



Walden University
ScholarWorks

Walden Dissertations and Doctoral Studies

Walden Dissertations and Doctoral Studies
Collection

2020

Teachers' Experiences Addressing Students' Trauma-Related Behavior in the Classroom

Amanda Lynn Henry
Walden University

Follow this and additional works at: <https://scholarworks.waldenu.edu/dissertations>



Part of the [Education Commons](#)

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact ScholarWorks@waldenu.edu.

Walden University

College of Social and Behavioral Sciences

This is to certify that the doctoral dissertation by

Amanda Lynn Henry

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee

Dr. Garth den Heyer, Committee Chairperson,
Human and Social Services Faculty

Dr. Kelly Chermack, Committee Member,
Human and Social Services Faculty

Dr. Jeffrey Harlow, University Reviewer,
Human and Social Services Faculty

Chief Academic Officer and Provost
Sue Subocz, Ph.D.

Walden University
2020

Abstract

Teachers' Experiences Addressing Students' Trauma-Related Behavior in the Classroom

by

Amanda Lynn Henry

MA, West Virginia University, 2015

BS, Geneva University, 2012

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Human Services

Walden University

August 2020

Abstract

Trauma is not something the untrained eye can see; it can be described as a silent issue, but the effects of trauma are seen in society. Research about trauma has focused on the perspective of the student and not the interaction between the teacher and the student. The purpose of this basic qualitative study was to explore classroom teachers' perceptions and experiences with addressing students' trauma-related behavior. The theoretical foundation was trauma theory. Data were collected through questionnaires and in-person interviews with teachers and administrators who work in Southwest Pennsylvania. There were a total of 13 participants. Descriptive coding was used to identify themes. During the descriptive coding process, a descriptive word was given to a thought or observation so that similar ideas and concepts could later be combined. Multiple rounds of coding were conducted. Once codes were applied to the transcripts, categories were determined. The codes that emerged determined the categories. If needed, subcategories were applied. Once the categories were identified, themes were identified that represented the larger ideas behind the codes and categories. Results indicated that all teachers encountered trauma, external behaviors were more likely to be noticed, teachers needed to structure their day based on the possibility of triggering a student, and there was no consistent response to trauma. Findings may be used to help students perform better in school, which will benefit students, parents, teachers, administrators, and society.

Teachers' Experiences Addressing Students' Trauma-Related Behavior in the Classroom

by

Amanda Lynn Henry

MA, West Virginia University, 2015

BS, Geneva University, 2012

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Human Services

Walden University

August 2020

Dedication

This dissertation is dedicated to every student who takes the road less traveled.

Table of Contents

List of Tables.....	iv
Chapter 1: Introduction to the Study	1
Background	2
Problem Statement.....	4
Purpose of the Study	6
Research Question	6
Conceptual Framework.....	6
Nature of the Study.....	8
Definitions.....	10
Assumptions	11
Scope and Delimitations	11
Limitations	13
Significance.....	14
Summary	14
Chapter 2: Literature Review	16
Conceptual Framework.....	17
TIC Literature Review	22
Teacher Training.....	23
School-Wide Approach.....	25
Student-Teacher Relationship.....	27
Perspectives of TIC.....	29

Methodology	31
Summary and Conclusions.....	32
Chapter 3: Research Method.....	34
Research Question	34
Research Design and Rationale	34
Role of the Researcher	35
Methodology	37
Issues of Trustworthiness.....	39
Potential Conflicts and Biases	41
Ethical Considerations	41
Treatment of Data	43
Summary	44
Chapter 4: Results.....	45
Data Collection	45
Results.....	46
All Teachers Encounter Trauma	46
External Behaviors Are More Likely to Be Noticed	47
Structure Day Based on the Possibility of Triggering a Student.....	48
Not a Consistent Response to Trauma	48
Interview Analysis	49
Evidence of Trustworthiness	53
Credibility.....	53

Transferability.....	54
Dependability and Confirmability	55
Interpretation of the Results	55
Summary	58
Chapter 5: Discussion, Conclusions, and Recommendations	60
Interpretation of Findings.....	61
Limitations of the Study.....	65
Recommendations.....	66
Implications	67
Conclusion.....	68
Summary	69
References.....	70
Appendix A: Teacher Perceptions of Student Behavior Scale.....	85
Appendix B: Teaching Traumatized Students Scale	87
Appendix C: Teacher Responses to Student Behavior Scale.....	89
Appendix D: Trauma Questionnaire.....	92

List of Tables

Table 1. Interventions Used in the Classroom.....49

Chapter 1: Introduction to the Study

Childhood trauma, whether it be physical, sexual, or emotional abuse, is experienced by two thirds of U.S. children under the age of 18 (Plumb, Kelly, Bush, & Kersevich, 2016). In 2012, U.S. state and local Child Protective Services estimated that 686,000 children experienced abuse (as cited in Centers for Disease Control and Prevention [CDC], 2014). Of that 686,000, 78% of the abuse was from neglect, 18% was physical, 9% was sexual, and 11% was various types of emotional abuse. These forms of abuse often lead to difficulties in learning and cognitive deficits, which also need to be considered when assessing a child's ability to learn (Lansing, Plante, Golshan, Fennema-Notestine, & Thuret, 2017). Such trauma also manifests in the classroom by negatively affecting students' behavior and the ability to pay attention, and influences whether they can retain the subject matter (Mendelson, O'Brennan, Leaf, Ialongo, & Tandon, 2015). According to Iachini, Petiwala, and DeHart (2016), children who have experienced trauma are more likely to drop out of high school, which often leads to unemployment, becoming part of the criminal justice system, and health consequences.

The dropout rate is particularly relevant because, in the United States, 90% of students attend some type of public education institution (Plumb et al., 2016). Students who require mental health services during school hours are provided with this service by the school or outside agencies. Because many Americans have experienced trauma early in their lives and attend a public education institution, this environment is a logical format for trauma intervention (Cavanaugh, 2016). Iachini et al. (2016) noted that

addressing the specific trauma early in a person's life is helpful, and one approach could be by school counselors who are prepared to provide this type of intervention.

Background

School psychologists work with classroom teachers in a cooperative fashion to help students who have experienced trauma acclimate to the classroom. School psychologists often give teachers feedback on a student's mental health (Alisic, 2012). To assist the psychologist, teachers must understand different perspectives of trauma (Alisic). It is important to researchers to understand teacher perspectives and relationships with students who have suffered from trauma (Plumb et al., 2016). Alisic (2012) found that although some teachers felt comfortable with their skills and that their school provided a supportive environment, most felt they could be trained better to provide trauma interventions. Alisic also identified that teachers were confused as to when their role as a teacher stopped and when the role of a mental health worker started.

The teacher-student relationship is necessary for learning, and even more important for students who have experienced trauma. Teachers who are properly trained understand that misbehavior in the classroom has multiple reasons, and one of those is that the student has had some type of emotional, sexual, or physical trauma in their lives (Cavanaugh, 2016). Schools can begin the healing process by providing safety and stability. When a student feels safe, the positive relationship building can take place (Cavanaugh, 2016). A student will not be able to build a relationship with a teacher if they feel they are in danger of being retraumatized (Cavanaugh, 2016). Schools that deliver a whole-school trauma intervention approach are more effective than individual

pullout interventions (Mendelson et al., 2015). Mendelson et al. (2015) implemented a 12-week intervention with a group of students, and teachers reported an improvement in students' behavior and academics.

Understanding trauma behaviors from teachers' perspectives would help not only students, teachers, and administrators, but everyone involved in assisting the student in graduating from high school. Lelli (2014) explained that, by understanding trauma, teachers can implement practices that reduce interference with the student's education. Ehrenhalt (2016) noted that the understanding of trauma has begun to shift from traditional discipline methods to that of restorative justice. Instead of ending the misbehavior at the traditional form of disciplines such as detention, in-school suspension, or out-of-school suspension, the student is given the ability to process what they did wrong (Ehrenhalt, 2016). Implementing the social change of a restorative circle could provide students with the opportunity to discuss the incident and understand why their behavior was not appropriate (Ehrenhalt, 2016).

Previous studies have focused on how trauma interconnects with school but have not addressed the teacher's perspective. There is a lack of research and training to support teachers' ability to address trauma in the classroom (Alvarez, 2017). There is also a lack of research on the school-wide approach despite the considerable data indicating the effect of trauma on a student's education (Tishelman, Haney, O'Brien, & Blaustein, 2010). Teachers are required to provide an education to a wide array of students including those who have experienced trauma, attention-deficit hyperactivity disorder, bullying, truancy, oppositional defiance disorder, aggressive behaviors, and poor

regulation skills (Brunzell, Stokes, & Waters, 2016). Teachers need the most specific and up-to-date information available to be effective.

