapists, but rather to become more informed adults who can anticipate the impacts of trauma in their pedagogy design, know how to respond ethically to student trauma when it manifests explicitly, can help guide students to specific resources, and are prepared for how encountering the pain of others might affect them.

Conclusion

In this chapter, I have argued both that “teachers aren’t therapists” is true, and that it’s not enough. That is, writing instructors—indeed, instructors of all kinds—interact with students’ and their own mental health concerns on a daily basis. Clinical literature can help compositionists to better understand trauma-informed ways to negotiate our role and boundaries with regard to student distress, and to move beyond binaristic arguments about whether healing has a place in the writing classroom. Such trauma-informed approaches serve not only students in distress, but also function as “a respectful way to interact that is also appreciated by people without a traumatic past” (Elliott et al). That is, centering the perspectives of trauma survivors in the trauma-informed manner described in the previous

section simultaneously promotes generally respectful, healthy classrooms that align with other stated pedagogical goals. In my concluding chapter and Appendix 2, I offer specific practices and guidelines to support teaching that aligns with the trauma-informed approaches outlined in the previous section.

CHAPTER IV

“INSTITUTIONS DON’T SUPPORT TRAUMA-INFORMED TEACHING”: SHAPING INSTITUTIONS TO SUPPORT TRAUMA-INFORMED PEDAGOGIES

I used to be able to walk students over to the Counseling Center when it was on campus. And I knew the person that was behind the desk, and I could—I haven’t—in my career I think I’ve only done that, like, twice. Uh, I had a student who wound up homeless, and I helped her—I knew [where] to send her [...] I don’t have those connections any more because all those people retired. [...] I send students to the Writing Center, to REACH. I’ll refer to them to the Counseling Center. There are no offices that I deal one-on-one with anymore.

—Cathy

I think more training would have been good. Because, I know we had the [teaching practicum], and the class was great, so, like, I don’t want this to come across like I’m knocking the class, because it was great. I don’t think it was enough. And we had mentor groups but my mentor [...] moved away. So, like, I have access to her on Facebook, but, like, what can you say on Facebook because of FERPA? So I think that makes it really challenging.

—Lauren

It used to be, that a student would come to us with something, and we might talk to them. Then it became, you talked to them, and you take them down to the Counseling Center, and now it’s, you talk to them and you have to report it—so, on—on one level, there’s more . . . um, protection for the professor . . . but on the other level, there’s—there’s this sense that in announcing to your students that, “If you come to me, I’m going to have to report it,”—I’m not convinced that’s necessarily conducive to students coming to us [...] but, it was just as difficult several years ago when the operative way to do it was to urge them to go to counseling or get them down to the Counseling Center [...] the easiest thing in a sense is to, depending on the personality or who you are, is for them to come and talk to you. The hard thing is to get them to do something about it.

—Dr. Von

But again, it relates to what I was saying earlier about, we should be helping the students in front of us, even if policies sometimes get in the way of that.

—Kathryn

The previous chapters have focused on individual instructors' actions in the classroom, but scholarship on trauma-informed approaches to care urge a more institutional perspective; that is, social work scholars argue that trauma-informed practices require knowledge of institutional context and that trauma-informed care must be applied across an entire institution—in this case an entire writing program or university—rather than just in isolated interactions—such as a single classroom or teacher-student interaction—in order to be effective. This chapter thus explores the institutional factors enabling and, especially, preventing faculty from fully and effectively enacting the trauma-informed pedagogy I propose in this dissertation.

As a state-supported major metropolitan research university enrolling more than 22,000 students, the University of Louisville's context of support for traumatized or otherwise distressed students is substantial. The centerpieces of this support are student services offices dedicated to addressing student distress, especially the Counseling Center (which provides mental health services and academic counseling) and the Dean of Students office's Student Care Team, which communicates across offices to identify both students in need of care and what resources they need most. Other offices work with specific types of trauma—such as the PEACC Center, which works with student survivors of sexual assault and domestic violence—or student populations who are likely to have experienced particular types of trauma—such as the Office of Military Students and Veterans Services or the Disability Resources Center. These are all in addition to many other offices supporting student success that do not offer direct trauma-related services but do offer services distressed students may find necessary for full recovery, such as the tutoring available

through Resources for Academic Achievement (REACH) or the University Writing Center. Together, all these offices provide expansive and diverse support to students encountering a range of difficulties.

In addition to offices dedicated to student support, several other university policies and activities influence distressed students and the instructors seeking to help them. For instance, recent (and controversial) Title IX policy updates require faculty to report sexual misconduct, domestic violence, dating violence, or sex discrimination occurring on campus, at a university event, or involving a university employee/student or campus visitor, and it requires all faculty to include a statement about Title IX and the limits of confidentiality on their syllabi. These updates are designed to make visible the university's commitment against sexual violence/discrimination and enable investigations of any sexual assault/harassment involving campus or campus community. Other policies more indirectly relate to student distress, such as the Family Educational Rights and Privacy Act, which limits what faculty can share about their students and with whom. In addition to policies and guidelines, several initiatives across campus aim to reach out to struggling students. Campus Health Services asks all patients to complete a mental health survey that screens for depression so that primary care physicians can make referrals to the Counseling Center when appropriate. Another division of Campus Health Services, the Health Promotion Office, sponsors a number of initiatives to promote wellbeing—including emotional wellbeing—and resilience among the campus community. In addition to reaching out to students directly, the university occasionally offers training to help faculty understand when and how to help students in distress. Such trainings include a recent Delphi Center for Teaching and Learning workshop on “Supporting Students Through Challenges Beyond the Classroom,” led by representatives

of the Counseling Center and the Student Care Team. Online resources for faculty also exist, including a Student Care Team handout about who to call depending on the nature of the student distress they're witnessing, as well as the newly launched CardConnect database, which allows users to search for specific issues (e.g. depression) and see a list of campus and other resources devoted to addressing those issues. Clearly, there are many institutional policies, trainings, resources, and offices that intersect with and influence issues of student trauma/distress that might manifest in writing instructors' classrooms.

As a smaller institution within the university, the Composition Program at UofL similarly contains policies and structures that intersect with student distress. For instance, all faculty teaching in the Composition Program (i.e. first-year writing and business/technical writing courses) are required to attend the annual program orientation each August, which routinely includes a session that introduces faculty to student services offices they can contact or refer students to for support through issues affecting their education. The Composition Program has also offered several recent pedagogy workshops that educate instructors about supporting students through distress or preventing further distress, such as a March 2017 workshop on "Student Trauma in the Classroom" or the multiple required workshops in Fall 2017 on implicit bias (microaggressions that over time can become traumatic or otherwise distressing). Faculty are further encouraged to include not only the required Title IX statements on their syllabi, but other statements regarding available resources that might help students recover from trauma or distress, such as statements about the Office of Military Students and Veterans Services or the Counseling Center. Less directly, the culture of pedagogy and beliefs about writing in the Composition Program influences the experiences of distressed students and are influenced by many programmatic

factors, such as the Learning Outcomes, which encourage faculty to promote (among other values) students' sense of confidence and ownership—skills which have been shown to promote trauma resiliency.

And yet, despite all of these broad and diverse institutional factors intended to support faculty supporting students, many faculty feel that the institution acts as at best an inadequate resource and at worst a barrier in their efforts to support students. This disconnect raises the question: why do faculty feel institutions ineffectively support faculty and students dealing with distress, despite the substantial resources the university dedicated to this support? In this chapter, I explore the institutional support needed for trauma-informed approaches to pedagogy if the principles and practices proposed are to be effective for both students and instructors. Locating this argument in the field's larger conversations about building more inclusive, equitable institutions, I explore UofL faculty's experiences with institutional support and barriers for helping students through personal challenges that impact their learning to illustrate the disconnect between available resources and perceived effectiveness of those resources, before pointing out four ways we should rethink our understanding of institutional support in order to address this disconnect. I further draw on clinical scholarship about implementing Trauma-Informed Care within whole organizations to show how thinking institutionally can enable writing instructors/program administrators to address student trauma more effectively and influence broader systems to better promote resilience.

Institutional (lack of) inclusion and access in composition scholarship

Throughout this dissertation, I have argued that trauma-informed approaches to pedagogy are, in part, an inclusivity issue—building classrooms that are more inclusive of

diverse learners. The field's decades-long interest in inclusivity was jumpstarted by the rise of open admissions colleges in the 1970s, when a diversifying student body necessitated new approaches to pedagogy that acknowledged and celebrated that diversity. This rich body of scholarship has continually explored the ethical responsibility of individual instructors and classrooms, as well as considering how broader institutions (e.g. universities, the field) must become more equitable by working against oppression, opening up access, pursuing social justice, and incorporating new methodologies that foster justice (threads I trace in this section). However, this scholarship could still benefit from considering how trauma-informed approaches to pedagogy can enable institutions to create equitable environments for the majority of college students who have experienced trauma, as well as creating generally healthy learning conditions even for those who don't have a traumatic past.

One key discussion in composition literature about inclusive, equitable institutions involves combating racism or other culturally oppressive institutional practices, forwarding a *working against* perspective on inequity (Powell; Davila; García de Müller and Ruiz; Inoue; Poe et al; Hum; Naynaha). For instance, in *Antiracist Writing Assessment Ecologies*, Asao B. Inoue interrogates writing programs and writes about how “white habitus” dominates academic discourse. He argues that instructors must engage deliberately anti-racist practices in order to sustain equitable classrooms. Genevieve García de Müller and Iris Ruiz similarly interrogate practices regarding race and silence about race in U.S. college writing programs, but these authors call more focused attention to experiences of isolation and implicit bias faced by university instructors of color. Writing primarily about scholarly pursuits and teaching, Malea Powell's 2012 CCCC Chair's Address called out the field for erasure of indigenous culture, history, and scholarship, arguing for “an epistemological shift of epic

proportions where our job as teachers is to *always* reframe ‘the’ way as *one* way, as a set of specific cultural values embodied in particular practices” (402). Other scholars perform similar work but focus on language (Perryman-Clark; Lu and Horner) or class (Mike Rose; Peckham) as the central factors of exclusion. Together, this scholarship advocates against practices that allow educational institutions in particular to exclude certain identities, overtly or, especially, covertly.

Other scholars also critique exclusive practices but frame their work in terms of *access*, or *opening up*. This perspective is particularly evident in work by disability studies scholars, such as Margaret Price’s *Mad at School*. Price illustrates the privileging of able bodyminds in academic discourse/practices and argues for practices that make academia more accessible to all, especially students with disabilities and mental illnesses. Another disability studies scholar, Anne-Marie Womack, posits a theory of teaching as accommodation and argues that writing programs should apply principles of Universal Design that center the experiences of disabled students in order to create more accessible classrooms for all. These connections to disability studies are unsurprising, since access has long been used academically, professionally, and colloquially to talk about the rights of people with disabilities, but other scholars outside of disability studies similarly enact an *access* or *opening* perspective on inclusivity by questioning ways in which the academy has/continues to act in a gatekeeping function. For instance, taking the focus away from the classroom, Shannon Carter and James H. Conrad question “who has access to knowledge that may benefit them,” knowledge that often resides in the university. These authors acknowledge the physical, disciplinary, legal, institutional, community, and other boundaries preventing local residents from accessing university knowledge repositories (e.g. archives)

that may benefit them. The authors argue for information and resources to be more readily accessible to communities near the university. This work on institutional inclusion and equity bears important kinship with the scholarship mentioned in the previous paragraph but centers more attention on what practices open up institutions to those excluded.

An additional, related thread of scholarship goes beyond looking at specific practices in the field that should be more equitable and instead argues that the field's identity and purposes should be the pursuit of equity and social justice. For instance, Mya Poe and Inoue edited a special issue of *College English* that focuses on how writing assessment might forward social justice aims, including how administrators might assess student writing more inclusively. In the introduction to the special issue, Poe and Inoue show how the essays in the special issue continue “a long tradition of composition scholars who have pointed to the disparities caused by and reflected in writing assessment practices” (125). In a review of four books by composition scholars about writing centers and social justice, Sarah Blazer and Lauren Fitzgerald observe how these books reflect the “growing contingent of writing center scholars and tutors [...] exhibiting commitment to enacting and developing socially just, inclusive theory and pedagogy,” working concretely toward more just practices as a central component of their work (184). Focusing on First Year Composition, Don J. Kraemer argues that the rightful way to conceive of our work in FYC is “the study of, and practice in, symbolic action for civic purposes (i.e., social justice),” thereby explicitly aligning the course sequences at the heart of the discipline with social justice (85). This and other scholarship addresses not just how specific practices might become more inclusive and equitable, but also how social justice itself—premised on equity and inclusiveness—should be a defining element of the field's identity.

Finally, whereas the above-cited scholars often focus on *what* practices/paradigms need to change, other scholars explore *how* compositionists should approach investigating inclusivity. That is, they discuss methods and methodologies that might enable scholars to interrogate institutions to determine both what needs to change and how best to change it. For instance, Huckin et al note how scholars have adopted a sociolinguistics methodology called critical discourse analysis (CDA) in order to support a variety of studies on inequality, ethics, higher education, and institutional practices, to name a few. They demonstrate how CDA has been taken up by rhetoric and composition as a means to explore “power and privilege in public and private discourse” (111). Poe et al explore the utility of another methodology imported from other fields—disparate impact analysis. Disparate impact analysis, they argue, will allow writing program administrators and the field as a whole to understand the varying impact of writing assessment on diverse groups of students, and particularly how it can identify assessment practices that negatively impact some groups of students and privilege others. Kathleen J. Ryan offers yet another approach for Writing Program Administrators (WPAs), arguing that “epistemologies of place and ecologies” are more inclusive of women and minorities and therefore provide a better theoretical understanding of WPA’s agency for administering their programs more effectively. And finally, some writing studies scholars have taken up institutional critique to systematically analyze institutions in order to discover operating inequities (Lamos; Porter et al). Through this and other scholarship, the field has examined which methods and methodologies best illuminate areas for greater inclusivity within the institutions in which writing instructors participate.

This scholarship already provides rich discussions of how composition scholars can promote inclusivity, and I argue that considering how to infuse trauma-informed practices

across institutions would deepen it even more. The literature cited in this section so far seldom mentions trauma at all as a factor impacting the inclusiveness of educational institutions, and there are no sustained, complex conversations about this issue. Furthermore, composition scholarship cited in other chapters about trauma focuses almost exclusively on how individual instructors should respond to students' trauma, rather than considering this issue on an institutional level. However, trauma is highly relevant to the work of building inclusive institutions. First, scholarship has determined that people whose identities put them at intersections of multiple systemic oppressions are more likely to experience trauma and the chronic stress that can be traumatic over time (Elliott et al; Eyerman, Dass-Brailsford; SAMHSA *TIP 57*). Thus, the oppression cited in the above literature is likely to be experienced as traumatic over time by many people. Second, as I've discussed throughout this dissertation, trauma exerts important impacts on learning and academic/social behavior that cannot be ignored if institutions want to be effective at educating all students. Therefore, attention to trauma would deepen our knowledge of how oppression impacts individuals in educational spaces, as well as identify what practices foster or hinder the sense of safety and empowerment that promotes resilience.

Despite the gaps in composition scholarship about student trauma from an institutional perspective, there has been some work on how WPAs can/should respond to trauma, which offers productive advice about what support instructors need in order to ethically support their students during times of crisis. Dan Morgan urges administrators “to create detailed and responsible institutional policies and provide adequate resources” as a necessary condition for supporting teachers' responses to especially student disclosures of trauma (319). Wendy Bishop even goes so far as to suggest that writing teachers and program

administrators need a course that introduces them to basic psychology and counseling in order to be fully prepared for their work with students. Others argue that administrators have a responsibility to promote critical understandings of traumatic events, as demonstrated in Shane Borrowman's edited collection *Trauma and the Teaching of Writing*. In an essay by Murphy et al in Borrowman's collection, Duane Roen reflects on his experience being a writing program administrator during 9/11 and how he attempted to support instructors during that time. He worked with counseling services and encouraged instructors to account for students' and their own emotional safety, in addition to encouraging instructors to help students consider the events critically and rhetorically.

This literature on WPA responses to trauma highlights some policies, training, and pedagogical stances WPAs have considered when developing programmatic responses to trauma. However, there has been little of this work, and there's much more room for understanding the full picture of how writing programs can infuse clinically-informed perspectives on trauma and ethical responses to trauma in the classroom, as well as how writing programs' commitments to trauma-informed practices can influence the broader university to be more inclusive of survivors' experiences. Before discussing what clinical literature suggests about institutional implementation of trauma-informed pedagogy, I describe the lived experiences of instructors with institutional barriers to student support, especially as seen by my interview participants. The next section therefore examines why UofL instructors feel the university does not effectively support their work with distressed students to show where the disconnect between available resources and their perceived effectiveness comes from.

Instructor concerns about institutional support for distressed students

Skepticism regarding institutional effectiveness in supporting teachers certainly isn't new or limited to issues of student trauma. To be sure, objections to trauma-informed pedagogy based on lack of institutional support sound eerily similar to critiques leveled against university structures for decades (e.g. lack of flexibility, inadequate or inappropriate resources, unnecessary or burdensome policies, etc.). Yet the nuance of these concerns as related to supporting students in distress merits exploration, given the resources institutions are already spending on this goal and the stakes for institutions, instructors and students when mental health crises continue without appropriate intervention. This section investigates instructors' objection that "institutions don't support trauma-informed teaching" in order to illustrate the most salient institutional barriers to effectively supporting students through distress.

First, instructors express some doubts about whether institutions will protect their jobs and reputations as they attempt to make difficult decisions with regard to students in distress. Instructors especially worry about liability and job security when attempts to address student trauma go awry. This theme comes up in both composition scholarship and interviews with current UofL instructors. Instructors are concerned that if they delve into the tricky waters of proactive responses to student trauma, they might be left high and dry by their departments/institutions if something goes wrong (e.g. they don't provide all the right trigger warnings, a student harms self or someone else, etc.). This was a concern underlying critiques of trigger warnings cited in Chapter 1, such as Bianco's and AAUP's concerns that proliferated, mandatory trigger warning guidelines would unfairly place the most vulnerable instructors—non-tenure-track (and) adjunct instructors—at greater risk of disciplinary action

if students complain that the instructor did not provide adequate trigger warnings. Similar liability concerns came up in critiques against therapeutic models of writing instruction cited in Chapter 2, such as Alton's brush with legal responsibility when a student confessed criminal activity in a personal essay. Others generally worry that institutional policies designed to protect the university from liability may merely shift liability onto well-meaning faculty, with little protection.

Current UofL instructors indicate that they similarly worry about such liability issues when deciding how to respond to student distress in their classrooms, but they are less concerned about self-protection and more concerned about how such structures limit what they can do for students—or whether students feel comfortable asking for help at all. For instance, several instructors worried about the impacts of Title IX legislation that requires them to report sexual assault that happens on UofL's campus or involves a member of the UofL community. Both Jack and Kathryn speculated that such a policy likely prevents students from seeking academic or other help after a sexual assault, help they may desperately need in order to recover. Others expressed concern that they might not always understand when they are required to make a report, or that the rule might force them to break students' confidentiality and therefore negate the trust necessary for an effective teacher-student relationship. Implicit in such concerns are instructors' long-held ethical and legal (i.e. FERPA) responsibility to maintain confidentiality about their students' academics and any information students might share with instructors in the context of teaching. The same concerns apply even for lower-stakes policies. For example, Kathryn mentioned how she accommodated two students' intense mental health struggles by forgiving many absences—far past her former university's attendance policy—so that the students could

complete the last class they needed before graduating (a class they'd attempted and failed four other times due to absences). Kathryn notes from this experience, as well as her scholarly interest in students whose university experiences might be called non-normative, that universities build policies on what they assume is the normative student experience, but serving "the students in front of us" may mean deviating from those policies that are exclusive of different students' perspectives/needs. Thus, instructors fear that some institutional policies threaten rather than support their trauma-informed teaching, either putting them at risk of disciplinary/legal action, damaging the relationship of trust and respect necessary in teacher-student relationships, or forcing them to enact policies that are exclusive of distressed/traumatized students' identities and experiences.

Second, though instructors often mentioned the need for more training and resources through which faculty can learn about responding to student trauma, they also questioned whether institutionally-sponsored training and resources are effective. Several UofL instructors advocated for more training for teachers in supporting distressed students, though most felt this training would be most relevant to newer teachers. For example, Daniel, who has more than two decades of teaching experience and a personal history living in diverse, struggling communities, identifies himself as both a natural empath and "psychologically savvy," qualities he feels have made him able to respond to a variety of student trauma effectively in the classroom; consequently, he also feels that more professors should be trained to be psychologically savvy so that they can better pick up on cues from students about when they're in distress and what kind of help they do—or don't—need. Cathy similarly feels that her 35 years of teaching at UofL and local community colleges, as well as personal experiences interacting with young people who were depressed and/or suicidal, have

prepared her to respond well to her students' trauma, but she thinks that new teachers should be provided with more training, "not about so much how to handle [student trauma] themselves, but about what to do [...] if you have a situation and you don't know what to do [...] go to these people who can help you negotiate this situation." Though Cathy has a lot of experience working with distressed students, she is still open to learning more about trauma-informed teaching, though she is worried that doing so might create too much additional learning on top of her current teaching responsibilities; as she put it, "I don't wanna go back to school." Implicit in these suggestions by Cathy and Daniel was that university workshops/resources might not be relevant to them because such workshops tend to be basic or redundant, on the one hand, by reiterating information they already know from prior experience and research, or unnecessarily specific or detailed, on the other hand.

Others, such as James and Lauren, suggested more training be available for teachers *because* they feel underprepared but questioned whether the university training/resources they had already experienced were effective. Both James (who has been teaching for 30 years) and Lauren (who had been teaching for three years) employ standard practices for supporting distressed students, such as referring students to outside resources, expressing genuine concern, and working with the student to develop a flexible plan for completing the course. However, both instructors nevertheless were not confident in their ability to assist distressed students, in large part because 1) they sympathized but were unable to empathize with students' traumatic experiences, having come from relatively stable home backgrounds and not experienced similar distressing situations, and 2) the result of their attempts to "help" using university resources have not always been successful, because students ended up failing or disappearing anyway. Both felt that the institutional training provided so far to help

them address student issues had therefore been insufficient, not capturing the complexity of the students they worked with. They still had many questions despite making use of institutional training/resources, such as: How do I communicate empathy genuinely to students whose experiences I cannot quite understand? Why do accommodations work for some students and not others, even for students going through the same types of distress? If my attempts to help students fail in enough cases, does that mean I'm doing something wrong? What happens when students are too shy, depressed, or anxious to ask for or accept help? Thus, it appears that even though all instructors interviewed were in favor of learning more about student trauma, they doubt whether standard university training models for professors will actually produce the knowledge they need to support students effectively.

Another concern about institutional support for trauma-informed teaching as expressed by my research participants is whether available institutional supports/offices effectively help the most difficult cases of student distress. Instructors mentioned reaching out to a wide range of university student services offices to support students in distress, including REACH, the University Writing Center, Athletics, the Dean of Students/Student Care Team, PEACC, the Disability Resource Center, the Counseling Center, the Office of Military and Veteran Student Affairs, and others. Though all instructors had positive stories about generally referring students to some of these offices (especially the Writing Center), they also had mixed feelings about the degree to which referring students to these offices has been effective for students undergoing particularly acute distress (though they don't necessarily or always blame the offices themselves for the negative outcome). James articulates this most clearly when he talks about having filed a report about struggling students with either the Dean of Students or the Counseling Center but never seeing an

improvement in the students' attendance and/or academic performance. Kathryn worries that the DRC's approach to accommodations is sometimes reductive, focused on accommodations like deadline extensions rather than more complex assistance that could more significantly support student success, and thus she prefers to work with students one-on-one to determine what accommodations she can provide them. Cathy similarly recalls how she feels that veteran students often experience isolation and could benefit from more extensive support like what student-athletes receive from Athletics, which has much more money, people, and resources. These experiences led most interview participants to feel uneasy about whether the offices they might refer students to for assistance will actually produce noticeable improvements in the students' classroom behavior and general wellbeing.