However, there is a gap in the research involving trauma and perspectives (Alvarez, 2017). The current study filled a research gap by focusing on how teachers address trauma misbehavior in their classroom. The areas I assessed to understand teacher perceptions were challenging behavior, beliefs about challenging behavior, confidence in the ability to address challenging behavior, effects of challenging behavior, and strategies for addressing challenging behaviors.

Problem Statement

Most school-related trauma interventions focus on the individual, not the interaction between the student and teacher (McConnico, Boynton-Jarrett, Bailey, & Nandi, 2016). The importance of the teacher's role is in assisting the student to build resilience, which is often overlooked (Wolmer et al., 2016). There needs to be a focus on the relationship between teacher and student because a strong relationship is needed to build resilience (Masten & Coatsworth, as cited in Dray et al., 2017). Resilience is an important protective factor because it assists the mind-body in responding to the perceived threat or harm (Leitch, 2017). Often the children who experience maltreatment do not have a strong relationship with a parent because the perpetrators are 80.3% parents, 6.1% relatives other than the parent, and 4.2% the paramour of the parent (CDC, 2014). Resilience-building interventions are important for children to develop coping skills in the learning environment (Dray et al., 2017).

Daily resilience-based programs have been shown to be effective in addressing trauma (Dray et al., 2017), but the problem is education establishments often lack a trauma-informed approach to those experiencing trauma symptoms, and do not offer trauma intervention training to teachers (Anderson, Blitz, & Saastamoinen, 2015). Teachers need to be aware of students' internal and external symptoms of trauma (Lansing et al., 2017). Internal symptoms include a student being withdrawn, depressed, or showing signs of anxiety, and external symptoms are being disruptive, aggressive, and attention seeking (Lansing et al., 2017). Resilience building is targeted toward both types of symptoms (Dray et al., 2017).

Behavior problems in the classroom prohibit teachers from conveying the course content (Crosby, Day, Baroni, & Somers, 2015). The misbehavior of the student should not be the only action gaining attention (Goodman & West-Olatunji, 2010). Incorporating more entities such as family members, school staff members, or community resources has been shown to be effective in reducing misbehavior in the classroom (Kline, 2016). Incorporating a whole-school trauma-informed approach prevents the trauma-afflicted youth from feeling singled out (Dray et al., 2017).

Although research regarding trauma illustrated important findings pertaining to students who have experienced trauma, I found no studies on teachers' perceptions of students who have experienced trauma, the relationship of trauma and a student's behavior in the classroom, or the application of trauma intervention methods to assist students in the school environment. Further research was needed to examine teachers'

perceptions of their comfort levels in addressing trauma-related misbehavior in the classroom (see Goodman & West-Olatunji, 2010).

Purpose of the Study

The purpose of this basic qualitative study was to explore classroom teachers' perceptions and experiences with addressing trauma-related behavior and interventions in the classroom among students who have experienced trauma in Southwest Pennsylvania. Data were collected through questionnaires and optional follow-up in-person individual interviews with teachers and administrators pertaining to their perceptions, teaching styles, and responses to students. Participants were invited to participate in the questionnaire via email. Baum et al. (2013) explained that building on the knowledge that teachers already have is vital in creating interventions that are sustainable. Understanding the need for trauma training requires examination of intervention techniques being used in the classroom, how they are used, and their effectiveness in assisting the child.

Research Question

What are the perceptions and experiences of teachers in addressing trauma-related behavior and interventions in the classroom among students who have experienced trauma in rural school districts in Pennsylvania?

Conceptual Framework

Trauma theory was introduced by Herman (1992) and focused on hyperarousal, intrusion, and constriction (Zaleski, Johnson, & Klein, 2016). Chapter 2 contains a detailed explanation of Herman's trauma theory. An inclusive definition of trauma as it pertains to trauma theory is that there is an identified event that can be acute or chronic,

the event is physically or emotionally damaging to the individual, and there is a lasting effect that interferes with an individual's quality of life (Revital, 2017). Trauma theory focuses on the world a person has built around themselves based on terror (Meyers, 2016). Trauma theory can be viewed as the lens to see an individual's fractured interpersonal relationships (Meyers, 2016). This theory aligned with my research question to examine whether teachers have been professionally trained in trauma and the importance of the interpersonal relationship with their students.

The conceptual basis for this study was trauma-informed care (TIC). The most used TIC model was created by Harris and Fallot in 2001 (as cited in Hales, Nochajski, & Kusmaul, 2017). The model consists of safety, trustworthiness, choice, collaboration, and empowerment. Dray et al. (2017) explained that a crucial concept of TIC is implementing resilience building in the classroom. A factor of building resilience that was identified by Masten and Coatsworth (as cited in Dray et al., 2017) is a child having a strong relationship with a parent. If that relationship is not available, then having a bond with another adult is necessary to form a healthy attachment. Second, good cognitive ability plays a role in positive academic behavior. Finally, self-regulation skills are needed to balance the trauma effects (Plumb et al., 2016).

These findings were validated when The Complex Trauma Task Force of the National Child Traumatic Stress Network (as cited in Plumb et al., 2016) published similar findings and created the attachment, self-regulation, and competency intervention (ARC). Hodgdon, Kinniburgh, Gabowitz, Blaustein, and Spinazzola (2013) explained the concepts of ARC as attachment relating to the caregiving system. The attachment

segment does not apply only to the child but also to the adults in their lives (Hodgdon et al., 2013). The R in ARC represents self-regulation. A child demonstrates self-regulation when they can cope with external and internal stressors (Hodgdon et al., 2013). Finally, competency is exhibited when a child can navigate through expected developmental milestones (Hodgdon et al., 2013). Plumb et al. (2016) explained that the ARC intervention aims to build secure attachments, improve self-regulation strategies, and grow competencies in multiple areas of life for children of all ages. The ARC framework aligns with trauma theory as it builds on the identified area of trauma (Hodgdon et al., 2013). This framework aligned with my research question addressing teachers' perceptions and use of the ARC framework.

Nature of the Study

In this qualitative study, I used questionnaires with an optional follow-up individual interview to collect data about teachers' perceptions of trauma-based child misbehavior. The goal was to have 20 to 40 questionnaires returned. According to Hagaman and Wutich (2017), 20 to 40 questionnaires is enough to reach data saturation and identify themes. Teachers and administrators participated in questionnaire completion. Qualitative questionnaires were selected because of the aim to explore perceptions. Seixas, Smith, and Mitton (2017) explained that questionnaires not only give more information pertaining to a phenomenon but also provide useful information regarding how to progress on current practices. Participants were recruited using an invitation via email. The questionnaire's purpose was to address participants' lived experiences of trauma in the classroom. The reason for this basic qualitative study design

was to understand teachers' perceptions of a specific concept that takes place in the classroom. A similar study was completed by Keesler (2016) who explored staff perceptions regarding the incorporation of trauma at a program with intellectually/physically disabled clients. Keesler created probing interview questions to explore the participants' personal opinions and compare other work environments.

The questionnaire questions in the current study were constructed from instruments such as the Teacher Perceptions of Student Behavior, Teacher Awareness of Trauma, and Teacher Responses to Student Behavior, which Crosby et al. (2015) created to use as complimentary tools to evaluate trauma in an educational setting. The questions from these instruments were modified to create open-ended questions. The purpose of using these instruments was to retain focus during the questionnaire creation. Questionnaires were emailed to potential participants. I then examined responses to identify themes by using coding.

The participants were recruited in Southwest Pennsylvania using a nonprobability, convenience sampling method. Çapulcuoğlu and Gündüz (2017) conducted a study using school administrators and counselors to understand their perceptions pertaining to additional supports needed in the school. The individuals recruited for the current study were teachers and administrators located in Southwest Pennsylvania invited via email by the partnering school's administration. A total of 20 to 40 participants was needed to reach data saturation (see Hagaman & Wutich, 2017).

Definitions

Administration: Principal, assistant principal, dean, education administrator, provost, assistant superintendent, and superintendent (West, Day, Somers, & Baroni, 2014).

Constriction: Pulling away from others and not being able to form relationships (Zaleski et al., 2016).

Hyperarousal: A person always feeling as though they are in state fight or flight (Zaleski et al., 2016).

Intrusion: Reliving the event even though the person may not realize that is what is happening (Zaleski et al., 2016).

Mental health worker: Any professional who plays a role in the care of an individual with mental health concerns (Damian, Gallo, & Mendelson, 2018).

Resilience-based programs: Sessions in which the promotion of social and emotional learning is included (Coleman, 2015).

Restorative justice: Empowers students to be active participants in conflict resolution (Ehrenhalt, 2016).

Trauma: An identified event that can be acute or chronic; the event is physically or emotionally damaging to the individual, and there is a lasting effect that interferes with an individual's quality of life (Plumb et al., 2016).