Finally, instructors worry that institutional policies and trainings tend to support uniformity, rather than teachers' abilities to make context-specific, flexible choices. Joseph in particular thinks that departmental meetings about issues like student distress have the potential to focus too much on prescriptive approaches to difficulties with students, rather than opening up discussions where instructors can share their experiences and learn from each other, but ultimately trust their own judgment about what response a specific instance of student distress calls for, if any. Similar concerns were raised in Chapter 1 by the advocates against trigger warnings, who worry that institutional requirements about trigger warnings place unfair limitations on instructors' autonomy, which ultimately damages students' educational experiences. Further scholars such as Paula Mathieu have commented on how the university favors strategies—which “seek to create stable spaces that can overcome temporal changes”—over tactics—which are more flexible and emerge *from* the current context, using space and time rhetorically—which ultimately limits the effectiveness of

faculty's work (294). Therefore, instructors worry whether institutional resources for trauma-informed teaching might actually limit what options they can pursue to support diverse, individual students in a range of contexts.

The above concerns are substantial, especially when added to the context of a discipline with a long history of distrust and critique toward institutions and their tendency to reinforce hegemony, inefficiency, and ineffectiveness, rather than supporting inclusive, ethical, and effective practices (as I discussed earlier in this chapter). It is perhaps for this reason that Cathy and Lauren feel the loss of individuals within the institution—the receptionist, the mentor—they could turn to for help finding effective resources for their struggling students. This deep distrust instructors have toward institutions is at once understandable and limiting; that is, it is true that institutions sometimes present barriers to trauma-informed teaching, and yet they also have the capacity to support distressed students on a much broader scale and in a wider range of concerns than individual teachers can. The next section discusses the most important areas for reconsidering the relationship between institutions and individual instructors in supporting distressed students.

Re-conceptualizing the terms of student support structures

Unlike with the previous two chapters, the concerns highlighted in the previous section do not exist as much because of misunderstandings about the reality of student trauma; rather, these concerns stem from the common experiences of writing teachers and program administrators facing institutional barriers to their work and/or unsuccessful mediations of student distress. Still, there are some aspects of these conflicts that might be unpacked to better facilitate successful interventions on behalf of students and to help

instructors feel more supported by the university. Rather than correcting misunderstandings as I have in previous chapters, in this section, I instead discuss four concepts regarding institutional support that administrators and faculty might usefully think through in order to address the perceived gap between available resources and their effectiveness and create a clearer picture of the institutional contexts in which teachers seek to support struggling students, how to leverage that system in more complex ways, and how that system might be improved.

First, instructors and administrators need a better understanding of their shared responsibility with regard to supporting students through personal challenges affecting their education, as well as the responsibilities of the students themselves. The concerns mentioned in the previous section frequently function on unclear renderings of what responsibilities fall to individual instructors, institutions, and students in overcoming distress and its barriers to education. On the surface, these boundaries seem clear: instructors are responsible for referring troubled students and/or reporting the student problems they observe, while students are responsible for acting on referrals, and university offices are responsible for providing appropriate services to students and acting on faculty reports of student distress in more serious cases. This pattern of responsibility fits into what Lorraine E. Granieri (drawing on Michael D. Bayles's work on professional ethics) describes as an *agency* or *paternalistic* models of professional relationships, in which instructors/institutions are considered professionals contracted to act on behalf of students, with varying degrees of agency attributed to the student. Such models often function on contractual or legal senses of responsibility. For instance, policies such as Title IX, which was described earlier in this chapter, attempt to make such responsibilities more clear cut, as do documents/resources

such as the Dean of Students' "Helping Students in Distress" guide (also mentioned earlier in this chapter) that attempt to clarify under which circumstances and to whom faculty should make reports/referrals. Such concrete guidelines and policies provide relief to some instructors, including Dr. Von, for whom these policies like Title IX seem to offer protection from liability concerns and being emotionally manipulated by students. Indeed, implicit in these institutional structures is a legal sense of responsibility: instructors and institutions know what they are required to do in order to avoid charges of negligence, and the rest is up to students. I do not mean to suggest that the institutional structures described in this chapter have not also developed out of a genuine desire to support students, but they nevertheless rhetorically construct such support in terms of rote legal responsibility.

However, this rendering of responsibility does not fully capture the complexity of the relationship between institutions, instructors, and students, especially in the context of student trauma and distress. To be sure, the legal aspects of these relationships should not be ignored, but neither should they overshadow other renderings. For instance, Granieri described a fiduciary model of professional relationships as one based on trust, information sharing, and mutual dependence between one party that has a set of superior knowledge and resources (i.e. administrators, instructors) and another that nevertheless maintains a high degree of personal agency (Granieri and Hooper 492). Such a perspective applied to the case of student trauma/distress acknowledges power differentials between institutions, administrators, instructors, and students, yet conceives of this relationship as founded on mutual responsibility, power/knowledge sharing, and trust—all central trauma-informed care principles—rather than simply legal obligation. Conceiving of university professional relationships this way does more than ask, "What is required?" and "What could go wrong,

and how do we protect ourselves from it?” as in a legalistic perspective; it asks, “How do we use our institutional knowledge to maximize students’ understanding of the university systems they live and work in, as well as their ability to leverage available resources and information to make positive changes in their lives?” I do not want to suggest that university stakeholders do not personally think in this way about student support; however, I am suggesting that such a fiduciary, trauma-informed perspective must be infused into policies, resources, and other university structures, as well the way instructors and university administrators operationalize such structures in their work with students (including how we talk about them to students).

Thus, instructors and institutions would be served by better articulating the fiduciary relationship between various stakeholders and their responsibility with regard to supporting students in distress as we design and redesign university structures promoting student success and resiliency. For example, such an approach might mitigate some concerns faculty have regarding trigger warning requirements, which, as currently understood, would place sole responsibility on the instructor for managing all potentially traumatic material in class. It’s understandable in this rendering why faculty might worry about keeping up with what might possibly be triggering and feel threatened by the possibility that a student might file a complaint saying they haven’t given appropriate trigger warnings. In a fiduciary rendering, institutional policies aim to inform, support, and protect both students *and* faculty, rather than just protect the university against legal liability in the case of a student being emotionally distressed by class material. A fiduciary approach to such policies might be accomplished in several ways, perhaps by: clarifying what is required and what is recommended, allowing faculty as much informed autonomy as possible in deciding whether to give content

warnings; listing resources to help faculty understand if/when/how to give a content warning, as well as how to talk to their students about the presence or absence of such warnings and handling adverse emotional reactions; providing information to students about the purposes of the policy and options they have for responding to material they find retraumatizing. Administrators might also talk to faculty directly about their concerns regarding this issue and clarify how student concerns regarding (lack of) content warnings will be handled, ensuring that this process avoid simply punitive measures against instructors for student emotional reactions they can't always predict.

Second, instructors and administrators might usefully explore what we expect “successful” interventions look like. Interview participants offered insights into common conceptions of (un)success, which usually center on whether students are able to remain in or return to class, receive a passing grade, and develop their writing abilities in some way. Most participants told at least one story of how making allowances for poor attendance and late work enabled them to support students through distress. For example, Thor describes a recent student who communicated with him throughout the semester about ongoing issues with depression, and even though the student accrued numerous absences, Thor felt able to make some allowances so that the student still successfully completed the course, without compromising the rigor and fairness of his course. Other positive stories from interviewees involved the instructors being able to help students improve their writing about prior or ongoing traumatic experiences. For example, Daniel and James both recalled working with students who wrote about their traumatic experiences, and both professors felt those interactions were positive because they were able to ensure the student was connected with outside, trauma-specific resources and then re-center their interactions with the students

around developing the students' writing abilities. James in particular felt that he successfully communicated respect for his students' intelligence and abilities in poems about her prior traumatic experiences, navigating the tricky line between honest critique and empathetic response to the student's suffering. By contrast, instructors who reported negative experiences supporting distressed students most often felt those interventions were unsuccessful because the instructor found out about the issue too late to make accommodations or the student disappeared from class, despite the instructors' attempts to offer support. James talked the most about the "disappearing student" and noted that when he tries to work with students who are struggling to attend class and keep up with the workload, "8 times out of 10 the performance is just permanently compromised," and the student ends up failing the course. Both positive and negative stories about faculty's attempts to support students through distress show that most often, successful interventions are defined by faculty's ability to get the student academically back on track and connected with the Counseling Center, Student Care Team, or other resources as appropriate.

However, academic success and retention are only one part of the recovery process for those dealing with trauma or other distress, and more complex understandings of successful student support can enable more appropriate interventions. Of course, faculty and administrators' job is to educate students, so this focus on successful completion of coursework (so long as mental health crises are addressed first) is appropriate. However, academics are only one part of a students' life, and therefore only one part of their recovery, and as I explain further in the next section, trauma and recovery are ecological, meaning that they exist in and are influenced by individual, interpersonal, community/organizational, societal, cultural, and temporal factors. These holistic understandings are necessary context

to the issues inhibiting students' academic success and can assist in isolating the help that will be most productive, including which referrals and resources are most appropriate. This holistic understanding also serves as a better foundation for designing policies and procedures surrounding support, because our understanding of what makes a "successful" intervention bears important consequences for how we understand solutions for supporting students through distress. Furthermore, a deeper, ecological understanding of successful interventions on behalf of students may help faculty better understand the disconnect between available university resources and student outcomes desired by faculty/administrators; it provides some reasoning for why common interventions have not worked in particular cases with individual students.

Third, and related to the previous point, administrators and instructors should consider how "support" might include proactive measures not only dependent on students disclosing their trauma or explicit manifestations of distress that come to our attention as disruptions in the students' academic experience. Of course, there are plenty of university offices that take a proactive approach by, for example, performing mental health screenings, advertising their services around campus, or conducting public awareness campaigns about specific traumatic issues, such as PEACC's "Shift" campaign that aims to create a campus culture where individuals own their part in combating interpersonal violence, rather than tolerating it. However, we might also think about ways to make the university environment more comprehensively trauma-informed by infusing trauma-informed principles across all areas of campus, in ways informed by the social-ecological model described in the next section. As I will also discuss in the next section, clinical literature on trauma-informed organizations offers many suggestions for such a comprehensive approach, which could

include training for instructors in principles for creating classroom environments in which traumatized students experience safety and empowerment. It could also mean using trauma-informed principles when creating new policies for individual offices/departments or the university as a whole. Having a university more fully supportive of distressed students could take more pressure off of faculty's sense of responsibility for responding to student distress and maximize the chances that interventions are successful.

A fourth area that merits more consideration concerns the relationship between principles and policies designed to support students undergoing distress. Policies and procedures may be necessary, but they are not sufficient, as evidenced by the instructors mentioned earlier who feel policies inhibit their contextualized responses to individual distressed students. Institutions might therefore make more visible the principles necessary for thoughtful and contextual implementation of policies/procedures. Put another way, this area for exploration concerns the spirit of the law versus the letter of the law: Policies are strict and are intended to be followed exactly (though some policies are somewhat flexible in practices) for a variety of legal, ethical, and practical reasons. Principles, on the other hand, can be developed locally in ongoing, organic circumstances in ways that top-down mandates cannot. When policies are necessary, they should be written to protect and inform faculty and students but should be flexible enough to allow faculty to make judgment calls on the ground in order to remain consistent with trauma-informed principles. Policies should also make clear the difference within institutional policy documents between what is a guideline or "best practice" and what is a rule that all faculty must follow. Such distinctions between policies and principles—and fostering principle-driven policies—help mediate faculty's

skepticism toward university support by clarifying what freedom faculty have to act in the best interest of their students and where the real liability issues may reside.

Rethinking how we understand institutional support for students in distress will thus help us have more fruitful conversations about skillful use of available university resources to achieve desired student outcomes—to help them academically and to generally promote their resiliency. As faculty and administrators think through these issues and how they apply to their own disciples, clinical literature offers resources for acting on such reconsiderations and implementing trauma-informed principles across an entire institution. In the next section, I demonstrate aspects of that literature that would be most useful for writing teachers and writing program administrators to influence our direct spheres of influence and the university more broadly.

Clinical Perspectives on Implementing Trauma-Informed Pedagogy Institutionally

Clinical social work has a long history of implementing trauma-informed practices across institutions, including institutions like K-12 schools or nonprofits that do not provide direct, trauma-related services but nevertheless are well-positioned to support trauma survivors by implementing trauma-informed practices. There is therefore a rich body of clinical scholarship that provides concrete steps, strategies, and tools for influencing large and small institutions to become more trauma-informed. In this section, I describe some of this scholarship that might most productively address the institutional concerns cited throughout this chapter and help produce writing programs that adequately support individual instructors' trauma-informed teaching, as well as potentially influencing the broader university.

Much scholarship devotes attention to explaining in concrete terms what it looks like for institutions to become trauma-informed at all levels of an organization, and these similar articulations all center on forwarding a social-ecological model of trauma. By the 1990s, psychologists and social workers commonly understood trauma as “ecological threats, not only to the adaptive capacities of individuals but also to the ability of human communities to foster health and resiliency among affected community members” (Harvey 5). In addition to describing how traumatic events affect communities and what capacities support community resilience, this model also “posits that each individual’s reaction to violent and traumatic events will be influenced by the combined attributes of those communities to which s/he belongs and from which s/he draws identity” (Harvey 5). The three main beliefs operationalized in a social-ecological model (as summarized by SAMHSA), include: environmental factors influence well-being; the (dis)connect between an individual’s behavioral, sociocultural, and biological needs and the available resources greatly determine the individual’s level of health and well-being; and prevention, intervention, and treatment must address individual, interpersonal, *and* community systems (14).

On the next page, Figure 1 (which is used widely by public health organizations like the Centers for Disease Control and Prevention) visually represents the relationship between individuals and their environments in the context of trauma, and Figure 2 further details the environmental factors that influence individuals’ responses to trauma.

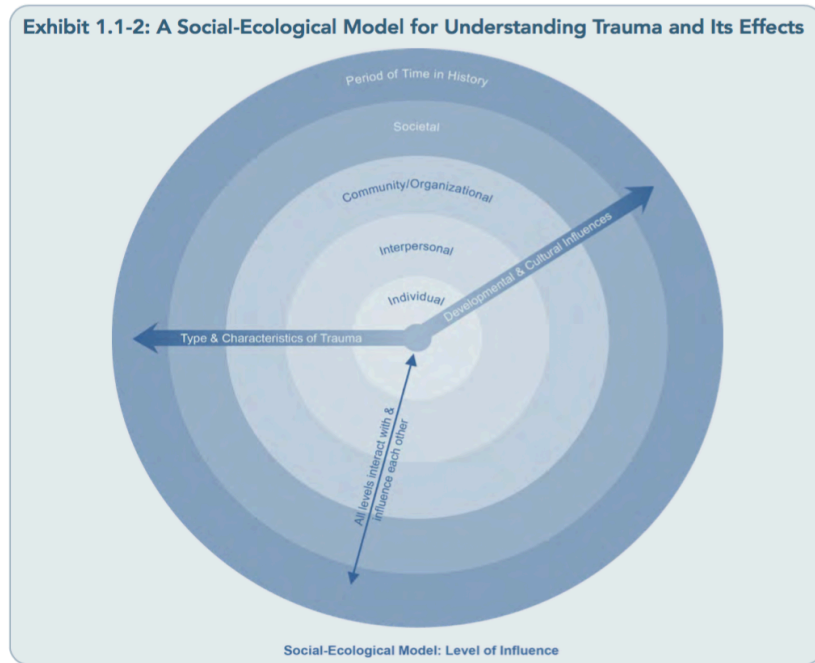


Figure 1: Social-Ecological Model Diagram (SAMHSA)

Exhibit 1.1-3: Understanding the Levels Within the Social-Ecological Model of Trauma and Its Effects

Individual Factors	Interpersonal Factors	Community and Organizational Factors	Societal Factors	Cultural and Developmental Factors	Period of Time in History
Age, biophysical state, mental health status, temperament and other personality traits, education, gender, coping styles, socioeconomic status	Family, peer, and significant other interaction patterns, parent/family mental health, parents' history of trauma, social network	Neighborhood quality, school system and/or work environment, behavioral health system quality and accessibility, faith-based settings, transportation availability, community socioeconomic status, community employment rates	Laws, State and Federal economic and social policies, media, societal norms, judicial system	Collective or individualistic cultural norms, ethnicity, cultural subsystem norms, cognitive and maturational development	Societal attitudes related to military service members' homecomings, changes in diagnostic understanding between DSM-III-R* and DSM-5**

**Diagnostic and Statistical Manual of Mental Disorders, Third Edition, Revised* (American Psychiatric Association [APA], 1987)

***Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (APA, 2013a)

Figure 2: Social-Ecological Model Description (SAMHSA)

For composition program administrators especially, and individual instructors (who might view their classrooms as micro-institutions), the social-ecological models offers promising perspectives on student distress that might enable us to support students more

effectively. Importantly, this perspective shows us how a student's recovery does not rest on an individual instructors' interventions alone, but on the cooperation between instructors, the student, university offices, and the student's broader communities, and this understanding leads to other benefits. It also helps explain why some interventions with distressed students may not achieve the intended outcome of helping the student complete the course and develop their writing skills. For instance, we might become more aware of reasons students do not accept referrals (e.g. stigma associated with receiving help in students' home community, prior experience of microaggressions when seeking those institutional resources previously) or why some students respond so differently to the same type of trauma or distress.

The social-ecological model also helps us be more creative about what types of referrals we could make. Knowing that individual, interpersonal, community/organizational, and cultural factors, among others, influence trauma and its effects means we might also think of resources that stem from or address each of those spheres. For example, for a student dealing with race-based trauma, referrals to counseling offer a *community/organizational* resource for addressing the *individual* impacts or symptoms of trauma, while *interpersonal* peer resources—such as connecting the student with student-run organizations designed to connect students with the same cultural heritage—might help address the *cultural* aspects influencing trauma.

Finally, the social-ecological perspective helps understand how trauma and distress operate within the university system and helps us identify in what ways we might influence that system to be more beneficial to survivors of trauma and other distress. Knowing, for instance, that students often report how beneficial their experience at the Counseling Center

was and that the Counseling Center is often under-resourced and overburdened with requests for counseling might encourage us to use our influence within the university to advocate for better resources for the Counseling Center to continue supporting more students. On a smaller scale, knowing the importance of peer support for navigating students' distress might mean we design peer mentoring programs within our composition programs that, though perhaps not dealing with students' trauma directly, might nevertheless help ease the academic burdens distressed students face in ways that faculty—given their responsibilities to uphold academic rigor and act as authority figures in the classroom—cannot. Thus, this social-ecological perspective does not necessarily advocate for more institutional resources, but better/different contextualizing of those resources in a deeper understanding of trauma, distress, and recovery, as well as more creative distribution of, referral to, and influencing of those resources.

In addition to this more theoretical perspective on implementing trauma-informed care across institutions, clinical literature offers many examples of practical strategies for this work. In particular, SAMHSA offers 16 strategies for implementing trauma-informed principles across an institution as an ongoing process, including using trauma-informed principles in strategic planning, conducting an organizational self-assessment, applying culturally-responsive principles, creating a peer support environment, and obtaining ongoing feedback and evaluations, among other principles (SAMHSA *TIP 57*; see also Appendix 2). This approach shows how building a trauma-informed organization such as a writing program does not rely on specific individuals, sets of policies, training workshops, and so on, but on all of these things, on a holistic and ecological understanding of the people, places, policies, and objects involved in the organization and how they might also contribute to

trauma survivors' experiences. Though this guide provides a broad, overall approach and general set of strategies, it can be supplemented with an approach forwarded by social work scholars Roger D. Fallot and Maxine Harris. Fallot and Harris offer an approach to "creating cultures of trauma-informed care" that are more general and easily adaptable to the work of writing programs. Fallot and Harris offer 4 steps and several assessment/planning resources, including sample assessment questions, that administrators can use to assess current practices, identify needs, and track their progress in creating a trauma-informed culture in their writing program. Several other similar, free, and research-validated "agency self-assessment" tools are available online, such as those created by the Trauma-Informed Care Project and the American Institutes for Research self-assessment (included in Appendix 2). Together, all these resources offer potential support and concrete steps writing instructors and program administrators can take to infuse trauma-informed approaches to pedagogy across an entire writing program or even just an entire (a sort of "micro-institution").

Literature on implementing trauma-informed care institutionally further explores the main difficulties involved in implementing trauma-informed principles within institutions. For instance, Mary Vaughn and Glen Stamp note the difficulty of implementing empowerment principles within institutions, which necessitate hierarchy and limitations over individual autonomy in order to manage resources and promote safety for all individuals involved in the organization. That is, the trauma-informed principle of empowering individuals to be/feel autonomous often contradicts with the control and authority organizations feel they need in order to run effective organizations. Because of issues like these, Elliott et al discuss the importance of multiple and frequent feedback cycles with clients to discover the actual impact of practice that may be intended to support survivors but

do not always accomplish their goal. For instance, the authors' study indicated that though service providers thought calling clients at a sexual assault shelter "survivors" would be more empowering than calling them "victims," many of the survey respondents preferred to be called clients, because that label doesn't necessarily define them with (only) the trauma they experienced. Furthermore, such calls for participant feedback are difficult in academic settings because universities like UofL serve significantly more people and are beholden to many stakeholders. Although there is no single solution to these obstacles, knowing about these common concerns highlighted in clinical literature can help writing programs address them in ways appropriate to their local context. SAMHSA handbooks and other clinical resources further discuss these and other common institutional barriers to supporting trauma survivors that writing instructors and program administrators can use to anticipate possible problems with infusing trauma-informed approaches to pedagogy across their entire class, the entire writing program, and in the broader university structures in which they may have influence.

Conclusion

Because the barriers to trauma-informed pedagogy cited in this chapter point to systemic difficulties, they may perhaps be the most painstaking and time-intensive to address. However, clinical literature is clear that institutional implementation of trauma-informed principles is necessary for fully supporting trauma-survivors, because trauma, its impacts, and recovery are ecological in nature. In my concluding chapter, I combine the trauma-informed approaches highlighted in the first two chapters with this institutional perspective to, finally, define a trauma-informed approach to writing pedagogy that, though

focused on enabling individual instructors to enact trauma-informed principles and practices in their classrooms, locates this work in the institutional contexts in which instructors/program administrators participate and influence. The conclusion and Appendix 2 thus aim to enable both faculty and administrators to enact trauma-informed approaches to writing pedagogy, through which they (especially administrators) can influence institutional structures to increasingly support and sustain trauma-informed teaching. As a result, I hope this project will contribute to our field's efforts to promote more equitable, inclusive institutions.

CHAPTER V
CONCLUSION: SIX CRITERIA FOR SUPPORTING RESILIENCE, INCLUSIVITY,
AND EFFECTIVE TEACHING THROUGH TRAUMA-INFORMED WRITING
PEDAGOGY

In this dissertation, I have examined three recurring objections that limit writing instructors' ability to support students academically through trauma and distress—"students are coddled," "teachers aren't therapists," and "institutions don't support trauma-informed teaching"—noting both the valid concerns highlighted by each objection and how writing studies should rethink those objections to develop a fuller understanding of our role in responding to student trauma as educators. I have also summarized key threads in clinical, social work literature on trauma and Trauma-Informed Care that could productively expand and deepen our understanding of trauma's impacts on education. I focused on the empowerment model in Chapter 2, psychological first aid, RICH relationships, listening strategies, and self-care in Chapter 3, and the social-ecological model, strategies for building trauma-informed organizations, and the empowerment dilemma in Chapter 4. Though clinical literature is more expansive than can be captured in this—or many—dissertations, the threads I've chosen respond directly to the main concerns instructors have about trauma-informed teaching and offer research- and practice- based guidance on anticipating and responding to student trauma, in ways that can be mobilized relatively quickly and effectively into writing classrooms.