Trauma-informed care (TIC): Situation in which individuals in an organization are trained to understand the importance of a connection, providing protection, respect, and reinforcing skill-building (Plumb et al., 2016).

Trauma intervention: The implementation of a practice that promotes a safe environment, the processing of unresolved memories pertaining to the trauma, and making connections with others (Plumb et al., 2016).

Assumptions

In this study, I made several assumptions. One assumption was that there would be enough interest in the topic so that teachers and administrators would participate. The goal was to have 20 to 40 completed questionnaires with teachers and administrators responding. Questionnaire respondents were recruited from Southwest Pennsylvania, which has six separate school districts. School district participants depended on level of interest and approval from administration.

A second assumption was that participants would answer questions openly and honestly. Participants may have had life experiences, values, and beliefs that altered their responses. Depending on their understanding in the classroom, they may have responded in ways they felt would alter the study in one direction or another. For example, if a participant had a trauma in their life, they may have been more sympathetic to students who encountered a trauma in their life. However, if a participant could not empathize with students, the participant might not have understood why a person would want to place emphasis on this area when teachers have other responsibilities.

Scope and Delimitations

The focus of this study was understanding trauma from the teacher's point of view. Lee, Anderson, and Klimes-Dougan (2016) noted that traumatic events have a correlation to a student's academic performance by affecting their daily routines and

cognitive function. Buxton (2018) also discussed the correlation between trauma and special education. Buxton mentioned understanding trauma as part of an emotional disturbance of a student's individual education plan. Barr (2018) observed that a student who has experienced trauma lacks executive functioning. These articles focused on the student and not what the teachers are experiencing. Because teachers play an important role in students' academic and socioemotional learning, teachers' thoughts and beliefs should be addressed in understanding trauma.

The purpose was to understand whether teachers are currently implementing trauma interventions or are obtaining training pertaining to trauma. It is not enough to identify that trauma affects a student in an educational setting; it is also necessary to understand how teachers are addressing these findings (Barr, 2018). It has been established that students have misbehavior caused by trauma (Mendelson et al., 2015), but I wanted to understand how teachers were addressing those individuals in real-world practice.

This study's findings may be transferrable to other geographic regions to compare how teachers perceive trauma in the classroom. Transferability in qualitative research is important for studies to be replicated in other areas and with different participants, which is achieved through specific explanation (Anney, 2014). The geographic region used in my study was a rural area with limited resources. Understanding trauma from the teacher's perspective in different types of schools is important to determine whether the culture or policies change the responses.

Limitations

The results of this study had several limitations. One limitation was using questionnaires with optional individual follow-up interviews in an area that has been minimally researched. Because it has been established that teachers lack training in trauma (Alvarez, 2017), it was necessary to collect data to begin an understanding of their perspective. There was minimal research to compare the findings to, but the results may be beneficial in advocating for future research.

A second limitation was a lack of diversity in participants. Because the geographic area was rural, most participants were of the same ethnicity and race. It would be useful for future research to be conducted in an area with a more diverse population to obtain a broader sample of views. Different views may yield different responses.

Researcher bias may also have been a limitation of this study. Researcher bias occurs when the researcher allows their own thoughts and beliefs to skew the results (Anney, 2014). I work for an organization that is trained in being trauma informed. The organization has a monthly training pertaining to the ARC framework and incorporates TIC interventions into daily routines. These experiences had the potential to cause bias because I advocate for students daily. I did not want to be defensive when asking teachers and administrators to share their perspectives. This limitation was mitigated by acknowledging my daily role and affirming that I wanted to understand the participants' experiences and perceptions.

Significance

Trauma is a quiet, social problem that can persist into adulthood and influence physical health, mental health, employment, and goals. Trauma will persist unless there is intervention, and schools are the ideal environments (Plumb et al., 2016). It is the school's responsibility to advocate for these individuals because their experiences can impact relationships, reasoning skills, behaviors, and academic functioning (Crosby, 2015). Students who have experienced trauma without interventions are more likely to have issues in school, such as low academic achievement, learning delays, suspension or expulsion, being entered in special education, being held back a grade, and dropping out of school (Brunzell et al., 2016).

Trauma influences not only academics but other aspects of the individual's life. Trauma has been correlated with substance abuse, mental illness, and poor physical conditions (West et al., 2014). Childhood trauma exposure may lead to delinquency, recurrent adolescent criminal justice involvement, and adult legal issues (West et al., 2014). Schwerdtfeger Gallus, Shreffler, Merten, and Cox (2015) indicated that trauma is more prevalent in causing depression than post-traumatic stress disorder, which has the potential to lead to suicide.

Summary

TIC is not a quick fix, or a concept covered a few times at trainings; it is a cultural shift that is incorporated into daily activities (Morton & Berardi, 2017). The cultural shift provided by TIC is needed because it gives professionals the skills and the language to work with children, families, and other professionals (Krause, Green, Koury,

& Hales, 2018). The objective of safety is achieved because TIC reaches beyond the need for mental health services and addresses a school's policies, practices, and security (Branson, Baetz, Horwitz, & Hoagwood, 2017). Every aspect of TIC builds on the others and incorporates individuals at every level (Morton & Berardi, 2017).

In 2012, U.S. state and local Child Protective Services estimated that 686,000 children experience abuse (as cited in CDC, 2014). Data indicated that 78% of the abuse was from neglect, 18% was physical, 9% was sexual, and 11% was emotional (CDC, 2014). These forms of abuse often lead to difficulties in learning and cognitive deficits, which also need to be considered when assessing a child's ability to learn (Lansing et al., 2017). Such trauma also manifests in the classroom by negatively affecting students' behavior, ability to pay attention, and ability to retain the subject matter (Mendelson et al., 2015). According to Iachini et al. (2016), children who have experienced trauma are more likely to drop out of high school, which often leads to unemployment, becoming part of the criminal justice system, and health consequences.

TIC addresses the issue of trauma and the subsequent possible misbehavior in schools. Because many children are affected by this phenomenon, schools should consider implementing policies that ensure safety and security for their students. Prior studies lacked a focus on teachers' experiences and perceptions of trauma-related behavior.

Chapter 2: Literature Review

In this chapter, I explore the research on TIC and its implementation in schools. The focus of the study was teachers' views and perceptions of trauma in the classroom. This literature review includes an overview of the impact of trauma, teacher and student interaction, and the research and implementation of TIC. A large portion of the existing research has focused on how trauma affects a student in the classroom and not on how a teacher can be a positive or negative influence on how that student copes with the trauma.

Being professionally trained in the awareness of internal and external behaviors is helpful for teachers to identify how to react to what they are experiencing in their classrooms. In addition, the implementation of TIC is more effective as a school-wide culture and not just on an individual basis (Cavanaugh, 2016). Creating a school culture that incorporates TIC is helpful to all students to make them feel safe and involved, which promotes school connectedness (Schwerdtfeger Gallus et al., 2015). Trauma can lead to the unsuccessful completion of high school, being involved in the criminal justice system, and health problems (West et al., 2014).

I began this literature review in March 2018 by conducting a search for pertinent literature in the Walden library databases such as EBSCO, Academic Search Complete, and PsycINFO. At the beginning of the pursuit of published research, the keywords that I used included were *trauma-informed school*, *trauma-informed classroom*, *teacher's perceptions of trauma*, *trauma interventions*, *restorative justice*, and *resilience*. Once the research was reviewed, relevant articles were included to enhance the understanding of the research topic. I determined that there was a gap in the research pertaining to the view

of trauma from teachers' perspectives. The articles selected were chosen because they enhanced the understanding of trauma and the need to incorporate the views and perspectives of teachers.

Conceptual Framework

The concept of TIC was created because of the development of trauma theory (Goodman, 2017). Trauma theory was introduced by Herman (1992) and focused on hyperarousal, intrusion, and constriction (Zaleski et al., 2016). Hyperarousal is defined as the person always feeling as though they are in state of fight or flight. They have strong emotions without being provoked, and these actions can be confusing to others. Intrusion is explained as reliving the event even though the person may not realize that is what is happening. Constriction involves pulling away from others and not being able to form relationships (Zaleski et al., 2016). Suleiman (2008) discussed that an event takes place and the brain is unable to process what is happening, so there is improper neurological processing. Herman stated that the person may not remember the trauma, referred to as dissociation, and the proper framework was needed to accompany treatment. An important aspect of trauma theory is that the improper self-regulation happens in the context of a relationship and it is best to heal it in a relationship (Zaleski et al., 2016).