In this conclusion, I describe what a trauma-informed approach to writing pedagogy entails by meshing and building on the theories, principles, and practices introduced in Chapters 2-4. I explain six criteria of a trauma-informed approach to writing pedagogy and introduce the tools provided in Appendix 2—a handbook on Trauma-Informed Writing Pedagogy⁹—and designed to help administrators and instructors apply these tenets intentionally and effectively. Because decisions about responding to student trauma are based on complex and diverse contexts, this trauma-informed approach avoids prescriptive renderings of classroom practices as much as possible; the heuristics and reflective questions are designed to be flexible, accomodating a range of teaching styles/philosophies and institutional contexts. This instructional approach will address concerns writing faculty have daily in the classroom, provide better support for distressed students, and promote resilience and inclusive educational systems.

To illustrate how what I call Trauma-Informed Writing Pedagogy (TIWP) works and practical ways to implement it, I borrow from Douglas M. Stevens and Mary Brydon-Miller’s “structured ethical reflection” (SER) and Heidi McKee and James E. Porter’s heuristic-based approach to the ethics of digital writing research. Both projects enable scholars to make complex ethical decisions by visualizing the factors they need to consider and offering a structured, heuristic-supported way to weigh choices. Doing so, according to Stevens and Brydon-Miller, offers a systematic way to identify core values and ensure they are implemented across an entire (in their case) research project. McKee and Porter similarly argue that such a heuristic-supported approach further serves to avoid “a set of simplistic

⁹ This handbook has largely been written to be applicable to instructors and administrators at any institution. However, because responding to student trauma largely depends on institutional and classroom context, this handbook must be adapted to the institution by the administrator or instructor attempting to use it. As a result, the handbook in the Appendix has been written with the context of and resources available at UofL in mind.

answers to the issues raised” around difficult ethical questions, and it offers “a procedure for identifying the ethical complexities and for helping researchers make sound ethical decisions” (713). Though these authors have participatory action or digital writing research projects in their purview, I have adapted their approach to identifying salient ethical *teaching* concerns in the context of trauma and helping *teachers* make sound, non-simplistic ethical decisions. Thus, in this conclusion and the subsequent Appendix, I provide several visualizations of key principles regarding trauma as well as adaptable templates that teachers can re-use in their own classrooms to support a more complex and comprehensive response to student trauma.

Trauma-Informed Writing Pedagogy

In this section, I describe six criteria underpinning a trauma-informed approach to writing pedagogy. These criteria are based on a summary of the clinical social work literature explored in my earlier chapters. I give a detailed description of each criterion and the related tools in the Appendix, which is designed to enable writing instructors and program administrators to thoughtfully infuse these criteria into their teaching and administrative work. Though based on decades of clinical scholarship, these criteria are meant to be starting points, conversation starters, rather than a fixed and definitive list of what constitutes trauma-informed teaching; that is, I intend for the TIWP handbook to be a pilot version that evolves and deepens with each intentional use by writing instructors and administrators, much like social work literature on Trauma-Informed Care has self-consciously improved over decades of research and practice. Nevertheless, I offer these six criteria as a response to the needs and barriers identified by writing studies scholars in our journals and my study interviews.

Together, these criteria forward an approach to responding to student trauma in the classroom that does not rely on explicit disclosures or wait for a problem to occur, but instead proactively infuses trauma-informed principles and practices throughout all aspects of writing instruction.

Before I describe each criterion, I offer a reminder of the social-ecological model of trauma, which functions as an informing—if not always stated—perspective throughout all six criteria. As discussed in Chapter 4, the social-ecological model views trauma in its social context, accounting for individual, interpersonal, community/organizational, societal, cultural and developmental, and temporal factors that all affect how an individual experiences and responds to trauma (see Figures 1 and 2 in Chapter 4). Writing administrators/instructors might find this model has much in common with the ecological model of writing, which views writing in a broader context of dynamic, interconnected, emerging, distributed systems and the resultant mutually-shaping interactions among texts, people, and their literal and ideological environments (Cooper; Syverson; Edbauer; Fleckenstein et al). Thus, in some ways, the social-ecological model bears similarities to how we're already primed as writing scholars to view our interactions with students in the classroom. A key difference is how the ecological model of writing visualizes the relationship among these contexts; whereas the social-ecological model is frequently drawn as distinct and static categories in a table or sometimes overlapping circles, scholars picture the ecological model of writing as a web, where all parts of the web connect, and changes on one part affect all the others. College writing instructors might therefore usefully combine the two models to view TIWP as part of the university's overall mission to educate all students and by attending to the interlocking, co-determining, dynamic web of individual, interpersonal, community/organizational,

societal, cultural/developmental, and temporal factors. From this combined perspective, experiences with student trauma in the classroom are highly complex and impacted by a range of contextual factors, and our and our students' actions send ripples to other parts of the web. This model provides a number of important perspectives that influence any strategy for supporting trauma-informed teaching, such as:

- Context(s) of student trauma are always changing, and TIWP must therefore be flexible, incorporate reflexivity, and update regularly.
- Administrators/instructors must maintain a broader picture of stakeholders (offices, university officials, students, faculty, etc.) or points in the “web” that influence or are affected by the decisions they make with regard to student trauma.
- When designing student support, administrators/instructors should consider how “support” might intersect with any/all dimensions of the social-ecological model.

As I explain each criterion defining TIWP, I invite the reader to keep in mind this mess of actors and contexts.

#1: TIWP must be founded on accurate and complex understandings of trauma and how it might manifest in the classroom.

Trauma-informed writing administrators/teachers need an accurate and complex working definition of trauma on which to base their responses to student trauma survivors. As mentioned in my introduction, rhetoric and composition has traditionally made most use of humanities-based definitions of trauma in our scholarship, and those definitions are

theoretically rich and productive in some ways. Participants often referenced these perspectives when asked what they understand trauma to be. Daniel, for instance, cited Holocaust studies, psychoanalysis, and the literary studies uptake of scriptotherapy by scholars like Suzette Henke as influencing his understanding of trauma, and James similarly cited Suzette Henke and other literary discussions of trauma (e.g. in scholarship on African-American literature). Jack and Joseph referenced theories that position trauma as a “narrative” disruption in an individual’s life story. Though participants’ knowledge of trauma was influenced by several sources—including personal experience and conversations with professionals in counseling or psychology—these humanities-based understandings of trauma are clearly central components in how these writing instructors perceive of trauma.

However, I have argued in this dissertation that writing instructors must also be familiar with clinical definitions of trauma, provide more on-the-ground usefulness in classroom settings. As a reminder, SAMHSA defines trauma as:

an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being. (xix).

And of course, this rendering of trauma exists within the context of the social-ecological model described above, which helps explain why individuals have widely-varying responses to the same type of trauma and why healing might look different in each case. Though participants sometimes expressed an understanding of trauma that coheres with this definition (especially Joseph and Thor), most foregrounded humanities-based theoretical

perspectives that, though not necessarily or always inaccurate, offer a less precise rendering of how trauma impacts students.

The SAMHSA definition offers faculty not a means for *diagnosing* whether a student has been traumatized—that’s a very difficult and unnecessary thing for a teacher to do—but it does reorient our perception of students experiencing symptoms of acute distress, by highlighting the following characteristics of trauma:

1. It can be caused by a single event or be the cumulative effect of stressful/threatening events or circumstances. In other words, even if a student hasn’t experienced one of the single tragic events we usually think of as traumatic (e.g. serious injury, sexual assault), other aspects of their personal history (e.g. chronic stress from an unstable home life or race-based microaggressions) may have also been traumatic.
2. These events or circumstances are experienced by individuals as threatening, regardless of whether others experience the same events or circumstances as threatening. In other words, individuals may have diverse responses to the same stressful events or circumstances because diverse personal and social factors influence perception of these events or circumstances. We should therefore avoid judgments about how an individual responds to events that we may or may not find traumatic and be aware that less visible personal and social factors may be contributing to the students’ experience and response to traumatic stress.
3. Trauma exerts negative influences on a wide range of factors necessary for well-being, including mental, physical, social, emotional, or spiritual functioning. This broadens our expectations of how trauma survivors behave. For example, one

common trope focuses on an individual's emotional responses and triggering after traumatic events, but we should also be aware of, say, the social impacts (the effect on the individual's sense of community and social support) or chronic health conditions caused by long-term stress, both of which adversely affect a student's ability to be present and successful in class.

In addition to what trauma “is,” it's useful for teachers to have a working understanding of the how traumatic experiences and individuals' coping mechanisms might manifest in classroom environments, which is illustrated in Figure 2 in the Appendix. The use of “response” versus “symptoms” in this chart is intentional here. Clinical literature emphasizes the need to validate survivors' experiences and approach them in a respectful and strengths-based manner. In part, that means avoiding the tendency to pathologize survivors' responses to trauma as “symptoms,” implying that something is wrong with the individual; instead, clinicians insist on asking not “what is wrong with you” but “what happened to you” and viewing any “symptoms” as logical adaptations that help the individual cope with adverse, stressful circumstances. Even if those responses are ultimately destructive (e.g., substance abuse) and should be replaced with healthier coping strategies, clinicians nevertheless emphasize the importance of normalizing common responses to trauma, in order to avoid blaming or shaming survivors, which increases feelings of disempowerment and can worsen unhealthy coping mechanisms. Instead, they argue for validating the strength and courage it takes to survive trauma, which promotes the sense of empowerment/inner strength that's a necessary condition of trauma resilience. Figure 3 in Appendix 2 is therefore designed to help instructors be trauma-informed by increasing their awareness of diverse logical responses to trauma and how they might visibly or invisibly affect academic behavior.

It is not intended to be used as a *diagnostic* tool helping the instructor determine whether a student is going through trauma, because it's difficult and unnecessary to pinpoint whether a certain behavior stems from trauma or something else entirely. However, this chart can be used to increase the instructor's "psychological savvy" (to borrow interview participant Daniel's term), or their awareness of trauma's impacts on learners and the learning space, as well as their ability to interpret even disruptive student behaviors as learned coping mechanisms rather than simply personal weaknesses.

Finally, instructors should have a basic awareness of how prevalent traumatic experiences are among college students, a fact I've discussed elsewhere in this dissertation. As a reminder, even conservative estimates show that at least 68% (possibly as high as 85%) of college students have experienced trauma prior to attending college (Vrana et al; Moser et al; Pritchard et al; Bernat et al; Carello and Butler). Additionally, more students will experience trauma during college. For example, according to a 2015 study, between 20-25% of college women and about 5% of college men are sexually assaulted in college (Cantor et al). Furthermore, college-aged women are at the highest risk for intimate partner violence (Centers for Disease Control and Prevention). College students may also experience the loss of a loved, long-term bouts with anxiety and depression, harassment or discrimination based on race, gender identity, sexual orientation, and other identity categories, in addition to many other traumatic experiences. This prevalence contrasts with the assumption by some (including respondents to my survey of UofL instructors, the American Association of University Professors, and others) that trauma affects the minority of students, an assumption which likely stems from the fact that students often don't disclose their trauma to instructors for a variety of reasons (e.g. fear of being stigmatized, discomfort with sharing personal

details, cultural norms against sharing personal information, not being ready to acknowledge or confront the trauma yet, fear of being reported, fear of retaliation by perpetrator). Instead, research data clearly demonstrates that instructors can assume that the majority of their students have experienced, will experience, or are currently experiencing something traumatic, and as data about common responses to trauma shows, those traumatic experience impact their academic experiences as well.

This awareness translates to teaching practice in several ways. We must build in teaching policies and practices that assume this majority and are trauma-informed, promoting resilience *without* disclosure. I reject arguments by some (c.f. AAUP; Alton) who suggest we cannot help traumatized students unless they make an explicit disclosure. These suggestions deny the prevalence of student trauma, wrongly assume there are no measures we can take without a disclosure, and potentially invite instructors to investigate whether a student has been traumatized, which would be unnecessarily intrusive and possibly emotionally/psychologically harmful. Furthermore, most trauma-informed principles and practices don't rely on disclosures anyway; as noted by Elliott et al, the foundational trauma-informed principles such as safety, trust, collaboration, and so on are generally healthy and respectful principles appreciated by all individuals, regardless of whether they claim a traumatic past, so even students who have not experienced much trauma will still benefit from TIWP.

#2: TIWP should be implemented systematically across all aspects of a class(room), writing program, and university.

Ideally, TIWP should take place within organizational contexts that support this instructional approach in order to cohere with the social work principle that Trauma-Informed Care must be implemented at all levels of an organization (Dass-Brailsford; Elliott et al; SAMHSA). In part, this is because trauma is not just influenced by personal factors, but social-ecological factors as well (as discussed in Chapter 4 and above). Additionally, as stated in Chapter 4, institutional support for trauma-informed teaching is necessary for trauma-informed principles and practices to have their full impact. In order for faculty's referrals to be effective for distressed students, those resources have to be easily accessible. In order for faculty's efforts to sustain a safe and calming environment to be most successful, those efforts can't be undercut by lack of safety in all other college environments. In order for faculty to be savvy implementers of primary "first aid" mental health strategies, they need the time and resources to go through initial and continuing education. And for faculty to maintain a healthy self-care plan, they need institutional systems that respect their professional boundaries, provide appropriate self-care resources, and support a campus culture that acknowledges self-care as worthwhile professional labor. These are just a few examples of why universities as a whole must support trauma-informed approaches to pedagogy in order for instructors' efforts in the classroom to be most effective.

Writing instructors and administrators must therefore devote attention to systematically implementing TIWP across three main organizational levels: the university, the writing program, and the classroom. First, acknowledging the likelihood of institutional sluggishness regarding change, writing faculty/administrators can still take action to call university structures to more systematically implement trauma-informed practices in all of its services, but particularly in student services offices and in faculty pedagogical training across

all disciplines. For example, we can begin by: supporting mental health awareness campaigns; working with other trauma-informed university offices/departments (especially counseling and social work) to support trauma-informed policies and training; publicizing available online resources that could support trauma-informed teaching (e.g. searchable databases of student support services, training materials, webinars); acting on university committees related to student mental health; and so on. The “Guide for Institutional Support” in the Appendix assists administrators in identifying priorities for influencing broader university structures to become more trauma-informed.

Second, writing instructors and administrators need not wait for full university support before implementing this first criterion in spheres over which they have more direct influence: writing programs (and their home departments) and classrooms. Writing faculty/administrators can use the social-ecological model to develop more effective *departmental/programmatic* support for students undergoing trauma or other distress. For instance, rather than merely instructing faculty to refer distressed students to counseling as the default response, administrators—acknowledging that university counseling centers are often overburdened and under-resourced—can help faculty determine other university offices or organizations that might make a more effective referral (e.g. the Student Care Team, a student organization that might help a student in crisis feel less isolated). Administrators should also consider the range of organizational factors that might become more trauma-informed within their department/program. For example, administrators can design:

- **Policies** that are clear and practical, supporting instructors in making decisions and setting boundaries, based on best practices in clinical literature. This can include guidelines for when and how to use trigger warnings, how to

deal with a particularly disruptive student, and how to spot and respond to possible liability issues (e.g. issues with mandatory reporting).

- **Internal Procedures and Planning**, including using trauma-informed principles during strategic planning efforts, developing a “disaster plan” for responding to particularly distressed students, ethical guidelines for responding to student grievances using trauma-informed principles, or mission/vision statements that make explicit a commitment to supporting traumatized/distressed students.
- **Training opportunities** in trauma-informed teaching or related skills (e.g. self-care planning, mental health first aid, cultural responsiveness) and/or providing financial or other support/encouragement for faculty who want to seek additional training outside the department. This includes training workshops, orientations, and the training of graduate students in teaching practicums and other pedagogy-focused courses.
- **Online resources** for faculty and students, including links to university or external resources and making training available and accessible online for faculty who are not able to make trainings in person.
- **Physical office spaces** that (as much as possible) connote safety, comfort, and approachability.

Other strategies for supporting trauma-informed pedagogy on a departmental/programmatic level include: assigning a staff member or committee to perform a needs assessment and recommend/implement trauma-informed departmental changes; establishing processes that support continuing education and regular feedback from faculty

and students to re-evaluate the effectiveness of trauma-informed practices; developing collaborations with other trauma-informed offices, such as the Counseling Center or social work/counseling department; and so on. Further heuristics/resources for planning how to implement TIWP across a writing program are included in the Appendix.

Third, individual instructors can also implement this criterion even in the context of a single classroom by paying attention to the institutional context of their classes and by picturing their classes as micro-institutions. In fact, my study participants often viewed this as part of their jobs as instructors. Daniel, for instance, discussed the importance of helping students gain “an aerial view of the maze” of college, because he feels students are more successful in his class when they understand what role the class serves in their education. Joseph recalls partnering with other university offices (especially the Counseling Center and the Dean of Students) as both a faculty member and writing program administrator, noting that working with those offices gave him a broader view of student support. In addition to paying attention to the broader institutional contexts of their classrooms as Daniel and Joseph do, instructors can implement this criterion by thinking tactically about how they will implement trauma-informed principles across *all* aspects of their class, including syllabus/policy development, formal/informal reading and writing assignments, discussions, partner and group work, peer and instructor feedback on writing, the physical space of the class, and so on.

Several tools in the Appendix provide support for instructors and administrators seeking to implement TIWP across a university, writing program, or classroom. The “Guide for Institutional Support” section offers advice and strategies particularly suited for administrators, including an “Agency Self-Assessment” guide and a list of 16 steps provided

by SAMHSA for implementing trauma-informed principles and practices across an organization. Figure 9 includes a heuristic to help instructors intentionally infuse trauma-informed principles across all aspects of their teaching. Finally, Figure 4 helps both instructors and administrators to think more carefully about what the social-ecological model suggests about the context of student trauma in their institutions.

#3: TIWP views education as its primary goal and student emotional safety as a necessary condition of learning.

This criterion is based on social work literature on *teaching*, which identifies the distinctions between learning and therapy environments, noting that instructors cannot also be their students' therapists and must set clear boundaries in the classroom space. This is part of what Carello and Butler mean when they say that education should be the primary goal of trauma-informed teaching. However, the same literature (including Carello and Butler) also notes that emotional safety is a necessary condition of learning, and it's impossible for instructors to completely exclude themselves from interacting with their students' emotional lives. This perspective may remind some instructors of Abraham Maslow's hierarchy of needs, which has been used in writing pedagogy research. Maslow argued that deficiencies in physiological, safety, belongingness, and esteem needs must be met before an individual can pursue what he terms "growth" needs (cognitive, aesthetic, self-actualization, and self-transcendence). Educators (including writing instructors) have long applied this hierarchy to academics, noting that students who experience physiological and emotional threats don't learn as effectively (Murphy et al; Hairston; Sitler; Clark and Wiedenhaupt). Thus, instructors must attend to safety in the classroom *as part of* their primary goal of educating

students, because this is a condition of creating effective learning environments. Furthermore, writing education promotes a number of skills—communicative, social, academic, self-reflective, etc.—that can promote resilience in the face of difficult circumstances by fostering a sense of personal competence and self-efficacy (Moser et al; SAMHSA; Deletiner; Rinaldi; Judith Harris). Rather than elevating either educational rigor or psychological safety above the other (as often done in debates about therapeutic models of writing instruction), this third criterion views education and psychological safety as mutually dependent—psychological safety as a condition of effective learning, and effective learning as means to foster trauma-resilience skills that promote an individual’s emotional safety throughout life.

To address this issue, instructors should develop skills for providing primary assistance to students in distress until they can be connected with more full mental health (and other) services. Programs like Mental Health First Aid (developed by the National Council for Behavioral Health) or Psychological First Aid (developed by the National Center for Post Traumatic Stress Disorder) have been developed by clinicians to enable members of the public (including educators) to identify and respond to mental health crises in trauma-informed ways. They teach skills such as: assessing risk of self-harm; identifying basic/primary needs; listening non-judgmentally; promoting a sense of safety, calm, comfort, and connectedness; encouraging self-care; and connecting with appropriate professional and other resources. Though both programs address similar issues/skills and can be applied to the personal crises students face, Psychological First Aid is more concerned with addressing the aftermath of disaster or terrorism, and thus Mental Health First Aid may be more appropriate to the daily concerns of writing instructors. Local, in-person training in Mental Health First

Aid—an 8-hour course—can be found on [MentalHealthFirstAid.org](https://www.mentalhealthfirstaid.org), and this is the best means for learning these skills. However, instructors short on time and resources can use the Figure 5 in the Appendix to learn about Mental Health First Aid in the mean time.

A second skill set involves developing awareness and guidelines for whether to use trigger or content warnings in a classroom. As stated in Chapter 2, though there may be good reasons to avoid trigger warnings in some cases, the risks of re-traumatization for student trauma survivors are significant, and administrators and instructors should think carefully about when and how they should use a content alert of some kind. I don't offer any hard-and-fast rules here, nor is it really necessary for instructors to use the term trigger warning when alerting students to possibly re-traumatizing course material. Instead, I suggest that administrators create programmatic guidelines for helping faculty to determine whether and how to give such an alert, and instructors can also create such guidelines for themselves so that attention to acute emotional safety concerns like re-traumatization is structured into course design. Some factors to consider in creating these guidelines include:

- Whether current students have disclosed any particular type of trauma
- Whether current events on or around campus might be causing additional and significant distress
- Whether class material will present known common triggers, such as depictions of war-time violence, abuse, assault, or threats to historically oppression populations
- The level of intensity or graphic-ness of the material
- The level of engagement you expect from students
- How to explain to students the difference between being productively challenged and emotionally harmed

- What opportunities instructors are willing to give students who feel they may be harmed by course material (e.g. sit quietly, step out into the hall, complete an alternative assignment)

Figure 6 in the Appendix provides further information about how to decide whether to give trigger warning and practical advice on how to give one. The “Guide for Institutional Support” further provides assistance to administrators in developing support for instructors making these sorts of complex decisions.

Mental Health First Aid and trigger warnings help instructors respond to more intense encounters with student trauma that has manifested explicitly in the classroom, but other aspects of TIWP discussed in the next section infuse the principle of safety in less obvious ways. The principles described in the next section promote safety by encouraging all members of the classroom to treat each other with respect, and by promoting an environment in which individuals share power (as much as possible) rather than always exerting “power over” each other; both respect and power sharing are ways to help individuals feel the sense of control and empowerment that is compromised by trauma/distress. The next section elaborates on such trauma-informed principles that should shape classroom practice, and safety is implicit in all of these principles.

#4: TIWP should infuse principles of safety, trust, collaboration, choice, respect, information sharing, and hope, to support a strengths-oriented environment.

Because we can assume trauma’s prevalence in our classrooms regardless of whether students disclose, instructors should infuse trauma-informed principles across their teaching practices in order to promote the strengths-oriented environment that has been shown to help

promote resilience among trauma survivors, as well as representing generally respectful ways to interact with people that can be appreciated by all students no matter whether they claim a traumatic past. The empowerment model (described in Chapter 2) and the RICH relationships model (described in Chapter 3) highlight the key principles of a trauma-informed approach to teaching, which collectively include: safety, trust, collaboration, choice, respect, information sharing, and hope. How these principles manifest in practice in specific classrooms may vary depending on instructor style, type of writing class, the students, and other classroom factors. Therefore, Figures 7 in the Appendix illustrates possible ways those principles might apply across all dimensions of teaching and administration, and Figure 9 provides a template to help instructors strategize practices that can accomplish all these principles.

The meanings of these principles can and should be negotiated with students and instructors in the context of a specific class, because each term can be nuanced depending on the context of the interaction and the individuals involved. However, below are baseline definitions for these terms, based on clinical scholarship, writing studies scholarship, and interviews with study participants:

- **Safety:** Creating a classroom environment that is physically- and emotionally-non-threatening and therefore invites all members of the classroom to opt-in to more full participation in classroom activities. This does not mean ridding the classroom of everything that causes discomfort, including critique or difficult reading material, but thoughtful attention to implementing non-harming, non-judgmental practices.

- **Trust:** Being transparent about classroom policies and activities, and creating a predictable and consistent environment in which individuals feel reasonably assured that other members of the classroom, especially the instructor, are seeking their best interest. Also includes respecting individuals' expectations of confidentiality and making limits of such confidentiality explicit.
- **Collaboration:** Inviting individuals to use their knowledge and expertise to shape activities and services that affect them. This also includes strategies to share power beyond traditional hierarchies of classroom relationships, such as by inviting students to have a hand in shaping assignments or evaluation criteria.
- **Choice:** Presenting individuals with options about which they can make informed choices rather than directives about what they have to do (where appropriate, and excluding, for example, legal guidelines that all individuals are obligated to follow).
- **Respect:** Honoring individuals' knowledge, perspectives, strengths, needs, culture, as well as their right to make decisions about their own lives. This includes avoiding the tendency to pathologize trauma responses as symptoms instead of logical (if at times problematic) adaptations to difficult circumstances—evidence of individuals' desire to be resilient.
- **Information Sharing:** Providing individuals with all the information they need to make their own informed choices, including by sharing information about available campus or community resources and how to navigate them.

- **Hope:** Communicating the belief that “things can get better”, “you are capable,” and that “you are not alone,” in regards to both students’ ability to grow as writers and overcome distress.

Criterion 4 contains examples of how to apply these principles in practice.

One means through which to communicate these principles involves active, empathic listening strategies. Since the late 1960s, social work scholars have written about the importance of active listening that conveys empathy in social work practice, noting that fully concentrating on what clients are saying, reflecting back what has been said, and acknowledging/validating the clients’ feelings conveys understanding and builds a trusting relationship (Nugent and Halvorson). As mentioned in Chapter 3, listening is one area of clinical scholarship that writing scholarship has sought to adapt to our work, particularly to the individual writing conference, and listening is also a term that has been richly explored independent of its connections to social work and conferences (Kirsch and Royster; Muriel Harris; Ceraso; Ratcliffe; Cain; Powell and Takayoshi). Notably, Muriel Harris’s *Teaching One-to-One* offers numerous adaptations of active listening to the work of writing instructors, and it is available for free online (see “Resources” in the Appendix). There is much richness to be explored in this social work and writing studies literature, but here, I summarize key practical advice across all these articulations, which include:

- **Open-Ended Questions** that avoid guiding students to particular answers and invite them to elaborate on details regarding their perspective
- **Reflective statements** to check that the listener has understood correctly
- **“I” statements**, especially when there is conflict

- **Affirmation**, expressions of **empathy**, and **avoiding shaming/blaming language**
- **Humility**, especially a willingness to hear out another's perspective and question personal biases
- **Respect**, especially for cultural and linguistic differences
- Privileging **non-directive** problem-solving approaches

More details about these active, empathic listening strategies and how to accomplish them are included in Figure 8 the Appendix.

#5: TIWP should support instructor self-care as a valued, critical component of professional labor.

Instructors should be prepared with a self-care plan, not only to work better with distressed students, but also to increase personal sense of wellbeing and professional quality, which also can improve their work with all students. As discussed in Chapter 2, adequate self-care planning can aid instructors in their responsibility to account for student mental health—insomuch as this is a necessary condition of learning—without becoming their students' therapists and/or bearing too much of an emotional burden as they seek to support students through the distress that's affecting their education. Furthermore, instructors are humans, too, and likely enter the classroom with their own traumatic or otherwise distressing experiences that impact their relationship with students, teaching style, and other aspects of their teaching. Though my focus has been on responding to student distress, instructors being aware of their own distress and learned coping mechanisms helps them to effectively support students.

Study participants talked somewhat briefly about the self-care and self-awareness (a component of self-care) that they feel they need to support students effectively and protect their own wellbeing. Though most faculty value being open and available to their students, they also discussed the importance of placing boundaries on that availability. For instance, Cathy and Dr. Von talked about knowing when to end a meeting with a student that has gone on for too long and become draining. James and Kathryn both discussed placing limits on how much time they spend reading and responding to student emails, an activity that, if they're not careful, can take hours and cause them anxiety. Instructors also discussed how reading student writing about trauma sometimes causes the instructor emotional distress. Consequently, Dr. Von, Cathy, Kathryn, Joseph, and Thor all noted that, although they are open to listening to students who want to disclose trauma, they try to shape assignments so that they do not necessarily invite disclosures. This is particularly an issue in narrative assignments, as illustrated by Kathryn, who used to get narrative essay about intense issues such as parental suicide, mental health crises, and domestic abuse that weighed on her and made it hard for her to assign grades and provide feedback. These examples of boundary-setting were the most common self-care strategies participants mentioned they employ to protect their time and emotional energy, though they might not necessarily have labeled these boundaries as self-care.

In addition to boundaries set for self-care, participants noted the importance of self-awareness on their abilities to support students through personal challenges affecting their education. Lauren and Jack for example, highlighted how it's necessary to notice when they feel threatened, defensive, or frustrated in class, because in those instances, they might not come across as the open and empathetic instructors they try to be. Thor noted the importance

of instructors recognizing that sometimes, helping a student may fill an instructor's need to feel like a "care-er or nurture-er" and cause them not to question whether they are helping the student too much, to the point that the student relies on the teacher for support rather than becoming self-sufficient. James talked at length about his sense that empathy doesn't come naturally to him; he feels that he does sympathize or "worry" about people but has a harder time developing a more emotional understanding of what the person might be going through. In addition to such difficulties, however, instructors expressed self-awareness regarding personal strengths that might help them respond effectively to student trauma in the classroom. Daniel, for instance, talked about feeling "psychologically savvy" and like a "natural empath," and Thor also expressed confidence in his ability to empathize. James and Jack both discussed their abilities to listen well, and Daniel, Cathy, and Joseph talked about how they've learned from decades of prior experience with students trauma and distress, experiences that have made them much more comfortable with responding to such difficulties. All these aspects of self-awareness make interview participants more effective teachers who better able to respond to student trauma and distress. Of course, self-awareness is not always easy or straightforward, especially since self-reporting is not always reliable; for this reason, clinical literature (and consequently, this dissertation's appendix) offers structured opportunities for self-reflexivity and feedback from students.

Though instructors reported making considerations for self-care and self-awareness in their teaching, such considerations seem to have largely emerged from experiences while teaching or advice picked up from other along the way. Learning from lived experiences is indeed a central component of self-care as defined in clinical literature, but instructors might also benefit from more structured opportunities to make comprehensive, intentional self-care

plans and become more aware of personal factors that could positively or negatively impact their responses to difficult student situations. Section 5 in the Appendix includes information and resources to help faculty make such a proactive self-care plan.

#6: TIWP must sustain regular feedback from students and instructors to keep improving on current practices.

Finally, just as ongoing client feedback is essential in clinical settings (Elliott et al; SAMHSA), trauma-informed teaching must incorporate feedback from students and instructors. In some ways, this is work we're already doing; we seek feedback, for example, in reflective writing prompts, group discussions, and year-end course evaluations to improve our teaching. Adding a component to this feedback that specifically inquires about TIWP-related matters is important for a several reasons. First, even though the principles described above are research based and designed to benefit all students, we can also learn from students how they understand principles like safety and what aspects of the class promote/compromise safety. Even though clinical research indicates principles and practices that work across contexts to benefit all students, individual perspectives contain nuances that may further enrich those how we enact those principles/practices in a specific university and classroom context. Second, it's important to learn from students whether efforts to promote respect, safety, trust, and so on have accomplished their intended effect. Third, administrators need a clear picture of what issues instructors are facing with regard to student distress in the classroom in order to shape what resources, policies, etc. they make available. Fourth, regular feedback opportunities allows TIWP to adapt to changing contexts of trauma, in order to align with the temporal component of the social-ecological model.

TIWP therefore requires intentionally collecting information to evaluate how effectively it has been implemented. First, an assessment strategy should consider which stakeholders' perspectives are relevant, depending on the goal of the assessment. Possible stakeholder perspectives to seek out might include administrators, faculty, office staff, and students, but not all are necessary for evaluating different parts of TIWP. For instance, administrators seeking to infuse TIWP across an entire writing program may want to collect all of these perspectives, whereas instructors seeking to evaluate the effectiveness in TIWP in one of their courses might only need their own and their students. The individual(s) facilitating the evaluation should determine whose perspectives to seek out depending on the questions about TIWP they want to answer.

Second, an assessment strategy should also consider what assessment goals might warrant formal, semi- or in- formal, and/or ongoing modes of feedback. Clinical literature offers several formal research-validated assessment tools to support the implementation of trauma-informed practices, and these are useful especially for collecting broader, anonymous, and quantitative data. For instance, administrators might incorporate an "agency self-assessment," or questionnaire that helps determine how trauma-informed an organization or department already is and determine "next step" priorities for becoming more trauma-informed. The Trauma-Informed Care Project (traumainformedcareproject.org) and the American Institutes of Research (AIR) each offer a free agency self-assessment tool that administrators and/or select faculty can complete. These tools also include instructions for administering the self-assessment, including instructions about anonymity and tips for compiling, analyzing, and using the results. More information about these tools and how to

incorporate them into existing programmatic assessment processes is included in the Appendix under the “Guide for Institutional Support” section.

However, it’s also possible to receive valuable information through less formal means. Clinical research also recommends the use of less structured focus groups or forums, interviews, advisory committees, and other means to continue receiving feedback about how individuals perceive trauma-informed services. For instance, instructors might lead a group discussion within their classes about whether they feel the class community has adhered to definitions of respect or safety discussed at the beginning of the semester and in the syllabus. Instructors might also ask students to complete informal writing prompts about to what extent students developed a greater capacity for using university resources or a greater sense of personal-competence (both components of resilience) as a result of the course.

Additionally, instructors and administrators might also consider ongoing opportunities for feedback (such as grievance procedures, suggestion boxes, and or simply articulating an “open door” policy) and make it clear that they welcome feedback about issues related to trauma-informed writing pedagogy through these avenues. Such formal, semi-/in- formal, and ongoing tools can also be adapted in existing assessment procedures (e.g. adding questions faculty annual review procedures, asking students to complete a quick survey alongside other year-end reflective assignments), so that assessing trauma-informed practices doesn’t have to mean a complete overhaul of departmental/classroom assessment procedures, but rather a re-shaping or deepening of what is already in place.

Regardless of the methods chosen for feedback, instructors and administrators should be prepared to collect such information in ethical, safe ways. Much writing studies methodological research has explored research ethics, and those findings are of course

relevant here. For example, we must be concerned about protecting confidentiality so that respondents feel comfortable being honest without fear of repercussions, as well as feeling comfortable withholding any information that they feel might be too personal or harmful. Trauma-informed assessment must avoid the tendency toward what Thomas Newkirk terms a process of “seduction and betrayal,” or the way in which some researchers seduce participants into trusting them enough to reveal intimate details about themselves, and then betray participants by finding only “bad news” that critiques participants’ words or behaviors. Clinical research echoes these concerns, and particularly emphasizes the importance of being open and transparent about what information is being collected and what it will (and will not be used for), offering respondents clear opportunities to decline participation if they don’t feel safe doing so. This research also advocates for generosity in how participants’ responses are interpreted, particularly when the research identifies something problematic in the participants’ response; in analyzing the results of a trauma-informed assessment, it is important to understand that participants’ responses are logical manifestations of their experiences and knowledge, and to separate problematic ideas or practices from the person holding that idea or engaging in that practice.

There is of course some give and take in whatever methods are chosen for eliciting feedback to support TIWP. For instance, an anonymous survey might make participants feel more comfortable being honest, and it can be a faster/more frequent method of collection of data. On the other hand, there can be more richness in a qualitative approach like a focus group, class discussion, or writing prompt, though these methods sometimes take more time and might make participants feel more compelled to answer questions in ways that please the evaluator. Any evaluation method will require negotiating these pros and cons and

considering under what conditions participants will feel most comfortable being open and honest given the chosen methods. The most important part of this criterion for both administrators and instructors to have a plan for intentionally seeking feedback about the effectiveness of TIWP, to maintain balance across types of information collected, and to be prepared to collect such information regularly and over time. Section 6 in the Appendix and the “Guide for Institutional Support” section provide advice and tools for soliciting feedback from students and faculty, as well as translating that feedback into improved practice of TIWP.

* * *

These six criteria serve as a foundation from which to build a trauma-informed approach to writing instruction that is successful, systemic, and sustainable, while remaining flexible enough to accommodate different teaching contexts and styles. The Appendix—“Trauma-Informed Approach to Writing Pedagogy: Guide for Instructors and Administrators”—that follows this conclusion is designed to help both administrators and faculty to adapt these criteria in ways that make sense with their own contexts and styles. This guide offers more specific advice and heuristics to instructors in the classroom based directly on these six criteria, as well as strategies and heuristics designed to help administrators develop a plan to implement TIWP across their departments/programs and universities. These resources are intended to support writing studies scholars/teachers/administrators in thoughtfully implementing the theory of TIWP I’ve proposed in this dissertation without being limited by the 3 main barriers I cited in Chapters 2-4, and I hope such thoughtful implementation will lead to future refined versions of this pilot version of TIWP.

Directions for the future of Trauma-Informed Writing Pedagogy

This study is intended to provide a foundation for trauma-informed approaches to writing instruction that are consistent with writing studies' disciplinary pedagogical goals as well as with clinical literature, a combination that helps writing teachers operate on more complex and productive understandings of student trauma. The discussion and heuristic materials have been selected based on the three main barriers to trauma-informed teaching as revealed in the field's scholarly history regarding trauma and distress and interviews with University of Louisville faculty about their lived experiences in the classroom. I hope that writing instructors and administrators can use this discussion and the relevant guidelines provided in the Appendix to establish a foundation/culture of trauma-informed writing pedagogy in their own classrooms and departments, and, ultimately, the university as a whole.

However, this study is only intended to provide a pilot version of TIWP, a beginning, a conversation starter. I have combed the most respected clinical literature on best practices for responding to trauma and applied it to writing classroom settings in general, and combined this knowledge with contributions from my study participants at UofL, but their concerns may not always reflect concerns central to instructors at other institutions due to institutional context or teaching style differences. Furthermore, this approach must actually be implemented, evaluated, and updated a number of times in order to ensure that TWIP 1) works the way it is supposed to in practice and 2) has been adapted to *specific* writing classrooms and programs that each have their own unique context. Finally, due to the nature and time constraints of writing a dissertation, TWIP has not yet incorporated the perspectives

of *students*, but, as stated in criterion 6 this will be a crucial component to future iterations of TIWP, because students have valuable perspectives on how these principles affect their academic experiences.

TIWP has implications for addressing many concerns facing universities in general and writing instructors in particular. As mentioned in the introduction, ever-diversifying student populations, rampant mental health crises among college students, and the growing majority of students who have experienced trauma means that instructors must be prepared to work with those students in order to be inclusive and effective for all learners. As made clear by my study participants, Carello and Butler, Valentino, Tobin, Bishop, and others, current writing instructors need more than simple solutions or truisms about students who have experienced trauma; they need structured ways to educate themselves about how trauma impacts education and how to infuse trauma-informed principles and practices into their pedagogy. TIWP offers such a structured approach, identifying the most central concerns that instructors should attend to *right now*, as well as opportunities for further learning over time in the long-term development of a fully trauma-informed approach to teaching writing.

TIWP also bears implications for administrators, given that the instructors they support are increasingly working with diverse groups of students, such as veterans, underrepresented racial/ethnic groups, LGBTQ students, refugees, sexual assault and domestic violence survivors, and students facing mental health crises such as depression and suicidality. Administrators are tasked with finding ways to support those instructors' work with these diverse students. Furthermore, better preparing instructors and fostering trauma-informed universities can help prevent some liability issues universities face when situations with distressed students get worse or go wrong. TIWP calls administrators to greater

awareness of these complexities and offers strategies for inclusive writing programs that support the instructors supporting these students.

Finally, TIWP has implications for the health of writing studies. First, it highlights the necessity of self-care and legitimizes attention to emotional labor as a valued part of instructors' professional life. Fostering better self-care strategies can improve the personal and professional wellbeing of instructors, which encourages the development of instructors who experience compassion *satisfaction* rather than compassion *fatigue* and lead healthier professional lives. TIWP also supports the health of our profession by enabling us to better engage in public conversations about higher education that impact our work as instructors, as scholars such as Linda Adler-Kassner have called us to do. Adler-Kassner argues that writing administrators in particular have responsibility to reframe public discourse about writing instruction that functions on misunderstandings about writing, students, and pedagogy. Similarly, there are currently many public conversations that intersect with our work with traumatized students, such as debates about whether emotional safety has a place in the university (i.e. through trigger warnings and safe spaces), how to academically support an increasingly diverse student body, and what universities should be teaching college students (including about writing) in order to prepare them participate fully in modern society. As a field that has dedicated much attention to pedagogical research and practice, these conversations have consequences for how we do our work. TIWP provides another way into these conversations by acknowledging a pervasive though often invisible factor (trauma) impacting student success and offering research-based practices for responding to it in our classrooms. By practicing this instructional approach, we can become better equipped to lead

by example and speak from experience on how higher education can both attend to psychological safety and maintain academic rigor.

I conclude with a return to the long list of my students' trauma offered in the introduction to this dissertation, as these are the stories that have motivated my research from the beginning. My students have struggled to sustain academic success while dealing with abuse and assault, displacement, loss of parents, loss of romantic partners, life-threatening injuries and illnesses, draining custody battles, rejection by home communities after coming out, natural disasters, economic hardship, racism and sexism, witnessing violence in their neighborhoods, combat trauma, anxiety/depression, police brutality, and many other difficulties. In my attempt to demystify and structure trauma-informed writing instruction, I do not want to lose the heaviness of these students' experiences, or the high stakes involved in our abilities to support them academically. It will never be our job to have all the answers or to fix our students' pain. But we can honor the temporary role we play as educators in students' lifelong journeys to recovery and resilience by designing a classroom space that fosters safety and hope (among other qualities) and that is beneficial to all learners and possible for all teaching styles. Trauma-Informed Writing Pedagogy, then, is one way we answer Wendy Bishop's call to "understand and prepare to be what we are."

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APPENDIX 1

INTERVIEW MATERIALS

Research questions for this study, as well as possible follow-ups or prompts, are listed below.

- **Tell me about yourself as a teacher.**
 - *Possible prompts:*
 - How long have you been teaching?
 - Where have you taught?
 - What sorts of classes do you usually teach?
 - What are your goals and values as a teacher?
 - What kind of relationship do you try to have with your students?
 - Where have you learned to manage day-to-day activities in the classroom, including conflict?

- **What do you already know about trauma, and what do you wish you knew?**
 - *Possible prompts:*
 - What is your understanding of what trauma is?
 - What is your understanding of how trauma impacts the classroom setting or teacher/student relationship in general?
 - How do you account for trauma in your teaching (or not) already, and why? What accommodations are you willing to make (or not)?
 - Have you ever received any training on supporting people who have experienced trauma?
 - What student behaviors in your classroom do you think would indicate trauma (or other intense distress)?
 - What are possible scenarios in your classes that make you want to be prepared for responding to trauma?

- **Tell me about some experiences you have had with students in class that influence how you do or don't account for trauma in your teaching.** I am obviously interested in experiences that you think probably were impacted by student trauma, but I'm also interested in other general experiences with students which concerned you but you're not sure were related to trauma at all, or in any experiences which lead you to believe student trauma does not have a significant impact on your work as a teacher.

- Possible prompts:
 - How do you typically respond in the moment?
 - What was your long-term response (e.g. did you contact student services, did you follow up with the student)?
 - How did you *feel* while responding to the situations you mentioned?
 - Would you change anything about your response if you had to do it all over again?
- (Participants will be prompted to share other significant stories in which they encountered student trauma and/or disruptive behavior, if they want to).
- I am interested in designing a trauma-informed pedagogy for a variety of classroom settings. *[Interviewer will briefly go over a short document describing what trauma-informed pedagogy might look like for college classrooms.]* **How likely would you be to adopt some of these trauma-informed approaches in your teaching? Your colleagues?**

For the fourth set of questions, participants were provided with the following summary of key clinical principles and practices that may apply to trauma-informed writing pedagogy.

Principles	Practices
Acknowledge impact/pervasiveness of trauma and be open to learning about how it impacts a life and educational/career goals.	Learn the basics of what trauma is and its impacts. Remember that disruptive or otherwise concerning behaviors may be an adaptation to trauma. Know when it may be necessary and helpful to make a referral to social services.
Ecological and socio-cultural understanding of causes/impacts of trauma	
Understand and anticipate the role of retraumatization (triggering or reactivation of trauma-related symptoms, as if the person is re-experiencing the original trauma) Work toward making the environment in which the interaction takes place physically and emotionally safe.	Prepare for how to handle disclosures, which includes not just what to say, but also knowledge of mandatory reporting laws and limits of confidentiality. Avoid blaming or shaming language. Consider whether/when/how trigger warnings might be appropriate. Be consistent and trustworthy in what you say and do.

<p>Employ “empowering” practices (see right), which support control, choices, and sense of inner strength/competence</p> <p>Ultimate goal of interaction is to expand resources, skills, and social supports</p>	<p>View symptoms as logical (even if problematic) adaptations to stressful events. (For example, instead of thinking, “What’s wrong with you?” think, “What happened to you?”).</p> <p>Focus on strengths rather than deficits.</p> <p>As much as possible, offer choices rather than directives and validate such choices.</p> <p>Where appropriate, and as much as possible, inviting individuals to have an active voice in shaping services they receive and the environment in which they take place.</p>
<p>Establish collaborative relationships built on trust and mutual respect (i.e. RICH relationships characterized by Respect, Information Sharing, Collaboration, and Hope-Building)</p>	<p>Engage in activities that invite collaboration with peers and authority figures that validate and encourage individuals’ strengths.</p>
<p>Prepare for the risks of compassion fatigue and/or secondary/vicarious trauma</p>	

APPENDIX 2

TRAUMA-INFORMED APPROACH TO WRITING PEDAGOGY: A GUIDE FOR
ADMINISTRATORS AND INSTRUCTORS



Trauma- Informed Approach to Writing Pedagogy

GUIDE FOR INSTRUCTORS
AND ADMINISTRATORS

TABLE OF CONTENTS

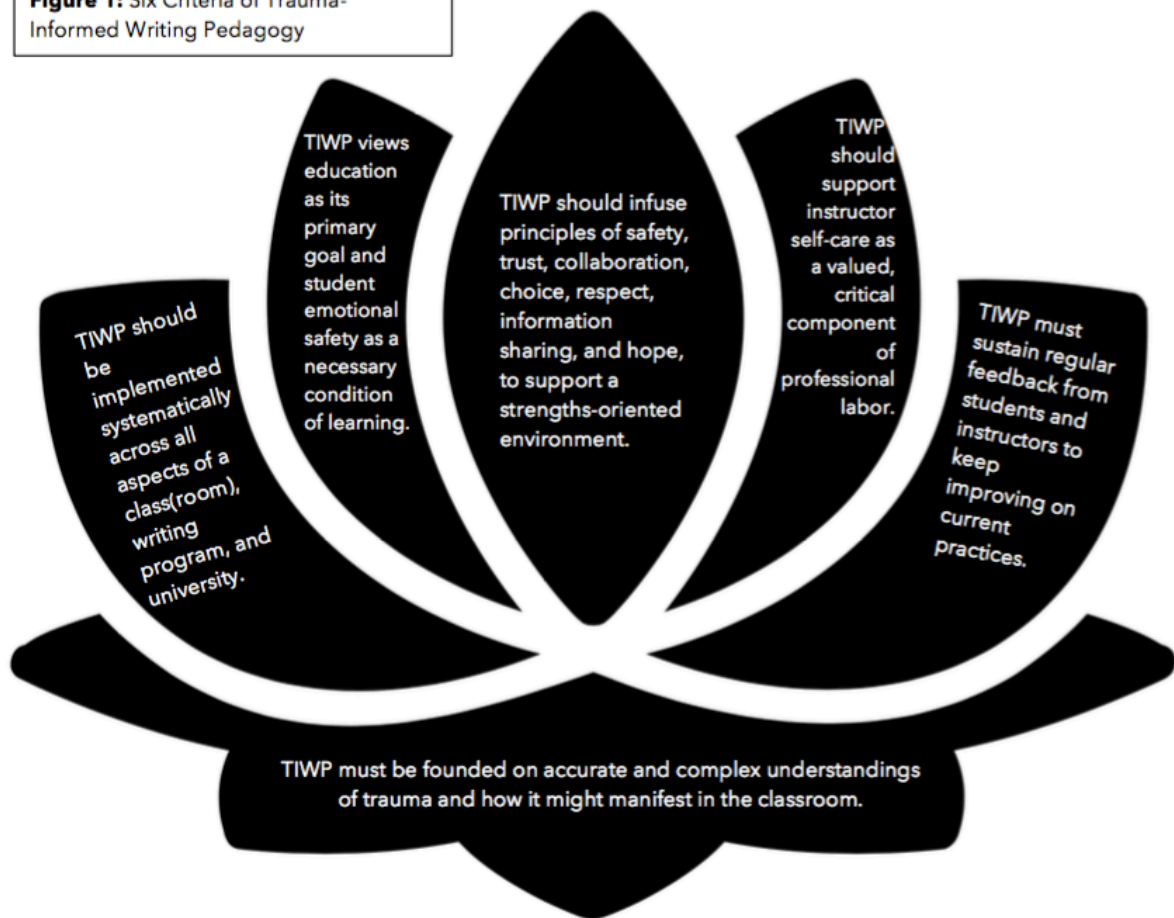
Overview of TIWP	3
Guide for Classroom Practice	
Criterion #1: Accurate and Complex Understandings of Trauma	5
Criterion #2: Institutional Implementation	11
Criterion #3: Safety as a Condition of Learning	14
Criterion #4: Key Principles	21
Criterion #5: Instructor Self-Care / Reflexivity	27
Criterion #6: Feedback and Evaluation	30
Tips for Institutional Support	33
Resources	39
Glossary	42
Works Cited	43

This guide for college writing instructors summarizes six criteria that define Trauma-Informed Writing Pedagogy (TIWP), an approach to teaching that recognizes the prevalence and impact of trauma on students in the classroom and responds by minimizing the possibility of re-traumatization and promoting resilience. Based on the fact that most college students have experienced trauma, this approach to teaching represents flexible principles and practices that instructors can adapt to their own teaching styles and contexts.