Trauma theory includes phases. The first phase incorporates the safety and security to overcome the trauma an individual has experienced (Pfluger, 2013). Herman (1992) indicated that before any healing can take place a healing relationship needs to be in place. Balaev (2008) discussed that trauma theory acknowledges a disruption in the

person and their relationships. A person shows they are comfortable and safe by being able to self-regulate and concentrate (Zaleski et al., 2016).

The next phase in trauma theory is remembrance and mourning, which includes acknowledging the trauma (Pfluger, 2013). Zaleski et al. (2016) described this as taking the trauma memory and making it part of the individual's life story, not defining who they are in life. The third phase is reconnection, during which the person looks to the future and has trust in the relationships they have built (Zaleski et al., 2016).

The guiding principles for the current study were built on the ARC framework. The ARC framework consists of three core areas and nine building blocks (Hodgdon et al., 2013). The three core areas are attachment, self-regulation, and competency. The area of attachment contains the building blocks of caregiver management of affect, attunement, consistent response, and routines (Hodgdon et al., 2013). The attachment portion of ARC focuses on the caregiver's (parent, guardian, or teacher) responses to the trauma (Hodgdon et al., 2013). The next concept of regulation places emphasis on the child/student. The regulation building blocks are affect identification, modulation, and affect expression (Hodgdon et al., 2013). Thirdly, competency is the core concept of building new schools with the building blocks of promoting executive function and self-development (Hodgdon et al., 2013).

Attachment is addressed first because this is the area that is the foundation of the framework (Hodgdon et al., 2013). The block of caregiver management of affect focuses on the reaction to the trauma. It is important to be able to not take trauma behaviors personally, and to do so the caregiver needs to be able to recognize the trauma responses

(Hodgdon et al., 2013). The caregiver reflects on their feelings and can depersonalize their response (Arvidson et al., 2011). Attunement is the ability to recognize cues and to respond appropriately. A positive relationship is essential to be able to reply to the underlying behaviors. Psychoeducation is included to identify triggers so that the caregiver can recognize how their actions provoke trauma behavior (Arvidson et al., 2011).

Consistent response to the trauma behavior is the next building block. However, this cannot be achieved until the caregiver is able to achieve the previous two blocks. The caregiver's response to the trauma or their mood often depends on their reaction and children with trauma require consistency (Arvidson et al., 2011). The final block under attachment is routines and ritual. This block is crucial because it provides the safety that is needed for individuals who have had trauma in their lives. Often, transition periods are when triggers occur, and knowing what to expect reduces the misbehavior (Arvidson et al., 2011). Kinniburgh, Blaustein, Spinazzola, and Van der Kolk (2005) provided interventions such as predictable routines, addressing problems at the time they are happening, strength-based empathy skills, and self-monitoring.

Self-regulation is the core concept that focuses on the child because this is the area that a child who has experienced trauma often lacks. The first building block is affect identification in which the goal is for the child to be able to build their vocabulary. The child learns to identify the event that took place before the trigger and misbehavior. They can verbalize the connection because of an external event and their reaction (Arvidson et al., 2011). The next building block is modulation, in which the child can

increase their coping skills. Finally, affect expression is the child having an attachment to someone with whom they can discuss the trauma. The ability to discuss these feelings and emotions is an intervention to be able to move past it (Arvidson et al., 2011). During this stage activities such as exploring emotions, providing different formats for self-expression, using reflective listening skills, and practicing regulation are helpful (Kinniburgh et al., 2005).

The final core concept of competency is aimed toward moving the child past the trauma. Individuals who have experienced trauma have used all their energy in survival mode and have not acquired skills to grow in self-development (Arvidson et al., 2011). Once the previous two core areas have been addressed, the child can begin to learn and implement executive functioning skills. The last building block is self-development and identity. The goal is for the child to be able to tell their story, have a positive self-image, and have goals for themselves (Arvidson et al., 2011). Kinniburgh et al. (2005) provided intervention strategies such as identifying strengths and goals, social skill classes, encouraging independent thinking, and celebrating victories no matter how small. The overarching theme of ARC is trauma experience integration and is aimed to be used for individuals age 2 to 21 (Bartlett et al., 2018).

The ARC framework reduces trauma symptoms. The symptoms that improve include internal and external symptoms such as depression, anxiety, and anger (Hodgdon, Blaustein, Kinniburgh, Peterson, & Spinazzola, 2016). There is also a reduced amount of caregiver stress that improved the relationship between caregiver and child (Hodgdon, et

al., 2016). Hodgdon et al. (2016) discussed the importance of resiliency by both the caregiver and the child especially in the core concept of competency.

Educators must promote resiliency factors to prevent students from being expelled. The reasoning for this is because the educator knows better than anyone the actions that lead up to the expulsion (Coleman, 2015). Resiliency is the focus area when interacting with children who have endured trauma (Kelley, Pransky, & Sedgeman, 2014). Every individual has resilience but needs encouragement to act on this skill because they may not realize this innate skill (Kelley et al., 2014). The term *resiliency* means something different to everyone and it is important that a person examines what it means to them and how resiliency can assist them in moving forward (Southwick, Bonanno, Masten, Panter-Brick, & Yehuda, 2014).

Resilience is the difference between risk factors and protective factors. Risk factors include relationships and environmental factors that may have caused harm to the individual's life, such as not being able to function independently (Tichy, 2017). A caring relationship with an adult is a documented way of increasing resiliency in children (Coleman, 2015). When teachers have high expectations and hold students accountable for their actions, children can overcome the risk factors because of the protective factor of a positive relationship (Tichy, 2017). Protective factors include supportive relationships, high self-esteem, involved families, community involvement, and school connectedness (Coleman, 2015). School connectedness is an important protective factor, especially during early adolescence because this is the time in the individual's life when

they begin to separate from their family (Schwerdtfeger Gallus et al., 2015). The role of the educator has the potential to be a protective factor.

TIC Literature Review

TIC does not have an agreed upon universal definition. There is, however, a consensus of the fundamental practice. The core components were described by Yatchmenoff, Sundborg, and Davis (2017) as being the prevalence of trauma, the impact of utilization, and commitment to incorporating. Plumb et al. (2016) provided a model of principles and practices in which they indicated a model needs to include properly trained staff, a school-wide perspective, healing relationships between teachers and students, caregivers, and empowering students through resiliency.

TIC is one way that more communication and cooperation are being exercised to help students who have experienced trauma. Harden et al. (2015) described the restorative practice of TIC that reduces discipline issues in school. Restorative practice includes all individuals who are involved in an issue, which improves communication skills (Harden et al., 2015). Processing misbehavior and including the youth in the decision-making process provide the environment for an individual who has experienced trauma to feel safe (Harden et al., 2015).

Communication is key to TIC. Kelley et al. (2014) explained that communication skills are needed when working with students who have experienced trauma, and there are three main concepts to improve open communication. The first concept is that teachers need to remember that it is not what happened to the student but how the student perceived the event. The next concept is that for a student to be willing to accept the

information, they need to be in a calm and safe environment. A student who has experienced trauma is often in a state of hyperarousal and needs additional support (Kelley et al., 2014). Finally, no matter what events a student has been through in their lives, they can live a better life. A student who feels encouraged and learns resilience can live a happy and healthy life (Kelley et al., 2014).

Teacher Training

When schools professionally train their teachers, it brings awareness to the prevalence of trauma, increases the usefulness of the intervention, and promotes a culture of understanding. Although the primary focus of teachers is to provide an academic education, they are also responsible for the student's social and emotional understanding (McConnico et al., 2016). By being trained in TIC, teachers should feel more comfortable in addressing trauma. This begins with educating teachers on the science that trauma changes the brain structure (Plumb et al., 2016). There also needs to be a discussion pertaining to adverse childhood experiences to have teachers see misbehavior from a different perspective. Plumb et al. (2016) emphasized the importance of relationship building between teachers and students.

Teachers' requests for additional training are prevalent throughout the literature on childhood trauma and education. A protective factor against trauma is a supportive relationship, and teachers are in an ideal situation to provide that positive interaction (McConnico et al., 2015). Crosby et al. (2015) conducted a study with school personnel who worked with court-involved students in an educational setting. The finding of training being needed supported the earlier research of Alisic (2012). The training was

needed because most staff members specified that they needed further information pertaining to misbehavior brought on by trauma, attachment-related behaviors, de-escalation skills, intervention feedback, and time to process experiences (Alisic, 2012). Teachers are often trained and educated in academics and not the socioemotional learning that students need (McConnico et al., 2015).

Wiest-Stevenson and Lee (2016) explained that trauma is difficult to identify, and professionally trained teachers may interpret the misbehavior as a different mental health condition. Many behaviors can be viewed as unacceptable in a classroom, and without the needed training a student can be viewed as lazy, not giving effort, or not having the ability to learn (Tishelman et al., 2010). Misdiagnoses or misconceptions include attention deficit hyperactivity disorder, conduct disorder, bipolar disorder, oppositional defiant disorder, anxiety disorders, and/or depression (Tishelman et al., 2010).