This guide uses the symbolism of the lotus flower as a tool for comprehension and knowledge retention. The lotus has long been associated with resilience from trauma. It grows in dirty, muddy water, blocked from the sunshine, but eventually blooms bright and strong above the surface. For this reason, various cultures have treated the lotus as a metaphor for overcoming, for finding beauty in spite of pain. The 6 criteria are mapped onto a lotus flower icon in Figure 1 below, representing how each criterion of TIWP is a central part of the whole.

Note: Though much of the material included in this guide applies across institutions, some components—especially references to available resources and possible partnerships—have been adapted to the context of the University of Louisville.

Figure 1: Six Criteria of Trauma-Informed Writing Pedagogy



GUIDE FOR CLASSROOM PRACTICE

This section explains the six criteria and how they translate into classroom practice.



#1: Trauma-Informed Writing Pedagogy (TIWP) must be founded on accurate and complex understandings of trauma and how it might manifest in classrooms.

The research is clear—the majority of college students have experienced trauma prior to entering college, and more of them will experience trauma while in college (see box to the right). Composition pedagogy research reflects this prevalence; how to handle student trauma and distress has been an ongoing discussion for the last 50 years, with scholars positing positions as diverse as the need to leverage writing’s therapeutic potential in the classroom (Berman; Bishop; Campbell; Deletiner) or to create policies and assignments that discourage traumatic disclosures altogether (Alton; Pfeiffer). The sheer pervasiveness of trauma, its potential impacts on academic wellbeing, and its presence in writing studies research since the 1970s merits attention from writing instructors who want to be effective, ethical, informed educators.

Such awareness begins with understanding what trauma is and how it might impact the classroom. Over the years, scholarship about writing and trauma has defined trauma in terms imported from humanities-based perspectives. These definitions usually define trauma in apocalyptic terms that frame trauma as devastating and incomprehensible, focusing on how trauma creates existential and representational crises (Caruth; Felman and Laub). Trauma from this perspective represents a meaning-making crisis and presents opportunities to explore the nature of memory and narrative or the ethics of representation and witnessing.

Though these renderings are theoretically rich and productive, they are less helpful in teaching practice for understanding the nature of student trauma, the diverse ways trauma might manifest in the classroom, and ethical, research-based responses to trauma’s impact on students and courses. Clinical social work literature, on the other hand, offers more concrete definitions of trauma and typical responses to it that are based on decades of research about best practices for promoting resilience among trauma survivors.

Clinical Definitions of Trauma

One widely-accepted definition comes from the Substance Abuse and Mental Health Services Administration, which defines trauma as:

an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being. (xix)

TRAUMA AND DISTRESS AMONG U.S. COLLEGE STUDENTS

Several recent studies at major U.S. universities indicate that **at least half** and as many as **85%** of college students have experienced one or more traumatic events (Vrana et al; Pritchard et al; Moser et al; Carello and Butler). In addition, college students face a high risk for certain types of trauma, such as sexual assault; about **28%** of college women, **12.5%** of college men, and **38%** of gender nonconforming students experience sexual assault while enrolled at a university (Mellins et al).

College students are also likely to have Adverse Childhood Experiences (ACEs). In 1998, Kaiser Permanente and the Centers for Disease Control and Prevention published a landmark study on ACEs, which are childhood experiences of abuse and neglect related to the family or caregiver system. This study found that almost 2/3 of U.S. adults have experienced at least one ACE and 1 in 5 have experienced three or more. Data from 2016 indicates these numbers remain roughly the same.

The study also found that the more ACEs people experience, the higher their risk for a range of negative health, economic, psychological, and other outcomes, including heart disease, asthma, depression, mental distress, unemployment, diabetes, and lowered educational attainment.

Additionally, college students experience high rates of other types of mental distress. Several reports show that college students today have higher rates of anxiety, depression, and overwhelming stress, and suicide is the leading cause of death for young people ages 15-24, according to a 2009 study by Arria et al.

The data is clear: **Writing instructors can assume that trauma and distress affect the majority of their students, and this is an important contextual factor to consider when making pedagogical choices.**

Clinical literature also lists the most common responses to a traumatic experience, and Figure 2 on the next pages summarizes both these responses and how they might manifest in the classroom. To align with the trauma-informed principle of focusing on trauma survivors' strengths, it's important to think of these "responses" as logical (if at times problematic) adaptations to stress rather than "symptoms" of an illness. Doing so promotes a more respectful, empowering disposition toward trauma survivors that celebrates the courage it takes to survive trauma, even when the individual still needs to overcome unhealthy coping strategies. In other words, instead of asking *what's wrong* with a person exhibiting these responses, a strengths-oriented approach assumes that *something happened* to that person.

**Instead of wondering
*what's wrong with a
person* exhibiting
these responses, a
strengths-oriented
approach assumes that
*something happened
to that person.***

Although the trauma responses listed in Figure 2 are common, even the same types of trauma might impact individual students quite differently. The social-ecological model of trauma helps explain why. This model is described in more detail in the next section, but it generally refers to how individuals' experiences of trauma are influenced by individual, interpersonal, community/organizational, societal, cultural and developmental, and temporal factors. These factors influence what individuals believe is traumatic, how they respond to that trauma, what resources they are comfortable seeking, and so on. When developing an understanding of trauma, it is therefore important to remember that trauma is not just an individual, psychological phenomenon, but one that influences and is influenced by individuals' physical and social environments.

CULTURE AND TRAUMA

Scholars from various fields have found deep connections between culture and trauma, and writing instructors must become aware of these links in order to implement TIWP effectively.

The way individuals experience, process, and respond to trauma is influenced greatly by their cultural background. Culture filters what individuals perceive as traumatic, as acceptable expressions of distress, and as appropriate means of recovery (e.g. beliefs about therapy, stigmas associated with certain types of trauma). Clinicians also recognize that culture shapes what individuals experience as empowering, and creating a culturally-responsive environment is a vital component of emotional safety. Additionally, culture can serve as a resource that helps individuals be resilient.

Furthermore, research indicates that some cultures are more likely to experience trauma or a specific type of trauma, especially those facing military action or police violence (SAMHSA; Dass-Brailsford). Some have even posited that membership in cultural groups that have experienced immense oppression results in cultural trauma, in which "members of a collectivity feel they have been subjected to a horrendous event that leaves indelible marks upon their group consciousness, marking their memories forever and changing their future identity in fundamental and irrevocably ways" (Alexander et al 1). The *Diagnostic and Statistical Manual V* even lists culture-specific conditions, such as *Susto* and *Ataque de Nervios*, which are panic and anxiety disorders specific to people of Latinx descent that manifest differently than we typically expect in the U.S.

While it's impossible for any instructor to become familiar with all students' cultures (and their connections to trauma), it is crucial for instructors remain sensitive to how central cultural frames of reference are in the perception of and responses to trauma. It also means instructors should be cognizant of how their own cultural frames of reference shape their responses to students and should seek to learn more about the cultures shaping their classroom interactions, in order to promote educational spaces that are inclusive of cultural difference.

Resources for developing cultural awareness and responsiveness are available in the "Resources" section below.

Figure 2: Defining Trauma and Common Responses

Trauma: Event, events, or circumstances occur → Experienced as threatening by individual → Lasting adverse effects on dimensions of well-being:

- Mental
- Physical
- Emotional
- Social
- Spiritual

	Intrusion: Re-experiencing the trauma	Avoidance: Numbing oneself to the trauma	Hyperarousal: Overly alert for possible threats	Mood/Cognition: Inability to fully regulate emotions and thinking/learning
Common Responses	Nightmares / Sleeplessness Flashbacks (triggering) Over-sharing Nausea, headaches, or other physical symptoms	Distractedness Depression Substance use / abuse Lack of normal emotional responses Memory loss	Jumpy Overly aggressive, irritable, or defensive Sleeplessness and anxiety Heart-racing	Frequent mood changes Difficulty staying focused Changes in brain functioning and dysregulation, especially in limbic system and hypothalamus
Possible examples in the classroom	Being triggered by a class reading, a peer's comments/behaviors, and other classroom stimuli Frequently sick, fatigued, or both Frequent absences or late-work Revealing intimate personal information, perhaps at inappropriate or unnecessary moments	Lack of motivation to participate in class and/or complete assignments Frequent absences (perhaps unexplained) or late work "Spacing out" or otherwise seeming to not be engaged in class Trouble connecting with peers or instructor	Easily startled Overly stressed about class activities or assignments Defensive to peers' or instructor's feedback on writing or other class work Generally seeming disagreeable or resistant	Changes (esp. decrease) in ability to complete and perform well on class assignments Difficulty staying on task "Moodiness" or frequent changes in emotional state Changes in personality Appearing consistently depressed or anxious

Clinical Perspectives on Resilience and the Writing Classroom

Figure 2 describes negative impacts of trauma, especially on educational behavior and wellbeing, but clinicians are also quick to identify resilience as an important result of trauma. They note that individuals are incredibly resilient in the face of difficult circumstances, especially when supported by the principles and practices outlined in this guidebook.

From a clinical perspective, resilience means “the ability to bounce back or rise above adversity” and “includes the process of using available resources to negotiate hardship and/or the consequences of adverse events” (SAMHSA xviii). It is related to the concept of recovery, which refers to the “process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential” (SAMHSA xviii). Components of recovery, according to SAMHSA, are described in Figure 3 below.

Figure 3: Components of Recovery / Resilience



WRITING AND/AS THERAPY DEBATES

Though pedagogical responses to student trauma have appeared in writing studies scholarship since the 1970s, instructors became particularly emboldened to propose writing-as-therapy pedagogies after a landmark essay by James Pennebaker in 1990. This essay found that writing regularly in a controlled setting about painful experiences improved students' mental and physical health.

Encouraged by this study, some writing teachers began using counseling-based approaches to address difficult experiences in the classroom, such as resistant students, trauma disclosures, blocked writing processes, unsatisfactory writing improvement, and so on (Tobin; Deletiner; Murphy; Bishop; Anderson and MacCurdy; Rinaldi; Berman). This research often celebrated writing's healing potential and argued that instructors had an ethical responsibility to leverage this healing potential.

Other scholars rejected therapeutic models of the writing classroom, arguing that they tamper with psychological process instructors aren't trained for and thus risk: worsening trauma symptoms (Rosenblatt; Alton and Pfeiffer); creating ethical dilemmas when grading (Alton and Pfeiffer; Morgan); encouraging navel-gazing and individualism at the expense of intellectual development (Van Engen; Pfeiffer); creating legal issues for instructors (Morgan); and so on.

Social work scholars Janice Carello and Lisa D. Butler confirm that pedagogies that directly engage trauma and healing are risky, especially if students don't know course content in advance and/or can't reasonably choose to drop the class. They argue that courses like these often assume students can regulate their emotional responses; treat trauma as a "good" precursor to learning; misunderstand the controlled nature of studies about how writing heals; and selectively use psychological terms without a broader understanding of clinical literature.

Nevertheless, Carello and Butler note there is also danger in *not* engaging trauma, because trauma so often is invisible, and its invisibility perpetuates shame, secrecy, or stigma. And often, instructors in smaller classes—like writing instructors—do encounter students' trauma more frequently, whether they're intending to or not. Thus, they suggest neither that instructors should avoid trauma, nor that that they "[march] it into the classroom to be prodded, poked, and endured" (164). Instead, they argue instructors should become more trauma-informed by reading clinical literature, so they can attend to their students' emotional safety as a condition of effective learning, especially when discussing issues related to trauma or when students have the opportunity to write about personal matters.

There are many direct and indirect ways in which writing classrooms might contribute to students' resilience and recovery. However, it's important to remember that instructors are primarily educators, and resilience and recovery are therefore not their role in the same way it would be for a therapist or counselor. Writing studies and social work scholars have debated this idea at length (see box to the left).

Nevertheless, there is also power in knowing that instructors *do* contribute in meaningful ways to their students' resilience/recovery, so that we might leverage the opportunities we do have more thoughtfully. This is especially important since, as I'll discuss for Criterion 3, safety and attention to basic needs are necessary conditions of effective learning, and teachers are responsible for creating a productive learning environment; in other words, we can work to make our classrooms more effective learning spaces by attending to factors related to writing education that contribute to our students' abilities to recover and be resilient.

For instance, connecting students to resources like the Counseling Center or the Disability Resource Center might contribute to establishing greater "Health." Allowing students to research personally meaningful issues might contribute to a sense of "Purpose," and the development of writing skills are known indicators of workplace success (another aspect of "Purpose"). For some students, classrooms might even serve as a "Community," though a temporary one, in which they develop supportive relationships and expand their social networks.

In this way, writing instructors can promote students' resilience by intentionally considering how aspects of their courses do or could contribute to components of recovery/resilience outlined in Figure 3.

Reflection Questions:

- *How do the definition and symptoms of trauma described in this section (especially in Figure 2) confirm, challenge, and deepen my prior knowledge of trauma?*
- *How might the material learned in this section help me to rethink past difficult experiences with students in ways that better acknowledge the pervasiveness and impact of trauma in academic environments?*
 - *For instance, how might asking not “what’s wrong with this student” but “what happened to this student” shift your teaching perspectives and practices, especially with “difficult” students?*
- *In what ways do my writing classes already contribute to resilience and recovery factors?*
- *In what ways might my writing classes more intentionally contribute to resilience and recovery?*
 - *For instance, what are ways I can teach my students to be more savvy users of available online student/social service resources, which might produce positive outcomes in any of the resilience categories listed above?*



#2: TIWP should be implemented systematically across an entire classroom, writing program, and university.

Systematically implementing TIWP involves: 1) maintaining a social-ecological view of trauma; 2) promoting trauma-informed principles and practices across the university and within your writing program; and 3) infusing TIWP across all dimensions of your classroom.

Social-Ecological Model of Trauma

Psychologists and social workers have used the social-ecological model of trauma since the 1990s to describe how experiences of trauma are influenced by individual, interpersonal, community/organizational, societal, cultural and developmental, and temporal factors. The three main beliefs operationalized in a social-ecological model (as summarized by SAMHSA) include:

- Environmental factors influence well-being.
- The (dis)connect between an individual's behavioral, sociocultural, and biological needs and the available resources greatly determine the individual's level of health and well-being.
- Prevention, intervention, and treatment must address individual, interpersonal, *and* community systems (14).

Figure 4 at the end of this section describes the dimensions of this model in more detail and lists related pedagogical considerations.

This model has much in common with ecological models of writing, which view writing in a broader context of dynamic, interconnected systems in which texts, people, and their literal and ideological environments interact and mutually shape each other in the process (Cooper; Syverson; Edbauer; Fleckenstein et al). Taken together, the social-ecological model of trauma and ecological model of writing mean college writing instructors should view TIWP as part of the university's mission to educate all students by attending to the dynamic, interconnected web of individual, interpersonal, community/organizational, societal, cultural/developmental, and temporal factors, which form the context in which students write and affect their experiences of and responses to trauma.

Reflection Questions:

- *Since context(s) of student trauma are always changing, how might my use of TIWP incorporate flexibility, reflexivity, and regular updates? (see also Criterion 6)*
- *What university (e.g. offices, university officials, changing student/faculty populations), external (e.g. current events, local trauma-related organizations), or other points in the "web" may be influencing or influenced by the decisions I make with regard to student trauma?*
- *How might my understanding of student "support" intersect with multiple dimensions of the social-ecological model?*

University- and Program- wide TIWP

TIWP at its most complete involves trauma-informed practices at all levels of the university. In order for faculty's referrals to be effective for distressed students, those resources have to be available and easily accessible. In order for faculty's efforts to sustain safe classrooms to be most successful, those efforts can't be undercut by lack of safety in all other college environments. In order for faculty to be savvy implementers of primary "first aid" mental health strategies, they need the time and resources to go through initial and continuing education on this skillset. And for faculty to maintain a healthy self-care plan, they need institutional systems that respect their professional boundaries, provide appropriate self-care resources, and support a campus culture that acknowledges self-care as worthwhile professional labor.

These are just a few examples of why university systems as a whole—including writing programs—must support trauma-informed approaches to pedagogy in order for instructors' efforts in the classroom to be most effective. In part, then, this criterion advises instructors and writing program administrators to look for ways to promote trauma-informed practices across university settings. Though this type of institutional change will likely take time and perseverance, it is a necessary long-term goal. Some possible first steps include:

- Participate in strategic planning committees for the university and/or writing program.
- Collaborate with offices/departments such as the Counseling Center or Social Work on initiatives that support student wellbeing and promote trauma-informed practices.
- Offer department-wide trainings on trauma-informed approaches to writing pedagogy or some smaller component.
- Establish a departmental committee tasked with identifying priorities for implementing trauma-informed principles and practices throughout the department.

Reflection Questions:

- *What are aspects of administration within the university or my writing program over which I can exert some influence to become more trauma-informed?*
- *Who are stakeholders with whom I have a relationship and that I might inform about the importance of trauma-informed principles and practices?*

TIWP in all Dimensions of a Classroom

More immediately, instructors might view their own classrooms as micro-institutions over which they have more direct influence to promote trauma-informed principles and practices. Implementing TIWP systematically across an entire classroom means infusing trauma-informed principles across:

- Syllabi and other policy documents
- Class texts
- Discussions
- Partner/group work
- Feedback on writing
- Written assignments (formal and informal)
- Physical classroom space

Instructors can use Figure 4 on the next page to consider how the social-ecological model might influence their pedagogy. The top part of the chart comes from SAMHSA's definition of the social-ecological model and lists different factors in each dimension that might influence an individual's experience of trauma and resilience. The bottom of the chart lists some general pedagogical considerations faculty might make based on the social-ecological model. Additionally, Figure 9 under Criterion 4 offers a tool for instructors to brainstorm how to apply TIWP in all dimensions of the classroom as listed above. Finally, see the "Resources" section lists resources to learn more about the concept of ecologies from both social work and writing studies perspectives.

Figure 4: Social-Ecological Model Dimensions and Pedagogical Applications

Dimension	Influencing Factors
Individual	Age, biophysical state, mental health status, temperament, education, gender, coping styles, socioeconomic status
Interpersonal	Family, peer, and significant other interaction patterns, parent/family mental health, parents' history of trauma, social network
Community / Organizational	Neighborhood quality, school system and/or work environment, behavioral health system quality and accessibility, faith-based settings, transportation availability, community socioeconomic status, community employment rates
Societal	State/Federal laws and economics and social policies, media, societal norms, judicial system
Cultural / Developmental	Collective or individualistic cultural norms, ethnicity, cognitive and maturational development
Period of time in History	Societal attitudes and how they change over time, changing knowledge about psychological stress and diagnoses

**The material above is from SAMHSA's TIP 57: Trauma-Informed Care for Behavioral Health Services. See "Resources" or Works Cited for full citation.*

Pedagogical Considerations

- Students may experience and respond to the same trauma in different ways due to any of these factors, and their resilience may be enabled or inhibited by any of these factors.
- Resources students are willing and able to access may be different depending on any of these factors.
- When referring students to resources, think about resources that may come from a variety of these dimensions. For example, a referral to counseling might acknowledge the "individual" dimension of trauma, whereas telling a student about a possible student group from which they could receive support and connection might acknowledge the "community" dimension.
- Contexts of trauma change over time, and any approach to trauma-informed services must therefore be flexible and responsive to such changes.
- Instructors must be particularly attuned to the impact of culture on individuals' experiences of trauma, empowerment, and resilience. Though it's impossible to be an expert on all cultures, it is possible to develop an attunement to your own and others' cultural frames of references as major factors that influence experiences of trauma and interpersonal relationships.
- How trauma impacts students may vary even within the course of a single semester, depending on factors such as current events or points in the semester where deadlines/exams cause more stress.



#3: TIWP views education as its primary goal and student emotional safety as a necessary condition of learning.

Social Work professors and scholars Janice Carello and Lisa D. Butler argue that emotional safety is a necessary condition of learning—and for good reason. The concept is similar to one more familiar to scholars in writing studies, Abraham Maslow’s hierarchy of needs. Maslow argued that deficiencies in physiological, safety, belongingness, and esteem needs must be met before an individual can pursue what he terms “growth” needs (cognitive, aesthetic, self-actualization, and self-transcendence). Educators have long applied this hierarchy to education, noting that physiological and emotional/physical safety threats seriously hinder students’ abilities to learn effectively. Thus, instructors must attend to emotional safety in the classroom *as part of* their primary goal of educating students, because this is a condition of effective learning environments.

In part, the advice offered in this entire guidebook helps foster safety by encouraging pedagogical practices that are more attuned to the diverse needs of students who have experienced trauma. However, we might also think about safety more specifically in terms of how to ethically 1) handle situations where students disclose or reveal trauma and 2) respond to students who seem to be in immediate distress. That includes students who, for example, talk about ongoing abuse or mental health crises like depression and suicidality, or students whose behavior seems particularly erratic or concerning. Scenarios like these carry higher stakes for students’ health and wellbeing and merit their own separate attention.

When Students Disclose

Because writing classes are typically smaller and involve more one-on-one interactions with the instructor, students may intentionally or unintentionally tell writing instructors about past or current trauma, more often than instructors in some other disciplines. Furthermore, writing instructors may be in a better position than others to notice erratic or otherwise concerning student behavior. In situations like these, student emotional safety involves the instructor being prepared to respond in ethical and legal ways.

The circumstances under which a teacher becomes aware of a students’ trauma and/or notices concerning behavior matter. For instance, if a student intentionally *discloses* trauma, it is different than if the same student unintentionally *revealed* that trauma. In the first situation, the student has at least made a choice to give private, sensitive personal details to the instructor, but in the latter situation, the student has not intended to

RESPONDING TO STUDENT WRITING

Writing studies scholars have wrestled with how to handle feedback and grading when students disclose personal trauma in a writing assignment. Some worry that negative feedback or poor grades on intense personal writing might cause harm to the student, even if such comments and grades are warranted. Instructors also worry about whether they are liable to report what students tell them in writing students assume is confidential, among other ethical issues.

These difficulties don’t always have clear-cut answers, but Marilyn J. Valentino, Jeffrey Berman, Dan Morgan, and others offer some advice about responding when students write about trauma and distress. The list below summarizes this advice, supplemented with advice from clinical literature:

- **Prepare for these moments** by knowing your legal responsibilities and available support services and acknowledging them in syllabus statements and/or verbally in class.
- **Make and convey professional boundaries**, such as by indicating to what extent you’re comfortable with students sharing personal stories. Never force or coerce students into sharing intimate personal information.
- **Ask questions first** about whether the student has support for processing the trauma and what kind of feedback they’re hoping for on the assignment.
- **Validate/affirm the experience shared and the students’ courage in sharing it**, and explicitly distinguish that feedback from feedback on qualities of the writing.
- **Privilege reflective statements and questions over directive feedback, as much as possible** (see “Active Listening” in section 4 below).
- **Ask for help** from trained professionals, such as counselors at the Counseling Center.
- **Remember, it’s OK to back-track** and try again if you think you could have responded better.

MANDATORY REPORTING FOR UOFL INSTRUCTORS

All adults in the state of Kentucky are required to report:

- Suspected child abuse to Child Protective Services (1-800-752-6200)
- Suspected abuse of a spouse or dependent adult to Adult Protective Services (877-597-2331)
- Individuals who appear to be a threat to themselves or others to the Police (911 or Campus Police at 502-852-6111)

All UofL instructors are required to report the following to the UofL Title IX Office:

- Sexual misconduct (including sexual harassment, sexual assault, or any other nonconsensual behavior of a sexual nature)
- Sex discrimination
- Domestic or dating violence

Title IX reporting information can be found at:
<http://louisville.edu/hr/employeerelations/sexual-misconduct-brochure>

reveal those details and may not want the instructor to have the personal information that they gleaned. In this case, the instructor may need to take greater care not to come across as intrusive. Mental Health First Aid, which is described in detail below, can help instructors respond safely when students disclose or reveal trauma.

Regardless of whether a student discloses or reveals trauma, there are boundaries to confidentiality that the instructor must consider. These limits are described in the box to the left. Many instructors rightly worry about how being mandated to report some information might compromise their students' physical and/or emotional safety, as well as their efforts to build trust and rapport with their students.

One way to address this concern is by clearly stating (on the syllabus and in person) the limits of confidentiality. For instance, instructors might say something like:

Anything you share with me is confidential and protected by FERPA. However, you should know that I am mandated to report 1) suspected child abuse, 2) spousal or dating violence, 3) sexual assault, harassment, or discrimination involving someone from UofL or that takes place at UofL, or 4) if I think someone is a danger to themselves or others. Otherwise, whatever we discuss is between you and me.

In the event that a mandatory report is necessary, it is often possible to make that report with the student (in the case of APS or Title IX), which gives the students some control over what information is shared and, in some cases, allows them to decline an investigation if they believe such an investigation might put them in danger.

Setting Boundaries

Another way instructors can account for student (and their own) safety is by making boundaries clear. For instance, students should know what to expect regarding how available the instructors will be, when, and through what means, and regarding the revelation of sensitive personal details in writing or in conferences with the instructor. These boundaries can also be communicated/supported by course or assignment design.

For instance, knowing that students often feel compelled to reveal personal traumas in narrative assignments, instructors might discuss options for completing the assignment that don't involve revealing sensitive personal information and/or discuss the emotional risks of writing about pain. It is up to the instructor whether they want to explicitly disallow writing about trauma in such assignments, but they should make sure students understand these boundaries, as well as the emotional risks of re-traumatization if they choose to write about personal pain.

Though safe classrooms must avoid coercing students to share personal details and to make boundaries clear, instructors should weigh those choices against another danger—stigmatization. Instructors' boundaries regarding what can and cannot be shared sends a message about what issues can exist in the classroom space and what can and cannot be discussed. Enforced silence about difficult issues like trauma could possibly perpetuate stigma toward certain student identities and experiences. There's no easy answer for negotiating the line between healthy boundaries that promote safety and boundaries that exclude or stigmatize. Instructors should therefore reflect carefully on to what extent the boundaries they set to promote safety in the classroom

are healthy versus exclusionary. (Note: It's also possible to engage students in this question, using the regular feedback described in Criterion 6.)

Mental Health First Aid

One basic skillset involves Mental Health First Aid. This framework was designed by clinicians for people who are not clinicians but may be involved in what they call "helping" or "caring" professions, such as first responders or teachers. Figure 5 below summarizes the key aspects of Mental Health First Aid and offers tips/resources to address how to thoughtfully implement each strategy. This chart only represents a brief look at foundational practices, however; instructors might therefore consider locating a full Mental Health First Aid training (which takes about 8 hours). A database of local trainings is available at www.mentalhealthfirstaid.org.

Figure 5: Mental Health First Aid Basic Concepts and Resources

Concept/Skill	Tips	Resources
Assessing risk of self-harm	<p>Address the situation privately with the student.</p> <p>Remain calm in tone and gestures.</p> <p>Use the QPR (Question, Persuade, Refer) approach.</p> <p>Call the Counseling Center for assistance in responding. Call the police for students who seem at high risk of harming themselves or others.</p>	<p>UofL Student Care Team "Students in Distress" Handout</p> <p>The QPR Institute (and you can request a training through UofL's Dean of Students Office): qprinstitute.com</p> <p>UofL Counseling Center: Louisville.edu/counseling or 502-852-6585</p>
Listening non-judgmentally	See Active Listening Strategies in Criterion 4 below.	Discussion of Active Listening Strategies in Criterion 4 below
Identifying basic/primary needs & Connecting with appropriate professional and other resources	<p>Pay attention to comments students make that indicate they have a primary need that must be addressed before working on other classroom matters.</p> <p>For example, when conferencing with a student about late work, the student mentions having broken up with their partner and having to live on friends' couches or in their car. The student may not begin performing better in class until a stable home is acquired.</p>	<p>The UofL Concern Center (a database that lists university and local resources available to help address various concerns): http://louisville.concerncenter.com/</p> <p>United Way Worldwide's 2-1-1 database of support services nationwide: 211.org or dial 2-1-1</p> <p>Dean of Students / Student Care Team general website and "Report a Concern" form: http://louisville.edu/dos/facultystaff/student-care-team</p> <p>UofL Counseling Center (see above)</p> <p>UofL PEACC Center (supports students who have experienced sexual assault or dating violence): Louisville.edu/peacc</p>
Promoting sense of safety, calm, comfort, and connectedness	See bottom half of this chart.	
Encouraging self-care	Establish the importance of self-care at the beginning of a class, such as through syllabus statements or verbally.	<p>UofL Counseling Center (see above; website includes a self-care worksheet)</p> <p>Recognized Student Organizations:</p> <ul style="list-style-type: none"> https://louisville.edu/studentactivities/student-orgs/current-student-groups

Figure 5: Mental Health First Aid Basic Concepts and Resources (continued)

DO*	DO NOT*
<p>Promote Safety: Pay attention to basic needs and provide repeated, simple, accurate information on how students might meet these basic needs.</p>	<p>Force students to share their stories, especially very personal details.</p>
<p>Promote Calm: Listen with the recognition that there's no right or wrong way to feel. Be friendly and compassionate, even if people are being difficult. Offer accurate information about possible services and resources</p>	<p>Use overly simple assurances, such as "Everything will be OK" or "at least you survived."</p>
<p>Promote Connectedness: Help students identify people they can turn to for support.</p>	<p>Tell people what you think they should be feeling or thinking, how they should have acted, or why you think they have suffered because of their personal behaviors or beliefs.</p>
<p>Promote Self-Efficacy: Give practical suggestions that steer students toward helping themselves and meeting their own needs.</p>	<p>Make promises that might not be kept.</p>
<p>Promote Help: Learn about available social services and university resources and direct students to those resources as appropriate. Remind students that more help and services are available if they are struggling or fearful.</p>	<p>Criticize existing services or relief activities in front of people in need of these services.</p>

**These DOs and DO NOTs are from SAMHSA's "Psychological First Aid for First Responders."*

What about Trigger Warnings?

Whether trigger warnings are appropriate for classrooms has been a contentious public debate. Opponents of trigger warnings worry that they: make difficult but important topics—especially regarding racial equity and other social justice issues—taboo; allow students to avoid being challenged; are logistically difficult to manage, since it's impossible to know everything that could be a trigger; threaten job security of adjunct laborers by placing them at increased risk of having a student file a complaint; and so on. In sum, they worry that trigger warnings limit instructors' intellectual freedom and allow students to opt-out of challenging or uncomfortable material.

While these are important and valid critiques, proponents of trigger warnings argue that they are necessary and useful pedagogical tools to support ethical, inclusive teaching. As feminist disability scholar Angela Carter suggests, trigger warnings acknowledge the presence of traumatized students—who are often invisible in the classroom—and offer a means by which they can avoid emotional harm caused by re-traumatization and feel able to fully participate in classroom activities. In sum, these proponents argue that trigger warnings support students' intellectual freedom and allow traumatized students better opportunities to more fully opt-in to classroom activities.

Before deciding where you fit in these debates, it's important to understand the nature of triggering/re-traumatization and the intended function of trigger warnings. Being "triggered" is not the same thing as experiencing discomfort or being challenged. Triggering refers to a process of re-traumatization, where sensory reminders of a past trauma cause intense flashbacks in which the individual physically and mentally re-experiences a past trauma as if it were actually happening in that moment (SAMHSA 68). Re-traumatization can be a major setback in an individual's healing, and, in the case of students, in their ability to succeed academically. The goal of a trigger warning, then, is to prevent emotional harm by alerting students to the possibility of triggering and offering options for how they can protect themselves. In other words, they help prevent students being blindsided by reminders of their trauma, so they can brace themselves for how it might impact them.

Being "triggered" is not the same thing as experiencing discomfort or being challenged. Triggering is when sensory reminders of a past trauma cause intense flashbacks in which the individual re-experiences the trauma as if it were actually happening in that moment.

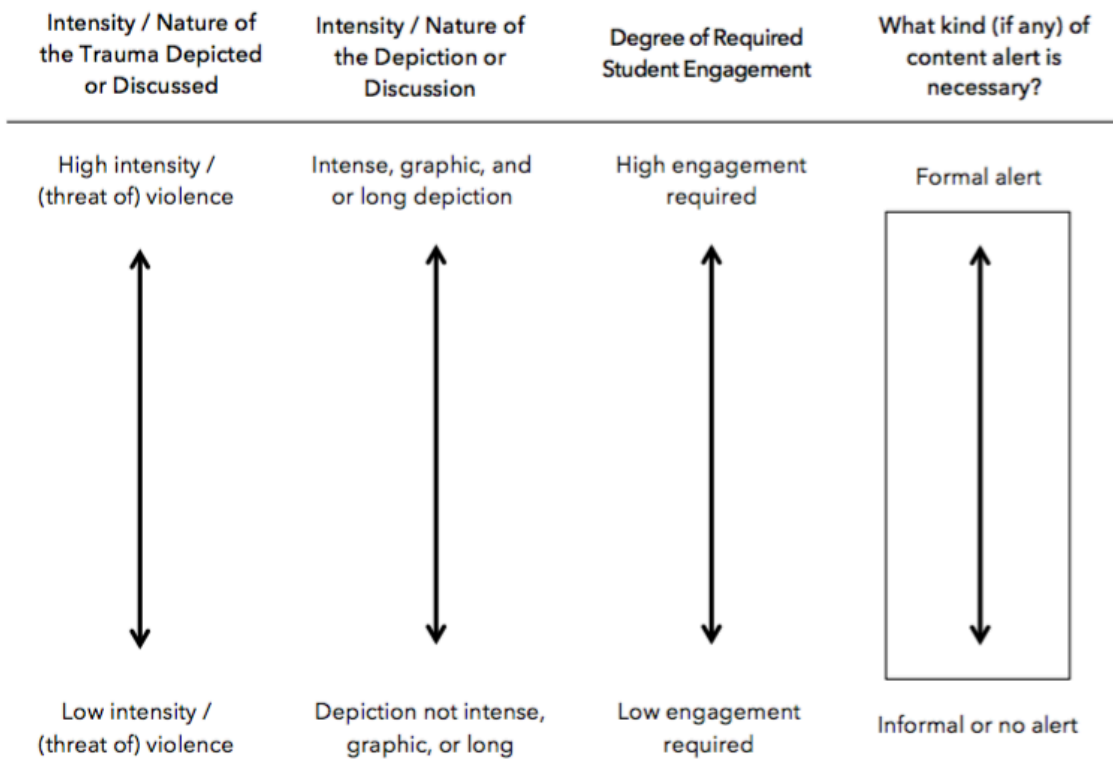
Clinical literature recommends the use of trigger warnings on material that is potentially harmful or provocative of strong emotional reactions, but instructors may also have good reasons for resisting the use of such warnings. Regardless, it's good practice to develop a clear personal policy and consider when it's appropriate to alert students to the presence of potentially re-traumatizing material that could inhibit their ability to intellectually engage in classroom activities. The important part is to ask yourself the following questions:

Reflection Questions:

- *What material in my classroom might be re-traumatizing?*
- *What accommodations am I willing to make who have a reasonable concern for their emotional safety (e.g. to step out of class, to complete a different assignment, to skip the assignment, to put their heads down)?*
- *How can I articulate the difference between discomfort and harm to my students, and myself?*
- *Even if I'm not using an official "trigger warning," in what other ways can I informally alert students to the possibility of re-traumatization so they can take the necessary precautions?*

Figure 6 below offers a tool for assessing whether a content alert of some kind may be necessary for particular texts, videos, discussion topics, audio files, etc. used in a class. Generally speaking, the need for a formal content alert increases with the intensity or threat of violence in the trauma depicted or discussed; intensity, graphic-ness or length of the depiction or discussion; and requirement for student engagement with the potentially re-traumatizing material. On the other hand, potentially re-traumatizing material that ranks low in all three categories may require an informal or no content alert

Figure 6: Assessing the Need for a Content Alert



However, if the possibly re-traumatizing material rates high on any of these three categories, it may be best to offer a content alert, even if it ranks low in the other two categories. Attention to social-ecological factors also has implications for determining whether a content alert and what kind would be necessary. For instance, knowing that 1 in 4 women are sexually assaulted in college means that there may be women in the class currently dealing with the ramifications of a sexual assault, and therefore it merits a great deal of care if this issue will be discussed in the classroom.

It is also good practice to set a foundation for emotional safety measures at the beginning of the class. This can include providing information about self-care and student services resources in the syllabus. It can also include simple statements such as, "There are times in the course when we will cover sensitive material. Your emotional wellbeing is important, and you may ___ in order to protect yourself." There are a number of ways instructors might acknowledge the importance of emotional safety, but the key components are to 1) acknowledge that emotional wellbeing is a priority, 2) provide options for mitigating the impacts of material that students experience as emotionally *harmful*, and 3) share information about self-care and other resources available to students.

The box on the next page provides more details about what considerations to make when giving a content alert, including sample scripts.

CONTENT ALERTS: Strategies and Sample Scripts

The goal of trigger or content warnings is to provide opportunities for students to protect their emotional wellbeing so that they can more fully engage in the classroom space and activities. Within that goal, there might be multiple ways to give a trigger or content warning, depending on the circumstances. For instance, the alert could be verbal given by the instructor or could be printed at the top of the potentially re-traumatizing material (or both). The alert could simply mention the type of trauma depicted, or could provide a longer description of the risks of re-traumatization. A good content alert strategy prepares for:

- **What will you say** (what information students need to make an informed choice)
- **How will you say it** (verbal, written, or both; use of non-judgmental language)
- **When will you say it** (in order to give students ample time to consider their options and/or consult with their therapist)

Below are some sample examples of how an instructor might effectively give a content alert.

On ___, we are going to discuss a text that has _____. I think this material is important to engage with because ___. This will likely be uncomfortable for most of you to discuss, and that's an important part of educational growth. However, I recognize that some of you may have personal experience with this issue and it may be harmful for you to engage with the material. If that's the case, you are encouraged to _____.

Please be aware that this text contains _____ and may be distressing to read/watch. If you need to pause and take a break, please do so.

TW: racial violence, emotional abuse

- **Information Sharing:** Providing individuals with all the information they need to make their own informed choices, including by sharing information about available resources and how to navigate them.
- **Hope:** Communicating the belief that “things can get better”, “you are capable,” and that “you are not alone,” in regards to both students’ ability to grow as writers and overcome distress.

It’s impossible to provide a complete account of how each principle might manifest in classroom practice, but Figures 7 and 9 provide are designed to help instructors think through how these principles might be implemented in all aspects of their pedagogy/classroom. Figure 9 provides a template that instructors can use to map out how they’ll implement each principle, and Figure 7 provides a few examples of what instructors might write to begin completing the rows on “safety” and “hope”:

Figure 7: Examples for Completing Figure 9

	Syllabus / Policies	Class Texts	Discussion	Writing (Formal / Informal)	Instructor and Peer Feedback	Physical Space (Class / Office)
<i>Safety</i>	<p>Explain what is confidential and what isn’t, as defined by FERPA, Title IX, and other relevant mandatory reporting laws</p> <p>Acknowledge available university resources, such as Counseling Center, Writing Center, and Veteran Student Affairs office</p>	<p>Provide content for violent material</p>	<p>Model discussion strategies, especially how to disagree or critique without being judgmental or threatening</p>	<p>Make a plan for if a student discloses suicidal thoughts or other distress in writing</p> <p>Avoid forcing students to write about intense personal matters</p>	<p>Focus on strengths, not just weaknesses</p> <p>Model productive criticism to students before they give each other feedback</p>	<p>Avoid forced physical contact</p> <p>Avoid violent or distressing images</p>
<i>Hope</i>	<p>Express willingness to help students increase their confidence as writers</p> <p>Acknowledge available university resources</p> <p>Acknowledge that struggling in college is normal and there are resources to help with whatever problems they face this semester</p>	<p>Balance intense readings or discussions with lighter or more hopeful readings/ discussions</p>	<p>If discussion over-focuses on critiques / problems / etc., draw attention to strengths / solutions / etc.</p>	<p>Include informal reflective prompts that ask students to identify their (writerly) strengths</p> <p>Include a formal assignment in which students can propose solutions or imagine better futures regarding the issues they’re researching</p>	<p>Praise strengths and acknowledge improvement often</p>	

As you may be able to see already, some of these principles will have overlapping practices, and there may be more relevant practices for implementing a principle in some dimensions of the class and fewer relevant practices in other dimensions. And that's OK. The important part is to keep these trauma-informed principles in the forefront of pedagogical choices and to intentionally pursue them across all aspects of your teaching.

It's also important to note that these principles and subsequent practices can/should be negotiated with students and may need to be updated from semester to semester or even within the same course. Consider this example from clinicians Elliott et al, who wrote about working at a shelter for domestic violence survivors. "Survivor" is typically thought to be a more empowering term than "victim" because it focuses on the individuals' strengths and capabilities, rather than the fact that they were victimized. However, Elliott et al found that women in this particular shelter sometimes found it more empowering to be called "victim," because it helped them own the fact that something bad was done to them, and it wasn't their fault. Others preferred to do away with the survivor-victim binary altogether and be referred to as clients, a term they felt didn't necessarily always identify them with their trauma.

This example demonstrates that even though we might agree upon definitions of each principle, whether the related practices are actually experienced as promoting students' resilience may take some inquiry and conversation over time. Criterion 6 supports this effort by providing resources for evaluation and feedback on trauma-informed writing pedagogy.

Active, Empathic Listening

Active listening strategies are another ongoing means through which to implement these principles, according to clinical literature. Of course, "listening" is a familiar term in writing studies, explored by scholars as Gesa Kirsch, Jacqueline Jones Royster, Muriel Harris, Steph Ceraso, Krista Ratcliffe, Mary Ann Cain, Katrina Powell and Pamela Takayoshi. Notably, Muriel Harris's *Teaching One-to-One* offers numerous adaptations of active listening to the work of writing instructors in one-on-one conferences, and it is available for free online (see "Resources" in the Appendix).

More recently, writing studies scholars—especially feminist scholars—have offered (re)definitions and methods for listening. These scholars consider how listening might be an active process of understanding the world from another's perspective, and particularly the perspective of people whose identities put them at the intersections of multiple forms of inequality. Listening, for these scholars becomes a process of putting off personal biases, recognizing power differentials, and developing dispositions of respect, humility, and collaboration.

Active, empathic listening, then, describes a set of skills designed by social workers and writing scholars to support respectful, empowering relationships built on trust and power-sharing.

Clinical literature also contains robust articulations of listening. Since the 1960s, social work scholars have posited that active, empathic listening is one of the most central skills for social work practice. For social workers, active listening involves fully concentrating on what clients are saying, reflecting back what has been said, and acknowledge/validating clients' feelings. The goal of such strategies is to develop trusting, hope-building relationships with clients and to arrive at non-directive problem-solving approaches.

Active, empathic listening, then, describes a set of skills designed by social workers and writing scholars to support respectful, empowering relationships built on trust and power-sharing. Key components of active listening are described in Figure 8 below.

Figure 8: Active Listening

Component	Example
<p>Open-Ended Questions that avoid guiding students to particular answers and invite them to elaborate on details regarding their perspective</p>	<p>"Tell me more about . . ."</p> <p>"What do you mean by . . ."</p> <p>"What are your goals with this paper?"</p>
<p>Reflective statements to check that you have understood correctly</p>	<p>"So what you're saying is _____. Does that sound right?"</p> <p>"It seems like your main concerns are _____, and you'd like help with _____."</p>
<p>"I" statements, especially when there is conflict</p>	<p>"I am concerned about . . ."</p> <p>"When I face a similar issue, I _____. Does that seem like it would work for you?"</p>
<p>Affirmation, expressions of empathy, and avoiding shaming/blaming language</p>	<p>"It's understandable that you might feel that way."</p> <p>"I can imagine ____ must have been really frustrating."</p> <p>"I'm impressed with how you're able to manage so many stressful activities at once!"</p> <p>"I appreciate you sharing that with me. It must have been difficult!"</p> <p>Avoid: "You should have . . ." or "This wouldn't have happened to you if you . . ."</p> <p>Instead: "I'm sorry that happened to you" or "I can see how you tried _____. Next time, it might work better if you _____."</p>
<p>Humility, especially a willingness to hear out another's perspective and question personal biases</p> <p style="text-align: center;"><i>and</i></p> <p>Respect, especially for cultural and linguistic differences</p>	<p>"I'm not familiar with _____. Can you tell me more about that?"</p> <p><i>Internal: What this student is saying makes me uncomfortable because _____. It conflicts with how I've always thought about _____. For now, I'm going to set that aside so I can hear this from the student's perspective.</i></p>
<p>Privileging non-directive problem-solving approaches</p>	<p>Start by discussing which options the student has already considered first.</p> <p>Ask questions that might help students arrive at a solution on their own.</p> <p>Offer multiple acceptable options.</p>

Cultural Awareness and Responsiveness

As explained in the “Culture and Trauma” breakout box under Criterion 1, cultural awareness and responsiveness are important for establishing classroom environments that support student trauma survivors (and all students). It is therefore important for instructors to plan to learn about and enact culturally-responsive principles in their classrooms. This includes attention to implicit biases, learning about changes in appropriate terminology, and talking with students about how to exhibit behaviors in classroom discussions and other activities that demonstrate respect for all students’ diverse cultural and linguistic backgrounds.

Writing studies scholarship has a rich history of attending to these issues in teaching practice. For instance, as early as 1972, the National Council of Teachers of English’s resolution on “Students’ Right to their Own Language” advocated for linguistic inclusivity by stating that teachers must have “experiences and training that will enable them to respect diversity and uphold the rights of students” to “the dialects of their nurture or whatever dialects in which they find their own identity and style” (Perryman-Clark 4). Focusing on the field’s erasure of indigenous culture, history, and scholarship, Malea Powell’s 2012 CCCC Chair’s Address argued for “an epistemological shift of epic proportions where our job as teachers is to *always* reframe ‘the’ way as *one* way, as a set of specific cultural values embodied in particular practices” (402).