Because TIC is not used in all schools in the United States, the acknowledgment of barriers to training is needed (Nadeem, Saldana, Chapman, & Schaper, 2017). However, the awareness of TIC in schools has increased, and staff have been shown to be relatively receptive to its introduction. Layne et al. (2011) discussed ways to expand interest in TIC by enhancing teachers' empathic understanding of the lived experiences of students, which may assist teachers' development of reasoning and judgment, increase interest in evidence-based practices, provide a framework in which TIC can be used, and encourage views from multiple perspectives to identify strengths of students.

Part of effective training in assisting teachers in how they react to trauma behaviors can be challenging. A mnemonic device mentioned by Walkley and Cox

(2013) was CAPPD, which stands for calm, attuned, present, predictable, and does not let students escalate teachers' emotions. A teacher's response to trauma misbehavior can escalate the situation, so training is needed to handle the situation properly (Tishelman et al., 2010). There are many training options available such as 1-day training to introduce the concept of TIC, a small group discussion over a few months, or a 2-year option to explore the information in depth (Damian et al., 2018). By being in tune with the student, a teacher can recognize whether a break is needed and to not retaliate against external behaviors (Crosby, 2015). For a student to learn, there needs to be a relaxed and focused environment. Yatchmenoff et al. (2017) stated that teachers are not being given the de-escalation skills necessary for the changing needs of students. Crosby (2015) emphasized not engaging in a power struggle with the student. If this interaction occurs, it is counterproductive and harms the relationship. Although teachers do not have to be specialists in trauma, it is crucial to have the understanding to not only help students but to assist teachers in their ability to be effective (Ko et al., 2008).

School-Wide Approach

A commitment to implementing TIC is done by using a school-wide approach and incorporating other professionals. Schools are a natural setting for education and mental health services to merge (Mendelson et al., 2015). However, many schools do not incorporate interventions aimed at mental health. Mendelson et al. (2015) found that implementing a classroom-wide approach, it was more cost-effective than pulling out individual students for services. The reasoning for this finding was because it benefits multiple students, improved the classroom environment, and it did add strain on already

limited resources. The school-wide approach can be described as a three-tiered approach: macro-level, school level, and individual level (Ijadi-Maghsoodi et al., 2017). The macro-level would include areas such as funding for the interventions the school chooses to implement. The school level is the culture it creates to support TIC. Finally, the individual level is the accountability of each person for the role they play (Ijadi-Maghsoodi et al., 2017).

Identifying resources that can assist in TIC is also useful as they can assist in training, tracking changes, and can be cost-effective (Ko et al., 2008). Incorporating other resources is not only beneficial to the school but the students. Multiple professionals collaborating prevents the student from having to talk about the trauma repeatedly and reduces the risk of being retraumatized (Ko et al., 2008). Students are receptive to the idea of having trauma resources in the school (West et al., 2014). Students see this as having additional resources available to them immediately while the issue is occurring (West et al., 2014).

Tishelman et al. (2010) discussed that schools should look at the problem through a *trauma lens*. Tishelman et al. meant that a school-wide approach was beneficial to all students but also provided those students who had endured trauma to feel more comfortable coming forward. While specific interventions or evaluations are not suitable for all students by using a trauma lens it assisted in incorporating professionals who are more specifically trained. Teachers do not have access to a student's trauma history, and this often causes a barrier (Walkley & Cox, 2013). Therefore, a trauma-informed approach is beneficial as it assists in overcoming the barriers that teachers face.

With the proper understanding, teachers know this is not to move them into the role of a counselor but instead to foster a nurturing and welcoming environment where everyone feels safe (Berardi & Morton, 2017). However, for teachers to provide such a classroom-wide approach they need support from administration and the school board (Walkley & Cox, 2013). Teachers and mental health professionals cannot do it alone and there is a need for everyone to buy into this type of approach. Crosby (2015) also discussed the need for the top-down to buy into a trauma-informed approach as it affects discipline policies, staff training, relationships between school and mental health providers, student performance, the climate, teacher satisfaction, and special education services. Schools need to understand it will not only help in their building but there are lasting effects on multiple aspects of the student's life (Crosby, 2015).

Student-Teacher Relationship

The relationship between student and teacher is crucial in TIC. A student that has engaged in misbehavior due to trauma will benefit from creating a respectful and nurturing relationship with a teacher (Morgan, Pendergast, Brown, & Heck, 2015). Students who have faced trauma require a different relationship than conventional student/teacher interactions. Morgan et al. (2015) found that when students felt heard they were more willing to re-engage in the learning environment. Teachers can achieve this by using active listening skills and taking the time to care (Morgan et al. 2015). While creating and fostering relationships is an ongoing challenge for everyone it is more important to adolescents as this is the time that they are creating the building blocks for future relationships. During adolescence, neural development and an individual's ability

to function is occurring, which correlates with the capacity to learn, emotional self-regulation, and engage in positive social behaviors (Berardi & Morton, 2017).

A teacher may interrupt oppositional behavior incorrectly without recognizing trauma to be the cause of the behavior (Fecser, 2015). Students may become involved in a verbal altercation, only partially complete an assignment, or not follow any rules (Fecser, 2015). Traditionally, this type of behavior has been confronted with negative consequences, a strong confrontation of the teacher repeating themselves, or being isolated from peers (Fecser, 2015). Unfortunately, this type of response only enters the student and the teacher into a conflict cycle (Fecser, 2015).

McConnico et al. (2016) found that most research has focused on the student and the relationship between the teacher and student. Trauma changes the way that students view others and therefore requires a different approach to relationship building. Teachers would benefit from engaging in reflective practice (McConnico et al., 2016). This occurs when the teacher is authentic in their beliefs and thoughts. It was also discussed that reflective practice not only assists in relationship building but also prevents burnout as the teacher is reflecting on why they chose this career path (McConnico et al., 2016). Research has shown students who have experienced trauma have a greater need for positive relationships (Cavanaugh, 2016). Cavanaugh (2016) found this can be achieved by providing students with rewards for positive behavior, being specific when providing praise, or welcoming the student into the learning environment.

A positive relationship is the first step to providing a safe environment for the student to be receptive to learning (Cavanaugh, 2016). Safety in TIC is provided by the

student having a sense of security through predictable and consistent routines (McConnico et al., 2016). A way for this to be accomplished is through proper classroom behavior management which involves the policy of the school and the teacher to enforce respect for each other (West et al., 2014). When a student feels comfortable with the routine and there are no behavior disturbances it is less likely that there will be external symptoms because of internal triggers (West et al., 2014). Teachers need to remember that schools are not always a safe zone for students as this may be where the trauma occurred (Tishelman et al., 2010). However, by creating a safe environment the students can overcome the trauma and feel secure in the school again.

Perspectives of TIC

There has been minimal exploration done on teacher's perceptions of trauma, but researchers have examined the issue from the student's perspective. Dods (2013) conducted a qualitative study with four participants who had experienced trauma which emerged the theme of an unmet need being a relationship with teachers. The participants were unable to identify how that connection could have been made but agreed that the teacher needs to be the one who takes initiative in the interaction (Dods, 2013). Participants also stated that interaction was not enough but that it needed to be authentic and from a place of caring. A third theme identified was that students wanted teachers to be able to identify when something was wrong and come to them. Students felt that teachers should have the ability to notice that there was an issue. Finally, students want to be treated as an individual. They do not want the same response that a teacher gives to everyone, no generic responses (Dods, 2013).

Willis and Nagel (2013) also examined the importance of the student and teacher relationship by interviewing teachers about a student's inability to learn. Willis and Nagel found that teachers are the needed rehabilitation for student's learning because they provide social norms, healthy habits, and positive educational practices. Teachers are the foundation for improvement, but a quality student and teacher relationship are needed (Willis & Nagel, 2013). Morgan et al. (2015) discovered in research that the best way for a quality relationship to happen is that the teacher first needs to be fully aware of themselves. Teachers were most successful in times of being genuine and open (Morgan et al., 2015). Forster, Gower, Borowsky, and McMorris (2017) found that a strong student and teacher relationship is a mitigating factor when students are engaging in risky behavior. However, this is an area with minimal research and Forster et al. (2017) indicated that further research is needed.

An example of the usefulness of training programs provided to teachers was conducted by Wolmer et al. (2016) that examined the self-efficacy of teachers who completed a resilience course compared to those who did not complete the training. Wolmer et al. indicated in their results that teachers who completed the resiliency training felt more comfortable and prepared to manage their classrooms. Wolmer et al. discussed positive feedback to resiliency training that is part of TIC and improvement to classroom management. Teachers were receptive to the training and were able to implement what they learned into real-world experiences (Wolmer et al., 2016). Hoover et al. (2018) conducted a study about a school-wide approach in which teachers went through a series of training and then implemented these practices when interacting with students. Hoover

et al. (2018) found that by the teachers completing this training their students showed moderate improvement to their classroom functioning.

Mendelson et al. (2015) conducted a study in which youth participated in a twelve-week trauma-informed weekly group session. The session was facilitated by a mental health worker and a younger member of the community. The findings of this study were that teachers reported improved behavior in the classroom. Willis and Nagel (2013) supported the use of trauma-informed groups because trauma causes a gap in learning and something needs to fill that gap for the child to be successful. Mendelson et al. and Willis and Nagel demonstrated that TIC groups were beneficial to students, but these are studies that were conducted from the perspective of the students and not from a teacher's perspective. However, Mendelson et al. and Willis and Nagel do support the delivery of a school-wide TIC initiative by the results of this study. Another aspect of school-wide delivery was studied by Grassi et al. (2018) that conducted a study to examine the effectiveness of screening for trauma. Grassi et al. (2018) conducted this study because some students who require services are not referred because teachers are not trained to identify these needs. The group screening process showed to be more effective than individual referrals and enforced a school-wide trauma approach.

Methodology

Questionnaires and optional individual interviews were used in this study to collect data about a teachers' perception of trauma-based child misbehavior. The reason for using questionnaires and potential individual interviews is because the purpose is to understand teachers' perceptions of a specific concept and will be based on views that

take place in the classroom. Questionnaires via email had many advantages such as applying to any sample size, the ability to tailor it to specific information, completion is simple, requires less time to complete, convenient for the respondent (Kalantari, Kalantari, & Maleki, 2011). There was also an option for face to face interviews if respondents felt they could not fully explain themselves in an online format.

There have been similar study designs to validate this decision. A study that used questionnaires to study the phenomenon in its setting was conducted by Alisic, Bus, Dulack, Pennings, and Splinter (2012). In this study, the researchers, Alisic et al. collected data on teacher's experiences in supporting their students after a trauma. The data was collected using questionnaires that focused on their lived experiences. Blitz and Mulcahy (2017) used questionnaires in a school setting including both teachers and administration feedback to research views about engaging employees in implementing policy change.

Summary and Conclusions

Clemens, Helm, Myers, Thomas, and Tis (2017) conducted a study with 16 individuals who had been in foster care because those who have been in the foster care system historically has a lower graduation rate than their peers who have not been in foster care. Multiple participants discussed the traumatic events leading up to them being placed in foster care. A finding of the study was that the participants recognized the importance of trauma-informed school staff because they understood the participant's traumatic past and was able to implement their knowledge into a beneficial learning environment (Clemens et al., 2017). This brief glimpse at the study shows that students

who have had trauma in their lives are at higher risk of not graduating, the importance of a teacher being trauma-informed, and students do recognize the benefits of trauma interventions.

However, this study like many others is not from the perspective of the teacher. The detailed description of this proposed study is found in the following chapter. The objective is to understand trauma from the teacher's perspective. It is a platform for teachers to discuss their views and opinions in an area that little research could be found. Teachers are the frontline person every day in their classroom so further research from their perspective is needed. In Chapter 3, I will focus more specifically on the design I propose to use in this study, as well as information about the population, sampling, and analysis procedures.

Chapter 3: Research Method

The purpose of this basic qualitative study was to explore classroom teachers' perceptions and experiences with addressing trauma-related behavior and interventions in the classroom among students who have experienced trauma. This was achieved through questionnaires with optional in-person interviews that included teachers and administrators, whereby I collected data pertaining to perceptions, teaching styles, and responses to students. Baum et al. (2013) explained that building on the knowledge that teachers already have is vital in creating interventions that are maintainable. To understand the need for trauma training, there needs to be an understanding of intervention techniques being used in the classroom, how they are used, and their effectiveness in assisting the learning behavior of the child.

Research Question

What are the perceptions and experiences of teachers in addressing trauma-related behavior and interventions in the classroom among students who have experienced trauma in rural school districts in Pennsylvania?

Research Design and Rationale

The purpose of this study was to understand how teachers perceive and address trauma in their classroom. Prolonged exposure to stress from trauma has a role in how the brain grows and forms (Morton & Berardi, 2017). The stress hormones produced from these events affect the prefrontal cortex, cerebellar vermis, and hippocampus (Morton & Berardi, 2017). Children entering a classroom who have had this experience present a challenge for teachers. The focus of the study was whether teachers are willing to

acknowledge this phenomenon or whether they expect children to conform to their way of teaching.

I chose a general qualitative design because I wanted to expand on existing research and trauma theory. Brunzell, Stokes, and Waters (2018) examined the perspectives of teachers pertaining to working with trauma-affected youth as being meaningful work. The data collected during the study produced the needed qualitative themes that included finding new forms of trauma-informed teaching methods are needed to ensure teachers find their work meaningful. Cummings, Addante, Swindell, and Meadan (2017) also conducted a qualitative study to understand perspectives pertaining to trauma. Individuals shared their lived life experiences to provide information to expand on the need to better understand their viewpoints. The current study also sought to understand the lived life experiences of participants to better understand their perspective of trauma. Korstjens and Moser (2017) explained that qualitative research takes multiple aspects of the phenomenon such as the perception and environment. Because of this, qualitative researchers seek to obtain data from multiple individuals who have lived through the experience being studied.

Role of the Researcher

I used semistructured questions in a questionnaire and an optional individual interview format, so the primary role I played was in data collection (see Pezalla, Pettigrew, & Miller-Day, 2012). Prior to data collection, I recruited participants via email to complete online questionnaires and invite them to contact me to set up an additional

in-person interview. I contacted the school administration requesting that they and their teachers participate in the study.

Depending on the contact person in the administration and the teacher response, I developed a working relationship with individuals regarding the study procedures. I work as a counselor in an alternative school program referred to as a *transition room*. This program is housed in one of the study site school districts. However, I had minimal contact with teachers because there was a different staff member assigned to that task.

The assistant principal was assigned as the contact person for this alternative program, and I had minimal contact with administration. It was possible that I may have had previous contact with the teachers or administration. This particular area of Southwest Pennsylvania, is a rural area in which some of the potential participants were known from the community, or we may have attended the same high school. I had no type of supervisory relationship with any potential participants.

Researcher bias in qualitative research is possible if the researcher is not aware of their biases before conducting the study (Chenail, 2011). A way to mitigate this bias is by journaling (Chenail, 2011). After reviewing questionnaire responses, I journaled my thoughts that arose during each response to process my emotions. Journaling about the questionnaires and interviews provided a way for me to become aware of the interactions. Because there was a potential for knowing some of the participants, I needed to be aware and treat them the same as the other participants regarding questions asked and reactions to responses.

Methodology

Participants were teachers and administrators who work in various grade levels. There were no specific grade levels selected because each of the six school districts located in Southwest Pennsylvania has buildings that contain different grade levels. There is no universal procedure for elementary, middle, and high school. Two of the districts have three buildings, three of the districts have two buildings, and one district separates grades within the same building.

I recruited participants using the convenience sampling method. Convenience sampling occurs when the participants are easily reached with minimal inconvenience, they live near where the study will be conducted, they are available at the time of data collection, and they agree to participate (Etikan, Musa, Alkassim, 2016). This method was chosen so that every teacher and administrator could participate. Convenience sampling is appropriate to use to explore the perspective of the participants.

Participants who were interested in participating were provided with a link to the online questionnaire. My information was also provided to them to set up an optional in-person follow-up interview. The respondents were asked whether they are a teacher or part of the administration team so that data could be compared, and triangulation could be achieved in the interpretation of data. The purpose of triangulation is to ensure reliability and validity (Golafshani, 2003). Triangulation assists in having more complete data. If individuals wished to participate in a follow-up face-to-face interview, this would be held in a private room at the local library to ensure privacy. The local meeting room at the

library is used for many reasons. Choosing this location, it did not indicate the reason for the meeting and ensured the participants' privacy pertaining to participating in the study.

Questionnaires and optional individual questions were semistructured and open ended. Participants were reminded of confidentiality and were not asked any demographic questions that would indicate their identity. The questions asked were from the published instruments: Teacher Perceptions of Student Behavior Scale, Teaching Traumatized Students Scale, and Teacher Responses to Student Behavior Scale (Crosby et al., 2015). A copy of these instruments appears in Appendices A, B, and C. The instruments were originally constructed in a Likert-scale format, but this format was not used in the questionnaires or during the optional individual interviews. Instead, questions were framed in an open-ended manner to allow participants to respond in their own words. The questionnaires were used to facilitate discussion and to stay on topic. Crosby et al. (2015) developed the scales after a thorough review of the literature. After the review, a list of concepts that were related to the targeted constructs was identified. To certify the validity of the instrument, Crosby et al. enlisted the help of other professionals such as psychologists, trauma-trained specialists, and school administrators.