Related scholarship on other aspects of student identity performs similar work in fostering inclusive teaching practices (Brent; Winans; Cleary; Hart and Thompson; Price; Webb-Sunderhaus). For example, in *Mad at School*, Margaret Price illustrates the privileging of able bodyminds in academic spaces and argues for practices that make academia more accessible to students with disabilities and mental illnesses. Other scholars have explored specific aspects of identity such as race (Banks; Royster; Inoue; Gilyard), gender (Glenn; Devereaux-Ramirez; Bleich; Ritchie and Arnold; Royster), sexuality (Rhodes and Alexander; Cooper), class (Barton and Hamilton; Brandt; Hallet), and others. Together, this scholarship advocates against practices that allow educational institutions in particular to exclude certain identities, overtly or, especially, covertly.

In addition to this writing studies literature, resources offered in Criteria 5 and 6, as well as on the “Resources” page at the end of this guidebook, offer a range of suggestions and resources to develop greater cultural awareness and responsiveness. A particularly good starting point is Barbara Gross Davis’s chapter on “Diversity and Inclusion in the Classroom” in her book *Tools for Teaching*. Davis, whose background is in educational psychology, outlines concrete and diverse strategies for responding to cultural difference in the classroom and creating a supportive environment where students feel their cultural heritages are respected. Such suggestions may be mapped on to various dimensions of the TIWP template offered in Figure 9.

Other Ideas for Implementing Trauma-Informed Principles

Need more help brainstorming ideas for Figure 9? This list provides a few examples of possible classroom practices instructors might use to implement trauma-informed principles described in this section.

- Start class with 5 minutes of mindfulness to allow students time to collect their thoughts and get focused. This can be guided or unguided, but always allow students the option of keeping eyes open or closed.
- Be sure you are pronouncing students’ names correctly and using the correct pronouns. Ask students to share their names and pronouns on the first day of class, and tell them it’s OK to correct you if you get it wrong.
- Consider developing one or more grading rubrics in conversation with students. Ask students to use what they’ve learned in class to determine what a “good paper” will look like for the given assignment.
- Reconsider your absence and late work policies and whether these might more intentionally reflect the experiences of students facing mental health crises, who may need more time to complete their work or may have a greater struggle coming to class.

Figure 9: TWP Template for Classroom Practice

	Syllabus / Policies	Readings	Discussion	Partner / Group Work	Writing (Formal & Informal)	Instructor and Peer Feedback	Physical Space (Class and Office)	Other
<i>Safety</i>								
<i>Trust</i>								
<i>Collaboration</i>								
<i>Choice</i>								
<i>Respect</i>								
<i>Information Sharing</i>								
<i>Hope</i>								



#5: TIWP should support instructor self-care as a valued, critical component of professional labor.

Though self-care seems to some like a fad term or a luxury of less busy people, from a clinical perspective, a robust self-care plan serves a central purpose in effective trauma-informed practice. Self-care plans address several barriers to/risks of trauma-informed pedagogy:

- Compassion Fatigue
- Need for healthy boundaries to avoid over- or under- involvement with students
- Self-reflexivity of instructors' own possible projections/coping mechanisms

Self-care plans are particularly well-suited to address compassion fatigue. Compassion fatigue refers to experiences of emotional exhaustion, burnout, decreased sense of personal accomplishment, and other stress reactions that can develop as a result of helping others, particularly when that helping involves witnessing others' pain. Secondary trauma refers to trauma-related stress reactions and symptoms caused by exposure to another individual's traumatic experiences. Both are risks associated particularly with caring professions such as counseling or teaching. Healthy self-care planning can help mitigate the negative impacts caused by compassion fatigue/secondary trauma and ensure instructors are better able to support students in appropriate and healthy ways.

Creating a Self-Care Plan

The most important components of a self-care plan include:

- Identifying current and likely stressors (both personal and professional, both ongoing and temporary/seasonal)
- Creating a list of actions or activities that can help alleviate stress in general or reactions to specific stressors
- Identifying peers, friends/family, or professionals who can provide support during times of stress
- Maintaining balance by paying attention to physical, psychological, emotional, spiritual, personal, and professional wellbeing
- Setting clear boundaries with students, colleagues, and other aspects of professional life
- Creating an "emergency plan" for what to do if an unforeseeable crisis occurs

Many free online tools are available to assist faculty in making these self-care plans, including the UofL Counseling Center's brief "Self-Care Worksheet" and the University of Buffalo School of Social Work's longer "Self-Care Starter Kit." Links to both resources are available in the Resources section below.

Figure 10: The Olga Phoenix Project's "Self-Care Wheel"



REFLEXIVITY IN WRITING STUDIES

Writing studies scholars have long theorized the role of reflexivity in research and teaching practice.

For example, in 1987, Ann Berthoff wrote about reflexivity as the ability “to look—and look again—at our theory and practice and at the method we can derive from the dialectic of their relationship” (xi). In 1997, Donna Qualley defined reflexivity as “a response triggered by a dialectical engagement with the other—an other idea, theory, person, culture, text, or even an other part of one’s self” (11). For Qualley, reflexivity is an ongoing and recursive process of understanding an other, which includes self-examination and critique. Building on this definition, Holberg and Taylor argue that teachers must “use our critical skills to [...] contemplate our own textuality, our own motivations, priorities, fears, and ambitions” (3).

Lad Tobin offers an example of what can be gained from such reflexive teaching stances. Tobin reflected on how he responded more favorably to students who made him feel secure than those who threatened him, and to him, this meant that he needed to monitor both moments where he felt like giving up on a student and moments where he felt “tremendous personal pride in a student’s work” (347). He reflects, “I need to question my own motives. I need to discover in what ways my biases and assumptions—both conscious and unconscious are shaping my teaching” (347).

Tobin urges the field “to develop a theory of reading student texts which takes into account our reading of the students themselves, of our own unconscious motivations and associations, and, finally, of the interactive and dialectical nature of the teacher-student relationship” (335).

More recent scholarship echoes the importance of self-reflexive teaching practice to accomplish a number of pedagogical goals. For example, Stephanie Kerschbaum argues that attention to “markers of difference” can help “build reflexivity between teachers’ and researchers’ categorical awareness and the meanings that are ascribed to those categories” (631). This in turn helps teachers avoid being reductive of demographic information and difference in their classrooms, as “a resource for coming to know others” (640).

Generating ideas for a self-care plan comes easily to some but may be more difficult for others. Working with peers or professionals (such as a counselor) can help instructors brainstorm what elements should be in their self-care plan. Additionally, Figure 10 on the previous page presents a “Self-Care Wheel” created by the Olga Phoenix Project, which is dedicated to preventing vicarious trauma and related issues. The wheel describes possibilities for relieving stress and promoting welling in six dimensions of wellbeing—physical, psychological, emotional, spiritual, personal, and professional.

However, even though these resources provide rich support for developing an effective self-care plan, self-care is a complex, dynamic, and long-term project. Stressors and stress-relievers may change over time, and new experiences and responsibilities might require new self-care planning. It’s important to remember that self-care plans can change to meet new needs, and it’s OK to experiment with what works for you.

Sustaining Self-Reflexivity as Part of Self-Care

Adapting a definition from social work scholar Stan Houston, reflexivity is a process that helps people “examine how they carry out every day, taken-for-granted practices that are embroiled in symbolic interaction with service users [i.e. students] and other professionals [i.e. instructors and administrators]” (247). More specifically, reflexivity enables teachers “to be sensitive to the impact of power on themselves and services users” (247). Thus, self-reflexivity supports both a more effective implementation of TIWP and self-care planning because it helps instructors become more aware of their own learned behaviors/biases/stressors that might negatively impact their personal and professional goals.

Reflexivity is also a widely discussed term in writing studies, and it’s an especially popular construct in literature about research methods and ethics (especially feminist ones) and in pedagogy-focused journals such as *Pedagogy* (Powell and Takayoshi; Kirsch; Willard-Traub; Bishop; Holberg and Taylor “The Teaching Self”; Donahue). The box to the left provides an overview of this research, demonstrating how self-reflexivity has long been considered perhaps *the* central teaching practice. A self-reflexive stance thus coheres with both writing studies pedagogy research and clinical literature on trauma-informed care.

The box below provides examples of self-reflexive questions instructors can use to become more aware of their personal beliefs, attitudes, and actions that influence their ability to enact self-care and various aspects of TIWP.

SAMPLE SELF-REFLEXIVITY PROMPTS

This box describes possible questions to support reflexivity on a range of topics related to trauma-informed approaches to writing pedagogy.

*Cultural Responsivity (from Barbara Gross Davis's *Tools for Teaching*)*

- Do you interact with men and women in ways that manifest double standards?
- Do you inadvertently undervalue comments made by speakers whose English is accented differently from your own?
- Do you assume that students of some racial or ethnic groups will need additional help? Or that students of some racial or ethnic groups will do better than others?
- Are you comfortable around people whose racial, ethnic, or sexual identity differs from your own?
- Are you comfortable disclosing your knowledge of and experiences with diversity?
- How do you handle your own doubts or ambivalence about multicultural issues?

Attitudes and Beliefs about Students

- Reflect on experiences from your teaching that you are most proud of.
 - Why were you proud of those experiences?
 - What about your teaching or yourself did those experiences validate, affirm, or nurture?
- Reflect on experiences from your teaching that were most disappointing or frustrating.
 - Why were you frustrated or disappointed by those experiences?
 - What about your teaching or yourself did those experiences invalidate, deny, or threaten?
- For now, set aside your beliefs about those positive and negative experiences. Consider other ways you might interpret those positive and negative experiences.
 - Might you have felt differently about those experiences if they hadn't affirmed or threatened your beliefs or values about teaching or yourself as a teacher?
 - What other life experiences might have influenced you to interpret those teaching experiences as positive or negative? For instance, could a resistant student remind you of another frustrating relationship from your past?



#6: TIWP must sustain regular feedback from students and instructors to keep improving on current practices.

RESEARCH ETHICS IN WRITING STUDIES

Writing Studies has amassed a robust body of scholarship on research ethics. Within this scholarship, feminist research methods and “teacher research” are particularly relevant to seeking feedback from students about TIWP, because this research holds similar values regarding power, reflexivity, trust, and collaboration.

For instance, Gesa Kirsch argues that feminist researchers must attend to how interview environments create intimacy that imitates (but is not) friendship and thus invites participants to divulge risky information they might not ordinarily reveal. This caution is similar to what Thomas Newkirk famously identified as “seduction and betrayal” in research, referring to how researchers seduce participants into trusting them enough to reveal intimate details, and then betray participants by finding only “bad news” critiques. Other feminist scholars have considered what it means for researchers to “listen” (Ratcliffe), to practice “reciprocity” (Powell and Takayoshi), and to be self-reflexive (Fonow and Cook), among other issues.

Scholarship on teacher research advocates for similar values. The 2001 CCCs “Guidelines for the Ethical Treatment of Students and Student Writing in Composition Studies” states that teachers should “seek to assure that students will suffer no harm if they elect not to participate in a study, that their expectations of privacy will be honored, and that instructional aims will not be shortchanged in the pursuit of research goals” (Schneider 83). Revisiting these guidelines, Schneider argues for viewing students as co-researchers, not always just subjects of research. Patricia Lambert Stock insists that findings of such research must be considered in conversation with colleagues and students sustaining a process “in which developing understandings are reviewed, expanded, amended, or corrected” by others (115).

Of course, evaluations used to inform teaching practice don’t have to follow all the same requirements as research intended for publication, which is required to obtain IRB approval, receive informed consents, and so on. However, ethical questions raised by this research can help teachers researching their use of TIWP to do so ethically:

- What is motivating my research? Who does it benefit?
- How can I collect, analyze, and use data collected in ways that benefit rather than harm participants?
- What will be my participants’ (i.e. students’) expectations of confidentiality?
- In the event I cannot guarantee confidentiality, how will I explain the risks to participants? How do I create conditions in which participants will feel reasonably safe being honest?
- How can I avoid “seducing” participants into sharing personal information they might not otherwise reveal?
- How can I develop a researcher-disposition that listens well and generously to participants’ perspectives?

Seeking regular feedback from students is a familiar concept in writing studies. As early as 1973, an issue of *College English* assembled writing from college students giving “more-than-casual feedback” on their experiences with writing instruction. The guest editors note that *College English* articles are so often *about teaching students*, but “those students . . . should have a chance to say what they think about teaching methods,” and “that space should be made available in the pages of scholarly publication for students’ responses to their curriculum and to what educators write for journals like this one” (Evans and Fernandez 235). This tradition of learning from students has continued in more recent scholarship involving “teacher research,” such as Michelle Navarre Cleary’s work investigating adult learners’ perspectives on the writing process or Elizabeth Wardle’s article that analyzed students’ self-reports of knowledge transfer.

This and other research—as well as regular course evaluations and semester-end reflective writing prompts that are typical at many universities—seek to confirm, correct, and enrich instructors’ knowledge of writing (and) instruction by valuing the perspective students bring to these issues. Learning from students about their perspectives on TIWP (especially as outlined in Criteria 3 and 4) is just as useful. Such feedback can help broaden our understanding of what practices promote healthy classrooms, evaluate the effectiveness of TIWP at meeting its stated goals, and ensure TIWP adapts to changing contexts of trauma over time.

Making an Evaluation Plan: What, How, and When

There are many ways instructors can seek feedback from students on TIWP, and these efforts can be implemented within current

structures that already allow us to receive feedback from students, such as:

- Course Evaluations
- Formal or Informal Reflective Writing
- Group Discussions
- Class Polls or Surveys
- Individual or Group Conferences

Any of these means might elicit valuable information from students on a range of topics related to TIWP, focusing on the principles and practices outlined in Criteria 3 and 4 in this guidebook (since these sections advocate for elements of course design that students would be aware of in ways they might not for materials in the other sections). For instance, instructors might want to know whether class discussions in general or a particular discussion felt “safe” and “respectful” to students. They might want to know about whether students felt efforts at collaboration (as a whole or on a particular assignment) were successful. They might want to know whether students experience a greater sense of self-efficacy (e.g. more confidence in writing skills, ability to find and navigate useful resources, ability to express themselves, or expand social networks) as a result of the course. It’s not necessary to evaluate the instructor’s effectiveness at implementing every principle or practice outlined in section 2 or 3 at every instance of evaluation; instead instructors can use their own discretion to determine which elements to investigate at different points during the semester or across semesters and ensure that, over time, they are receiving feedback from students on the various components of TIWP.

In addition to planning *what* information instructors want to learn from students, they should also consider *how* they plan to explore those issues. This includes by addressing the ethical questions in the “Research Ethics in Writing Studies” box above, as well as considering whether instructors will seek feedback through **formal** (e.g. surveys, structured interviews), **semi- / in- formal** (e.g. unstructured interviews, group discussions, reflective writing prompts, class polls), or **ongoing** (suggestion box, communicating an “open door” policy) methods. Each approach offers its own benefits and disadvantages.

For instance, formal methods like surveys might allow for quicker and more frequent data collection and facilitate easier generalizations across responses, because participants (i.e. students) would be answering the same uniform questions (and surveys are easy to anonymize, potentially inviting students to be more comfortable offering critique). Less formal methods such as group discussions might offer richer, more qualitative information about how students are processing their experiences in the class, though this information

The *what, how, and when* of seeking student feedback does not have to be totally new, but can be an intentional, useful complement to what instructors already do.

is not anonymous and may not as readily encourage participants to be open. Ongoing opportunities for feedback might allow instructors to become aware of day-to-day concerns students have, but this feedback may be unique to a single student rather than the class as a whole. Instructors should keep the benefits and disadvantages of each approach in mind when choosing *how* to seek feedback from students.

Finally, instructors should also consider *when* they might collect various types of student feedback, such as at the beginning of a semester—when preparing to implement TIWP principles—or in the middle or at the end of a class—when evaluating its effectiveness. Again, the *what, how, and when* of seeking student feedback does not have to be a totally new addition to already existing means of receiving feedback from students, but can be an intentional, useful complement to what instructors already do.

Figure 11 below summarizes these considerations, and instructors can use this table as a template to begin planning to evaluate their implementation of TIWP.

Figure 11: Template for Developing an Evaluation Plan

WHAT?	
<p><i>What TIWP principle or practice do you want to know more about (see Criteria 3 and 4)?</i></p> <ul style="list-style-type: none"> • <i>Safety</i> • <i>Trust</i> • <i>Collaboration</i> • <i>Choice</i> • <i>Respect</i> • <i>Information Sharing Hope</i> • <i>Active Listening</i> • <i>Content Alerts</i> • <i>Resilience Factors</i> • <i>Other</i> 	
HOW?	
<p><i>What formal, semi- / in- formal, or ongoing method will you use?</i></p> <p><i>Will this be a new evaluation process, or added to an existing one?</i></p> <p><i>Thinking about the ethical questions raised in the "Research Ethics in Writing Studies" box above, what ethical considerations will you make to protect the safety of participants and create conditions in which they feel comfortable being honest?</i></p>	
WHEN?	
<p><i>Will this take place at the beginning, middle, or end of the class? How does that change how you will analyze or use this information?</i></p>	

The Resources page below includes more research-validated tools to help support intentional feedback processes that instructors can adapt to their classrooms, including the ACEs (Adverse Childhood Experiences) Resources Center list of assessment and evaluation tools and an article by Roger D. Fallot and Maxine Harris that offers many sample questions and other concrete advice for establishing a regular feedback process, as well as analyzing and using that feedback.

TIPS FOR INSTITUTIONAL SUPPORT

This section offers guidance for administrators promoting institutional support for TIWP. Instructors may also find it helpful to explore ways to influence broader university structures to become trauma-informed.



PROMOTING INSTITUTIONAL SUPPORT FOR TRAUMA-INFORMED PEDAGOGY

As argued earlier in this guidebook, Trauma-Informed Writing Pedagogy must be implemented in writing programs as a whole and across the university more generally in order to be most effective. Such a perspective is also referenced by writing studies scholars, such as Dan Morgan, who, while discussing how to respond to difficult student texts, says “Let me simply put out a call to college administrators to create detailed and responsible institutional policies and provide adequate resources” (319).

Although Writing Program Administrators (WPAs) have been calling for years for attention to institutional support for writing programs, clinical research can inform our discussions about how that support promotes TIWP. Clinical scholarship includes resources for implementing trauma-informed principles and practices. The box to the right includes SAMHSA’s 16-part implementation guide for Trauma-Informed Care, and WPAs can use it to develop a broad strategy for implementing Trauma-Informed Writing Pedagogy within their writing programs and influencing the larger university to become more trauma-informed.

However, this guide is tailored to social service organizations that deal with behavioral and mental health, and thus some of the information may not be relevant for writing programs. This guide can instead be

supplemented with an approach forwarded by social work scholars Roger D. Fallot and Maxine Harris. Fallot and Harris offer an approach to “creating cultures of trauma-informed care” that are more general and easily adaptable to the work of writing programs. Fallot and Harris offer 4 steps and several assessment/planning resources, including sample assessment questions, that administrators can use to assess current practices, identify needs, and track their progress in creating a trauma-informed culture in their writing program. This article is listed in the “Resources” section under “Evaluation and Feedback.”

As administrators develop these plans and assess their departments’ needs regarding TIWP, they should consider how trauma-informed principles and practices might be implemented across the diverse logistical factors involved in running a writing program, such as:

SAMHSA’S Implementation Guide for Administrators

This box lists all 16 steps SAMHSA suggests for organizations seeking to become trauma-informed. Detailed explanations are included in SAMHSA’s *TIP 57* handbook (see Resources section). Not every step will be relevant to writing programs (e.g. we don’t normally do “screenings”); however, many of these steps can be adapted to work WPAs regularly take part in.

1. Show Organizational and Administrative Commitment to TIC
2. Use Trauma-Informed Principles in Strategic Planning
3. Review and Update Vision, Mission, and Value Statements
4. Assign a Key Staff Member To Facilitate Change
5. Create a Trauma-Informed Oversight Committee
6. Conduct an Organizational Self-Assessment of Trauma-Informed Services
7. Develop an Implementation Plan
8. Develop Policies and Procedures To Ensure Trauma-Informed Practice and To Prevent Re-traumatization
9. Develop a Disaster Plan
10. Incorporate Universal Routine Screenings
11. Apply Culturally Responsive Principles
12. Use Science-Based Knowledge
13. Create a Peer-Support Environment
14. Obtain Ongoing Feedback and Evaluations
15. Change the Environment To Increase Safety
16. Develop Trauma-Informed Collaborations.

- Policies and Guidelines
- Internal Procedures and Strategic Planning
- Website and Other Online/Print Resources for Faculty and Students
- Professional Development
- Physical Spaces

Figure 11 offers a template to assist administrators in planning for how they'll implement trauma-informed principles across all these dimensions. There are also several free and research-validated "agency self-assessment" tools that administrators can use to assess 1) their programs' readiness to implement trauma-informed practices and 2) how well these efforts are proceeding. Two such tools included in the "Resources" section are the Trauma-Informed Care Project's and the American Institutes for Research's self-assessment tools. These tools are designed to evaluate the extent to which organizations are already trauma-informed and identify priorities/develop a plan for deepening these trauma-informed approaches.

Tips for Training Faculty in TIWP

Clinical research on the effectiveness of trauma-informed training efforts suggests that such training should begin at the point of orientation and be a part of ongoing staff development, which includes making trauma-informed principles and practices a part of existing professional development workshops on other topics (Kenny et al 20). Clinical literature also indicates that professional development on trauma-informed principles/practices should maintain a mix of sharing information/resources and opportunities for discussion, questions, personal reflection, and application. Kenny et al particularly recommend the use of interaction with peers, case vignettes, and multi-media presentations (20). These suggestions cohere with WPA research on faculty professional development. Additionally, WPA research advocates for professional development that doesn't only rely on traditional workshop-style training (e.g. Margaret J. Marshall on "teaching circles" and Joan A. Mullin on "interdisciplinary work"). This scholarship also offers perspectives on rethinking what professional development structures do and for whom, which can help WPAs find creative ways to help faculty learn TIWP (Schneider "Rhetorical Situation"; Willard-Traub; Gorzelsky).

Though this guidebook and the provided resources/reflective exercises are a good start for

TRAUMA IN WPA RESEARCH

There has been some scholarly discussion on how WPAs should respond to trauma in the classroom. For instance, in a collection on *Trauma and the Teaching of Writing*, Murphy et al briefly discuss actions WPAs can take –such as partnering with counselors—to account for students' and teachers' emotional safety during times of national crisis, such as Sept. 11, 2001. Wendy Bishop suggests it may be helpful for administrators and teachers to take a class that introduces basic principles of psychology and counseling in order to be more informed when working with students who are in crisis. Dan Morgan questions whether institutional policies and guidelines are clear or comprehensive enough on issues related to student trauma and calls on WPAs to create these policies so that teacher are not "on their own when it comes to such issues" (219).

Unfortunately, these brief discussions in WPA literature have seldom ventured beyond attention to dealing with crises—especially national tragedy or students in acute mental distress—and there has been no significant scholarly discussion on what it might mean for writing programs to be trauma-informed.

However, WPA scholarship has much more deeply investigated issues related to TIWP. In particular, this literature has explored developing inclusive writing programs and assessment practices (Inoue; Poe and Inoue; Powell; Price) and creating effective professional development for instructors (Brewer et al; Marshall; Mullin; Schneider "Rhetorical Situation"; Willard-Traub). WPAs seeking to creating trauma-informed writing programs can become familiar this literature's strategies on building inclusive programs and effective professional development and adapt it to the implementation of trauma-informed principles and practices.

developing training materials, it would also be wise to partner with experts in trauma-informed services, such as professionals from the Counseling Center, the Department of Social Work, or even some individuals from the Dean of Students/Student Care Team office. Offices like these are well-versed in training faculty on a variety of topics related to trauma-informed approaches to teaching and supporting distressed students more generally. They can also offer workshops and other assistance on creating trauma-informed programmatic policies and procedures.