Following the data collection, I coded the responses from the questionnaires and information from the interviews. Data were coded using conventional content analysis. This coding process began without any predetermined codes. The coding approach that was used was descriptive coding to summarize the main topic of the selection (see Saldaña, 2013). Descriptive coding is suitable for nearly all qualitative methods (Saldaña, 2013). During the descriptive coding process, a descriptive word is given to a thought or

observation so that similar ideas and concepts can later be combined (Saldaña, 2013). Coding is cyclical, so multiple rounds of coding were conducted. Once codes were applied to the transcripts, categories were determined. The codes that emerged determined the categories. If needed, subcategories were applied. Once the categories were identified, I looked for themes that represented the larger ideas behind the codes and categories and tracked those themes in Microsoft Excel.

Issues of Trustworthiness

Credibility was established in this study using triangulation. According to Abdalla, Oliveira, Azevedo, and Gonzalez (2018) triangulation reduces the chance of contradictions and variations in the data collected. Triangulation is a technique to provide validity and reliability to the phenomenon. To achieve triangulation in the current study, I invited administrators and teachers to complete the questionnaire and participate in an individual interview. Fusch and Ness (2015) discussed how, by implementing data triangulation, a researcher can achieve data saturation, which also contributes to credibility. There is no one-size-fits-all method to determine data saturation, but it is more about the collection process (Fusch & Ness, 2015). Data saturation occurs not when a specific amount of data has been collected but when the study can be replicated due to the amount of information, there is no new information to be collected, and no further coding is possible (Fusch & Ness, 2015).

Finally, the technique of reflexivity was applied to this study. Fusch and Ness (2015) referred to reflexivity as the researcher's personal lens. A way to acknowledge the

personal lens is to know that there is a bias and be aware of this when seeing the phenomenon through the participants (Fusch & Ness, 2015).

Providing information about how the study was conducted, which includes limitations, is a responsibility of the researcher so that transferability is possible (Abdalla et al., 2018). There are seven concepts that need to be included in a study so that future researchers can replicate the study: how many organizations participated in the study, restrictions in the data collected from participants, the number of participants, how the data were collected, the number of sessions held to retrieve data, the duration of the sessions such as a single session or multiple meetings, and the method used to analyze the data (Abdalla et al., 2018). Future researchers need to determine whether the information is transferable by reviewing the data and determining whether they are appropriate for their purpose.

Korstjens and Moser (2018) described dependability as being transparent throughout the research process. A technique that can be used to demonstrate transparency is an audit trail. An audit trail starts at the beginning of the study and continues through the reporting of the findings (Korstjens & Moser, 2018). The types of ideas and concepts that would be included are decisions made, reflective thoughts, sampling, the adoption of research resources, how the finding came about, and how data were managed. Documenting or journaling the research process not only provides dependability but also demonstrates confirmability (Korstjens & Moser, 2018). I used the process of journaling throughout the data collection and analysis to ensure that I was being transparent.

Abdalla et al. (2018) explained that confirmability is a way for researchers to show that they are being objective. The two ways discussed were triangulation and reflexivity. The use of data triangulation prevents seeing the phenomenon from one perspective. Also, triangulation is a method to prevent the researcher's views from skewing the data (Abdalla et al., 2018). The use of reflexivity assists readers in understanding why the chosen methods were selected. The use of research to validate decisions enhances the neutrality of the researcher (Abdalla et al., 2018). I used triangulation by inviting teachers and administrators to complete the questionnaire and to participate in an individual interview.

Potential Conflicts and Biases

I have worked in the mental health field for over 8 years and recently started working in the education field. I had to remember that teachers are trained differently and to view responses through their perspectives. To my knowledge, teachers in this particular area of Southwest Pennsylvania had not received any formal training in TIC. The goal of this study was to understand teachers' perspectives from the academic side of trauma and not from a mental health viewpoint. My training in TIC needed to be bracketed when collecting data. My counseling skills, such as active listening and probing for further information, were beneficial in listening to participants instead of me doing the talking.

Ethical Considerations

An ethical concern I addressed was that I am a mental health professional and not a teacher. Although I explained to potential participants that I am a doctoral student, it

was important for them to understand my background. By explaining that I wanted to understand the perspective of teachers, the intended result was that they would feel this would be a platform for them to be understood from a field outside of their own. Potential participants may have viewed this as a positive or a negative, which may have impacted the number of participants. To overcome this, I emphasized that I was conducting this study as a student who wanted to understand their perspectives, not as a mental health professional pushing my agenda. Individuals in small communities should participate to have their voices heard, and this was their opportunity for a larger audience to hear their voices (see Moosa, 2015).

Another ethical consideration in a rural setting is to choose a meeting location that will not disclose the reason for the meeting (Moosa, 2015). In the current study, individuals participating in an individual interview were asked to meet at a local library. Because the room in the library is used for multiple purposes, this did not disclose the purpose for the meeting.

Finally, when following ethical guidelines pertaining to participants, it is important to reflect on whether they are considered members of a vulnerable population (Gehlert & Mozersky, 2018). According to Gehlert and Mozersky (2018), a participant falls into the category of a vulnerable population if they are a member of a racial or ethnic minority population, they are socially segregated due to poverty, or they are not able to comprehend what they are reading. I followed these ethical guidelines by explaining to participants they were not required to answer a question if they were uncomfortable. I invited teachers and administration to complete the questionnaire and to

participate in an individual interview of their own free will. Because I used a convenience sample, there was potential for members of a protected class such as pregnant woman or older persons to respond. It was not my intention to focus on these individuals. I welcomed everyone's thoughts and did not intend to have any protected class included. My population of interest are adults who would be college-educated because of their professional role. However, a member of a protected class has the potential to be an adult who holds this type of professional role. To ensure that all ethical issues have been addressed this study was submitted to be reviewed by Walden University's Institutional Review Board (#09-06-19-0666412). No participants were approached until final approval has been received.

Treatment of Data

To keep the material collected confidential and to not obstruct the personal information of any participants, the data was handled with the best practices to ensure the safety of the information. Peter (2015) explained that while the proper amount of data being collected it is important to only collect the data needed and no more so to protect privacy. Participants were notified that in no way will their names appear in any documents and if names are necessary, they were changed to protect their identity such as assigning pseudonyms. It was important for the participants to understand they have rights during the collection of information.

The World Health Organization (WHO) suggests that a consent form should include an introduction, purpose of the study, participant selection, voluntary participation, procedures, duration, and risks. Participants will be informed if at any time

they wish to quit filling out the questionnaire they can quit and during the individual interview they are welcomed to end the interview and the information they provided will not be used. I will inform them of this in the email asking for participants and again face-to-face at the start of the interview. Names were not recorded or used without the participants' permission.

The handling of data remained with me which I will store in a secure location in my home. At no time did I take the information into my workplace or discuss findings with my colleagues until after publication. The data collected was only discussed between me and the doctoral committee. When a hard copy containing any data was no longer needed, typically 5 years after the study is completed, the information and data will be shredded. Electronic documents will be secured on my personal computer that is password protected and destroyed after 5 years.

Summary

During the collection of data, participants were made aware that they have the right to what they choose to share. I wanted participants to understand they are in control while sharing their lived experiences with rights. At no time was anyone pressured to be a part of the questionnaires or interviews and feel forced to share information they were not comfortable disclosing. All participants felt welcomed into an environment in which they are shown respect. I explained their rights as a participant and ensure the safety of the information they choose to share. In Chapter 4, I cover the data analysis and results.

Chapter 4: Results

In this chapter, I cover the results of the research pertaining to understanding teachers' perceptions of trauma. The aim of the study was to develop a better understanding of the situations and experiences encountered in the classroom. The research question answered using qualitative questionnaires and optional follow-up in-person interviews was the following: What are the perceptions and experiences of teachers in addressing trauma-related behavior and interventions in the classroom among students who have experienced trauma in rural school districts in Pennsylvania? This chapter includes an in-depth review of the data collection, participants, results, and trustworthiness of the data.

Data Collection

The study started with me wanting to include all schools within a specified county. However, only one school district participated. This district comprised an elementary, middle, and high school. All teachers and school administrators that are employed by the district were included in the study. The questionnaire was distributed at the beginning of the school year. The participants were identified as part of the teaching staff or part of the administration team.