Because time may present a barrier to faculty attending such trainings, administrators might consider developing online materials such as videos of workshops, handouts, and so on. They might also consider providing support (e.g. registration fees) for external trainings faculty might want to take on their own to develop skills such as creating safe spaces or Mental Health First Aid.

Anticipating Barriers to Trauma-Informed Writing Programs

According to clinical literature, there are several barriers that may inhibit faculty adopting and sustaining trauma-informed practices. One such barrier is known as the empowerment dilemma. Vaughn and Stamp identify this dilemma as the conflict between the empowerment model—which functions on power-sharing, collaboration, and choice—and the logistics of running an effective program or organization (e.g. classroom), which sometimes means that authority figures (e.g. teachers) must exert power over individuals and limit collaboration and choice. Clinicians also note that in many organizations, there seems to be a “gravitational pull toward the punitive,” meaning that, as Foucault would argue, organizations such as educational institutions are design to “discipline and punish” rather than support the kind of individual autonomy and self-direction advocated for by trauma-informed care literature. And finally, attitudes toward trauma-informed principles and practices are not always favorable; in other words, effective training alone doesn’t mean that faculty will have a positive attitude toward implementing those practices.

Both Kenny et al and Falot and Harris provide helpful perspectives on how to develop organizational cultures that embrace trauma-informed principles. Additionally, WPAs should keep the above barriers in mind when designing professional development and think about offering training that:

- Identifies potential conflicts between the goals of empowerment and the logistics of classroom/program management and brainstorms methods to promote empowerment as much as possible
- Strategizes ways to mitigate the disproportionately negative impact on trauma survivors of policies and guidelines that are punitive (such as late work and absence policies)
- Explores faculty *attitudes* toward trauma-informed principles and practices in order to develop arguments in favor of the dispositions faculty need to have in order to sustain trauma-informed writing pedagogies

The box on the next page, as well as any of the “Reflection Questions” boxes throughout this guidebook, offers some questions that WPAs might use to engage faculty in conversations about TIWP and related challenges.

CONVERSATION STARTERS: Discussion Topics to Support Trauma-Informed Teaching

Clinical and writing studies research has found that training is more effective and long-lasting when participants are able to actively participate in the training and discuss their ideas with others (Kenny et al; Marshall). The lists below include sample discussion starters to generate conversations with writing instructors about their values/experiences related to student trauma, as well as to brainstorm ways they might respond to difficult, trauma-related scenarios with trauma-informed principles in mind.

Value/Experience Questions:

- *What does it mean to be compassionate as a writing instructor?*
- *What is the relationship between compassion and boundaries?*
- *What experience do you have with student trauma and distress?*
- *What knowledge or skills do you wish you had about these issues?*

Scenarios:

- *What are some of your experiences working with distressed or traumatized students in the past? What have you learned about handling situations like that?*
- *How might you handle the following situations, based on what you've learned in this workshop and your experience as an instructor?*
 - *A student in your class expresses that she is feeling down and depressed and says, "I'm not sure I can do this anymore."*
 - *A student becomes hostile after receiving a poor grade on an assignment.*
 - *You find out that a student in your class is being investigated for assaulting another student in your class.*
 - *In the course of a group discussion, a student discusses a past abusive relationship and begins to get emotionally overwhelmed.*
 - *One of your students started the semester by being involved and turning in assignments on time. As the semester went on, however, he has been showing up to class less and less. In a conference with this student, you find out that he recently broke up with his long-time partner and has been living out of his car.*
 - *A student comes to you and apologizes for missing class and some assignments. She says it's because she's been having intense bouts with depression.*
 - *A student who you've working with a lot begins attending your office hours more frequently than you're comfortable with and discussing many personal issues that aren't related to class.*

Figure 11: Template for Implementing TIWP within a Writing Program

	Policies / Guidelines	Strategic Planning	Website / Other Resources	Physical Spaces	Procedures	Professional Development
<i>Safety</i>						
<i>Trust</i>						
<i>Collaboration</i>						
<i>Choice</i>						
<i>Respect</i>						
<i>Information Sharing</i>						
<i>Hope</i>						



RESOURCES

Topic	Resources
General	<p>Carello, Janice and Lisa D. Butler. "Potentially Perilous Pedagogies: Teaching Trauma Is Not the Same as Trauma-Informed Teaching." <i>Journal of Trauma and Dissociation</i>, vol. 15, no. 2, 2014, pp. 153-168.</p> <p>Describes dangerous and misinformed teaching practices that engage trauma, as well as more ethical, trauma-informed teaching practices.</p> <p>Dass-Brailsford, Priscilla. <i>A Practical Approach to Trauma: Empowering Interventions</i>. SAGE Publications Inc., 2007.</p> <p>Thought designed for counselors, this handbook offers background on trauma, resilience, cultural competency, and empowering interventions, which instructors might find as useful background information to support their trauma-informed teaching.</p> <p>National Institutes of Health. "Exhibit 1.3-1: Immediate and Delayed Reactions to Trauma." https://www.ncbi.nlm.nih.gov/books/NBK207191/table/part1_ch3.t1/?report=objectonly.</p> <p>An expanded list of typical responses to trauma.</p> <p>Substance Abuse and Mental Health Services Administration. <i>KAP Keys For Clinicians based on TIP 57. Treatment Improvement Protocol (TIP) Series 57</i>. SAMHSA, 2015. HHS Publication No. (SMA) 13-4420.</p> <p>Provides an overview of Trauma-Informed treatment principles that, though created for clinicians, can still offer instructors an introduction into trauma and trauma-informed principles/practices.</p> <p>Substance Abuse and Mental Health Services Administration website: store.samhsa.gov</p> <p>Contains many free, downloadable resources on trauma in general, specific types of trauma, and suggestions for individuals working with trauma survivors.</p>
Support Services	<p>University of Louisville Counseling Center <i>Louisville.edu/counseling</i> (502) 852-6585</p> <p>Provides short-term counseling for individuals, couples, and groups, in addition to psychological testing, support groups, crisis intervention, and outreach/training</p> <p>Dean of Students / Student Care Team <i>http://louisville.edu/dos/facultystaff/student-care-team</i> (502) 852-5787</p> <p>Communicates among various University partners and resources to provide assistance to students in need of care or experiencing distress. Website also include a "Report a Concern" form.</p> <p>UofL Concern Center <i>Louisville.concerncenter.com</i></p> <p>A searchable database of campus resources that address a variety of concerns.</p>

	<p>United Way Worldwide 2-1-1 211.org 211</p> <p>A searchable database of nationwide support services that address a variety of concerns.</p>
Social-Ecological Model & Ecologies of Writing	<p>Edbauer, Jenny. "Unframing models of public distribution: From rhetorical situation to rhetorical ecologies." <i>Rhetoric Society Quarterly</i>, vol. 35, no. 4, 2005, pp. 5-24.</p> <p>Fleckenstein, Kristie S., Clay Spinuzzi, Rebecca J. Rickly, and Carole Clark Papper. "The Importance of Harmony: An Ecological Metaphor for Writing Research." <i>College Composition and Communication</i>, vol. 60, no. 1, 2008, pp. 388-419.</p> <p>Substance Abuse and Mental Health Services Administration. <i>TIP 57: Trauma-Informed Care in Behavioral Health Settings</i>. Treatment Improvement Protocol (TIP) Series 57. SAMHSA, 2015. HHS Publication No. (SMA) 13</p> <p>A complete handbook designed for clinicians that describes trauma-informed care in detail. Though some material may not apply to teaching, instructors who want a more detailed introduction to Trauma-Informed Care and the Social-Ecological Model can find this information in this free, downloadable handbook.</p>
Cultural Awareness & Responsivity	<p>Davis, Barbara Gross. "Diversity and Inclusion in the Classroom." <i>Tools for Teaching</i> (2nd Ed). Jossey-Bass, 2009.</p> <p>Eyerman, Ron. "Cultural trauma and collective memory." <i>Cultural Trauma: Slavery and the Formation of African American Identity</i>. Cambridge U. P., 2004, pp. 1-22.</p> <p>University of Louisville Cultural Center: Louisville.edu/culturalcenter</p> <p>University of Louisville LGBT Center: Louisville.edu/lgbt</p>
Mental Health First Aid	<p>National Council for Behavioral Health and Missouri Department of Mental Health. <i>MentalHealthFirstAid.org</i>. 2019.</p> <p>The official website of Mental Health First Aid that describes the program, training resources, and available in-person trainings.</p>
Self-Care and Reflexivity	<p>UofL Counseling Center. "Self-Care Worksheet." http://louisville.edu/counseling/resources/SelfCareWorksheet102018.pdf</p> <p>University of Buffalo School of Social Work. "Our Self-Care Starter Kit." http://socialwork.buffalo.edu/resources/self-care-starter-kit.html</p> <p>Lander, Jessica. "Secondary Traumatic Stress for Educators: Understanding and Mitigating the Effects." <i>KQED News</i>. 7 Oct. 2018.</p> <p>Houston, Stan. "Enabling Others in Social Work Practice: Reflexivity and the Theory of Social Domains." <i>Critical and Radical Social Work</i>, vol. 3, no. 2, 2015, pp. 245-260.</p>
Evaluation and Feedback	<p>American Institutes for Research self assessment tool: http://csmh.umaryland.edu/media/SOM/Microsites/CSMH/docs/Conferences/AnnualConference/22nd-Annual-Conference/Presentations/10-15-TC/CS-4.1-Trauma.pdf</p> <p>The Trauma Informed Care Project's self-assessment tool: http://www.traumainformedcareproject.org/resources/Trauma-Informed Organizational Survey_9_13.pdf</p>
40	

	<p>Fallot, Roger D. and Maxine Harris. "Creating Cultures of Trauma-Informed Care (CCTIC): A Self-Assessment and Planning Protocol." <i>The Anna Institute</i>, 2009. https://www.theannainstitute.org/CCTICSELFASSPP.pdf</p> <p>Kenny, Maureen C., Alejandro Vazquez, Haiying Long, and Dawn Thompson. "Implementation and program evaluation of trauma-informed care training across state child advocacy centers: An exploratory study." <i>Children and Youth Services Review</i>, vol. 73, 2017, pp. 15-23.</p> <p>An example of one attempt at training in trauma-informed care. Provides advice on best practices for such training and follow up.</p> <p>Takayoshi, Pamela, et al. "The construction of research problems and methods." <i>Practicing research in writing studies: Reflexive and ethically responsible research</i>, edited by Katrina M. Powell and Pamela Takayoshi, Hampton Press, 2012, pp. 97-121.</p>
Safety in the Classroom	<p>Barrett, Betty J. "Is 'Safety' Dangerous? A Critical Examination of the Classroom as Safe Space." <i>The Canadian Journal for the Scholarship of Teaching and Learning</i>, vol. 1, no. 1, 2010, pp. 1-12.</p> <p>Carter, Angela M. "Teaching with Trauma: Disability Pedagogy, Feminism, and the Trigger Warnings Debate." <i>Disability Studies Quarterly</i>, vol. 35, no. 2, 2015.</p>
Teaching in Times of Crisis or Tragedy	<p>David, Barbara Gross. "Classroom Conduct and Decorum." <i>Tools for Teaching</i> (2nd Ed). Jossey-Bass, 2009.</p> <p>Borrowman, Shane, editor. <i>Trauma and the Teaching of Writing</i>. State U of New York P, 2005.</p>



GLOSSARY

Compassion Fatigue: Experiences of emotional exhaustion, burnout, decreased sense of personal accomplishment, and other stress reactions that can develop as a result of bearing witness to the pain of others. This can be particularly common in “caring” professions, such as counseling or teaching.

Cultural Responsiveness: A dynamic, ongoing process of developing practices that intentionally honor and respect the beliefs, languages, interpersonal styles, and behaviors of students and acknowledge the impacts of cultural on traumatic experiences (adapted from U.S. Department of Health and Human Services).

Disclosure: When an individual intentionally shares information about a past or present traumatic experience. When this happens accidentally, the individual has *revealed*, not disclosed, trauma.

Distress: A state of acute stress, anxiety, depression, or other suffering that may or may not be traumatic or connected to an experience of trauma.

Resilience: In the context of trauma, the ability to rise above adversity, integrate the trauma experience into the individual’s life story, and live a happy, healthy, fulfilling life.

Re-traumatization: An individual re-experiences a prior traumatic event because of characteristics of a current interaction, environment, activity, etc.

Trauma: An event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally life threatening and can have lasting impacts on mental, physical, emotional, social, and spiritual wellbeing.

Trauma-Informed: An approach to services of all kinds that acknowledge the prevalence and experiences of trauma-survivors and employs ethical principles and practices designed to minimize the possibility of re-traumatization and promote resilience.

Trauma-Informed Care: A framework used primarily in social work settings to engage in a trauma-informed manner with clients seeking social services (e.g. counseling). Key steps elements include attention to safe, collaborative, and compassionate practices and to building on the strengths and resilience of clients in the contexts of their communities (SAMHSA 3).

Trauma-Informed Teaching: Adapts trauma-informed principles/practices to the context of teaching by maintaining education as the primary goal and emotional safety and a necessary condition .

Trigger warning: A verbal or written notice that warns the audience of a text, video, speech, etc. that it contains material that may be re-traumatizing, triggering, or otherwise emotionally harmful.

Triggering: Sensory reminders of prior traumatic events that can cause an individual intense flashbacks in which they experience the prior trauma as if it were actually happening in the present.

Secondary Trauma: Trauma-related stress reactions and symptoms caused by exposure to another individual’s traumatic experiences.

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CURRICULUM VITAE

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EDUCATION

University of Louisville

PhD in Rhetoric and Composition (May 2019)

Dissertation: “Wounds and Writing: Building Trauma-Informed Approaches to Writing Pedagogy”

University of Louisville

MA in English (2014)

Culminating Project: “Helping or hurting?: Trauma-Informed Practice in Literacy-Mediated Service Learning”

Western Kentucky University

BA in News/Editorial Journalism, Minors in English and iMedia (2011)

Summa Cum Laude & Honors College Graduate

Thesis: “Written in Stone”

ADMINISTRATION & TEACHING

Doctoral Fellow, Cooperative Consortium for Transdisciplinary Social Justice Research

(July 2017 - present)

Main responsibilities include: mentoring students; developing and promoting professional development events; assisting with budget record keeping and reporting; matching students and faculty for social justice research projects; developing documents for Annual Report submitted to continue receiving funding; co-facilitating annual Social Justice Symposium; creating and distributing documents that support social justice research community; and updating contracts and other documentation.

Assistant Director of Composition, University of Louisville

(August 2016 - April 2018)

Served as administrator in UofL’s Composition Program that offers nearly 200 sections of writing courses a year. Assisted in scheduling classes, mentoring new teachers, facilitating orientation for new and returning instructors, addressing grievances, facilitating the annual Celebration of Student Writing event, revising department policies, assessing portfolio submitted for placement credit, writing content for a departmental online textbook, and other projects as requested by program director.

Composition Instructor, University of Louisville

(August 2013 - March 2018)

Taught composition courses as both a graduate teaching assistant and part-time lecturer. Courses taught include:

- Introduction to College Writing
- Intermediate College Writing
- Business Writing
- Science & Technical Writing

Received Part-Time Lecture of the Year Award in Fall 2015.

University Writing Center, University of Louisville

(August 2012 - July 2013)

Tutored all levels of students and faculty on a variety of writing assignments as a GTA. Was among three consultants asked to return as a consultant during the summer.

RESEARCH

Community-Engaged Research

Community Writing Outreach

(January 2017 - April 2017)

Participate as a writing tutor at the Western Branch of the Louisville Free Public Library and the Family Scholar House as part of a University Writing Center initiative, through a graduate seminar on Community Literacy. Project received our university's College of Arts & Sciences Community Service award for 2017-2018.

“Minds in Motion,” Hawthorne Elementary School

(January 2017 – December 2017)

Co-organizer, teacher, and researcher for a project through UofL's Exercise Physiology department which provides specific exercise programs designed to aid the physical, academic, and social development of children at a local bilingual elementary school. Also participate at the writing coach for other participants writing up research results.

“Nothing About Me Without Me” art workshops, Council on Development Disabilities

(July 2016 – May 2017)

Help organize, teach, and document/archive a year-long arts-advocacy workshop series for artists with a wide variety of developmental and intellectual disabilities. Produced multiple artifacts for the community partners' marketing purposes, such as the artist profile available at this link: <https://goo.gl/178TpG>.

Digital Media Academy

(January - June 2015 & January - June 2016)

Co-organizer and teacher at an annual digital media camp for rising sixth-grade girls from low-performing schools in Louisville's West End. Worked as director of Research/Assessment, Pedagogy, and Publicity teams. Project funded by grants from CCCC, Thomas R. Watson Foundation, and the Verizon Foundation.

Publications

“Strategies for Implementing Safe and Effective Yoga Programs.” With Abigail Day, Daniela Terson de Paleville, and Kristi M. King. *American College of Sports Medicine Health and Fitness Journal*, vol. 22, no. 6, 2018, pp. 59-63.

“On Trauma and Safety: Toward Trauma-Informed Research Methods.” *Making Future Matters*. Computers and Composition Digital Press, 2018.

“On Multimodality: A Manifesto.” With Dànielle Nicole DeVoss, Rick Wysocki, Jon Udelson, Caitlin E. Ray, Jessica S. B. Newman, Laura Sceniak Matravers, Ashanka Kumari, Layne M. P. Gordon, Khirsten L. Echols, Michael Baumann, and Sara P. Alvarez. *Multimodality: Theories, Pedagogies, Practices*, 2019.

“On Multimodal Composing.” With Dànielle DeVoss, Sara Alvarez, Michael Baumann, Khirsten Echols, Layne M.P. Gordon, Ashanka Kumari, Laura Matravers, Jessica Newman, Amy McCleese Nichols, Caitlin E. Ray, Jon Udelson, and Rick Wysocki. *Kairos*, 2017.
<http://kairos.technorhetoric.net/21.2/praxis/devoss-et-al/index.html>)

“Louisville Conference, the International Virginia Woolf Society Panel.” *International Virginia Woolf Society Newsletter*, Spring 2013,

“Kentucky Program Aims to Educate Future U.S. Nurses About Growing Hispanic Culture.” *KBN Connection Newsletter*, Fall 2011, 26-27.

Conference/Scholarly Presentations

“Access and Active Learning in Trauma-Informed Writing Pedagogy”
2019, Fourteenth Annual Conference on the Teaching of Writing (Hartford, Conn.)

Invited Talk: “Trauma-Informed Community Engagement”
2019, *Center for Hartford Engagement and Research, Trinity College*

“Materializing an Invisible Fire: Trauma, ACEs (Adverse Childhood Experiences) and the Exigence of First-Year Composition”
2018 *Thomas R. Watson Conference*

“Trauma-Informed Culturally Sustaining Pedagogy: Working with Rising Sixth Grade Black and Latina Girls and their Communities of Struggle”
2017 *Conference on Community Writing*

“‘This is how I cry’: Trauma-informed care in literacy-mediated community engagement”
2016 *Thomas R. Watson Conference*

“How Do We Create Change?: Interdisciplinary Perspectives on Social Action”
2016 *Rhetoric Society of America*

“Helping or hurting: Trauma-informed practice in literacy-mediated service-learning”
2016 *Conference on College Composition and Communication*

“Helping or hurting: Trauma-informed practice in literacy-mediated service-learning”
2015 *Conference on Community Writing*

“Helping or hurting: Trauma-informed practice in literacy-mediated service-learning”
2014 *Thomas R. Watson Conference*

“Text and Context: Coaching Transfer in the Writing Center”
2013 *Kentucky Philological Association Conference*

SERVICE

Committees and Organizations

UofL Community Engagement Steering Committee

(Fall 2015-Spring 2017)

Appointed by Graduate Student Council to this committee tasked with creating better institutional structures that foster, implement and evaluate community engagement projects, per UofL's 21st Century strategic plan.

Graduate Student Council (Fall 2015-Spring 2017)

Serve as a representative for the English Department and on the Advocacy & Involvement committee. Co-organized a regional Graduate Research Conference at UofL and seeking feedback from constituents on current needs. Co-developed a graduate student running club based on constituent feedback, in order to promote graduate student fitness, mental health, and sense of community.

Selected Workshops / Panels

Workshop presenter, "Presenting Professionally," UofL Cooperative Consortium for Transdisciplinary Social Justice Research

(September 2018)

Organized and led a workshop for undergraduate and graduate students on how to develop academic presentations—especially posters—on social justice research

Workshop presenter, "Communicating Your Social Justice Research on a CV or Resume," UofL Cooperative Consortium for Transdisciplinary Social Justice Research

(March 2018)

Co-facilitated a workshop for students on developing resumes and CVs based on their work as part of transdisciplinary research teams doing engaged, social justice research.

Workshop presenter, "Trauma-Informed Research Methods," UofL Cooperative Consortium for Transdisciplinary Social Justice Research

(February 2018)

Discussed dissertation work and building trauma-informed research methods—especially for interviewing—as well as my developing theories about apply trauma-informed methods to the classroom.

Panel presenter, "Insights and Innovations: Graduate Teaching Assistants as 21st Instructors," Celebration of Teaching and Learning

(Spring 2018)

Discussed teaching experiences as a GTA with other GTAs from different disciplines, to offer insights to administrators in charge of pedagogy development in their departments.

Workshop presenter, "Student Trauma in the Classroom," UofL Department of English

(March 2017)

Discussed issues and resources regarding student trauma and how it manifests in the classroom.

Workshop presenter, "Be Searchable," UofL School of Interdisciplinary and Graduate Studies

(January 2017)

PLAN Workshop for graduate students that discussed developing an online presence for job searches and professional networking.

Panel presenter, "Community Engagement Academy," UofL School of Interdisciplinary and Graduate Studies

(January 2017)

Spoke with community partners (the Council on Developmental Disabilities) about developing and sustaining partnerships.

Workshop presenter, “Students in Distress,” UofL Department of English

(August 2016)

Discussed issues and resources regarding students’ experience of material or emotional difficulties, such as PTSD.

Workshop co-presenter, “Document Design: CV, Syllabi, Assignments,” UofL Department of English

(April 2016)

Provided strategies for English department instructors about rhetorically design common in-class documents for a variety of purposes, including student comprehension.

Workshop co-presenter, “Connecting Students with Communities,” UofL Department of English

(Fall 2015)

Provided information about community-themed Intermediate College Writing class I taught, including information about developing partnerships and structuring student assignments.

Mentoring and Volunteering

PhD Peer Mentor, UofL Department of English

(Fall 2016 – present)

Assist new students in navigating the Rhetoric and Composition PhD program, adjusting to graduate studies, and, often, transitioning into a new city.

Peer mentoring co-coordinator

(Fall 2013-Spring 2014)

Helped set up and manage the first MA peer-mentoring program at UofL. Worked on administrative tasks and evaluating the strengths/weaknesses of the first attempt for future coordinators to build on.

Technology Mentor, Council on Developmental Disabilities (Louisville, KY)

(April & May 2017)

Worked one-on-one with a digital media artist who has a developmental disability, to help her improve her digital storytelling skills.

Hospital Advocate/Writing Group Facilitator, Center for Women and Families

(Summer 2013-Present)

Respond to emergency room calls for sexual assault survivors to provide them with resources and other assistance. From Summer 2013-Fall 2013, co-facilitated a writing/reading group at the Center, which is a local shelter for survivors of intimate partner violence and sexual assault. Developed handbook for future versions of the group.

HONORS/AWARDS

Maddox Prize Essays Winner, for “Matters of (Non)Consent: The Ecological and Linguistic Construction of Sexual Assault” (2015, \$300)

2015 Part-time Lecturer of the Year Award (\$500)

Carroll Knicely Journalism Scholarship (2010-2011)

Scripps Howard Foundation journalism grant (2010, \$10,000)

Thomas Curran Journalism Scholarship (2008-2009 and 2009-2010)