Of the more than 50 individuals who were invited to be in the study, I received 13 responses to the email invitation to complete the questionnaire. Participants were also invited to meet in person to discuss or explain their answers in further detail. The questionnaire was completed at their convenience via an email invitation link provided by Survey Monkey. Participants were told the questionnaire would take approximately 60

minutes to complete. The average completion time was 10 to 12 minutes. The in-person interview was completed at the participant's convenience and was dependent on the information they wished to discuss. There were three teachers who wished to discuss their experiences in person. Their perspectives are described in detail to give a more in-depth description of their experiences.

The data were always handled with privacy in mind. The questionnaires were printed in my home and placed in a three-ring binder. The hard copies that I used for coding never left my home, and I live with only my son. The notes that I took during the interviews went straight from the meeting place to my home and were placed in my binder. I used the data from the questionnaires and the interviews for the coding process by assigning labels to information that was similar. I color coded these labels with a highlighter to find a pattern that indicated the themes.

Results

The themes identified were all teachers encounter trauma, external behaviors are more likely to be noticed, teachers need to structure their day based on the possibility of triggering a student, and there is no consistent response to trauma. This section includes a detailed description of the themes with accompanying quotes and information provided by the respondents.

All Teachers Encounter Trauma

The data demonstrated that all teachers have encountered students who have had trauma in their lives. Of the 13 respondents, all indicated they had interactions with students who had experienced trauma. Participant 2 gave the example of being a part of

the student assistance team in which they assist with drug/alcohol and mental health concerns. The respondents agreed that behaviors that required intervention had the possibility of being caused by trauma. Participant 8 noted that “privacy laws make it harder for teachers to know past trauma.” For teachers to be successful, they need to structure their days based on the possibility of triggering a student. Participant 8 also reported that the most important part of structuring their day is finding ways to make sure the student “knows you are on their side, you care, you believe in them.” This includes the teacher’s tone, lesson planning, and routines. Participant 6 response pertaining to tone indicated that teachers should never use sarcasm when interacting with a student. Teachers have expectations and often use breaks in the classroom to be successful.

External Behaviors Are More Likely to Be Noticed

Respondents placed an emphasis on observations they made pertaining to external behaviors than internal behaviors. In a question pertaining to providing an example of trauma misbehavior, participant 13 stated, “students who have experienced trauma respond in different ways based on their specific trauma.” For example, a student does not respond well to authority or aggressive behavior from adults. Other responses were like this and provided examples of external triggers. The respondents were aware of the issue but were not as comfortable addressing internal responses or structural changes that occur in a trauma-inflicted individual. This was evident when indicating triggers such as loud noises, change in a routine, or being around someone unfamiliar. A specific response, provided by participant 3, pertaining to identifying traumatic responses was “responsiveness to discussion, panic, crying, and anger.” There were no responses

addressing internal triggers and being unfamiliar with the actual structural changes that occur when trauma has occurred in an individual's life.

Structure Day Based on the Possibility of Triggering a Student

Teachers and administrators reported that they are aware of trauma and because of this they need to design specific teaching strategies. Participants implemented a variety of strategies from their lesson plan, including the tone they use while discussing educational topics in the classroom. Teachers and administrators would ask themselves whether a topic would trigger a student and how they would get the information through to the rest of the class. Participant 1 stated "I try to be cautious of talking about certain topics during discussions." Participant 6 noted that they are "sensitive to things they are reading or discussing in class." They must take different personalities into consideration and be empathetic to each student's response. Several respondents discussed getting to know the student to understand their interests and then connecting the material to what the student likes to increase their attention. In addition to triggers and personalities, there are different learning styles to consider. Participant 5 stated that "allowing students to have some control over their life with guidance increases their desire to learn."

Not a Consistent Response to Trauma

Although teachers were aware that trauma causes issues in the classroom, their approach to the behavior was vastly different. For example, their responses to rewards varied, and there was not a uniformed approach to providing this type of positive reinforcement. The responses ranged from rewards only working for a short period of

time to rewards having been statistically proven to highlight wanted behaviors. Table includes interventions used while addressing trauma and the frequency of *yes* responses.

Table 1

Interventions Used in the Classroom

	Number of “yes”
Frequent breaks	12
Deliberately use wait time after giving a direction	11
Have sensory outlets available in the classroom	7
Use repetition and compromises in your interactions	11
Use structured, interactive, and interpersonal games	10
Provide students access to a safety zone	8
Adjust lesson in ways to accommodate	10
Physically rearrange the classroom	10

Interview Analysis

Three interviews were conducted with one middle school teacher and two high school teachers. These teachers volunteered to provide more in-depth information pertaining to their experiences. Each teacher gave a brief background of the student to provide some insight on the student having trauma and the struggles and rewards of working with the student.

H.S. discussed a male student who was a challenge in the classroom. The student had experienced emotional abuse when he was younger, as he would often be told by a parent that he was dumb and would never amount to anything. There were other things in his past, but the mindset of being stupid was noticeable in the classroom. The student displayed behaviors of acting out and shutting down in classes. Teachers were not aware

of the past emotional trauma at first but then started noticing that these behaviors would be displayed during certain activities he was faced with in his academics.

H.S. described his acting out activities as talking back to teachers, finding reasons to leave the classroom, and a lack of self-control. The shutting down behaviors were characterized as not participating, being on his phone instead of doing work, and falling asleep in class. H.S. realized that instead of disciplining him or failing him, they made more progress when they were able to talk through the behavior with the student. By approaching the situation differently, they had learned of his past experiences with family members.

H.S. reported that by using this knowledge they were able to approach his learning experiences differently or provide alternative educational experiences. H.S. noted it was not so much the academic work, but the student's belief in his ability. The student required extra patience and alternative approaches but was able to be more successful in the classroom. H.S. realized that their approach needed to be considered to make any progress. This student had experienced negative interactions with the adults in their life and previous educational interactions. By approaching the student in a more positive self-talk manner, H.S. was able to help the student make progress. The student continues to struggle but has shown growth, and H.S. considers this a success because not all student success should be measured on the same level.

H.S. provided an example of the student as he refused to complete a writing assignment that pertained to a holiday experience. The student refused to attempt the assignment. Through talking to the student, H.S. found out that anything holiday related

was very upsetting to the student because of past experiences. H.S. offered an alternative writing assignment that did not pertain to any type of family interaction, and the student completed it promptly.

L.H. discussed a female high school student who displayed acting out behaviors. The student would skip class, curse, struggle with boundaries, and be erratic at times. This student's family members had addiction issues, and the student would see things firsthand. L.H. had a good relationship with the student and knew some of events that were happening. L.H. did not go into detail pertaining to the addiction problems but talked about how it affected the student's education.

L.H. noticed that misbehavior would include the student being on her cellphone. L.H. confronted the student about her cellphone use and discovered that family members were telling the student events that were happening during the day. The student would skip class or leave without permission because she prioritized her family issues in real time over her education. L.H. struggled with how to approach this issue. L.H. wanted to know what was happening in the student's life and wanted the student to obtain an education. L.H. did not want to belittle the student, but the situation was interfering not only with the student but with the classroom when L.H. would need to address the misbehavior.

L.H. reported that there is no way to keep a student off their phone because they can always ask to go to the bathroom or get a drink. L.H. decided to work with the student on rewards so she would want to be involved in her academics instead of family drama. The goal was to redirect her attention while providing a supportive atmosphere.

L.H. implemented small daily rewards such as free time, one-on-one conversations, and entrusting the student with tasks. L.H. realized that the student had been consumed with negative reinforcement and being recognized individually for positive behavior was something the student never had experienced in her life.

B.M. worked with middle school children. B.M. spoke of working with students who have unpredictable experiences. B.M. noted that it is best to be cognizant of students and their background. What could be a small task or simple demand could be a stressor or trigger for a student. B.M. reported that this can be a struggle because creating or preparing content can lead to unpredictable outcomes for students because of their life experiences and can throw off an entire lesson that has been prepared. For example, “take this home to your mom and dad” can be a trigger because not every student has a good relationship with their parent. B.M. mentioned that it can be hard to work in simple changes to daily routines, but the reward is knowing the students have a better relationship with the teacher, who has taken the time to speak to the students, understand their backgrounds, and make concessions for daily activities.

B.M. reported that teachers sometimes need to look past every assignment being complete or students taking a nap in class because it is not always meant as an insult. This is rewarding because students know they have someone who is willing to provide that small time out from their busy lives. To B.M. providing a small amount of consistency and accountability is rewarding.

The interview data supported the themes identified in the questionnaires. Teachers may not have been aware of trauma at the beginning of their interactions with students,

but it became evident that there were underlying concerns. The three teachers provided examples of students acting out or shutting down. These examples were relevant to trauma and emphasized that external behaviors are more easily identified than internal behaviors. Teachers reported that they must structure their day based on the student's response and their understanding of trauma. In the third interview, the teacher gave an example of handing something to a student that needed to go home to mom or dad, and that triggered the student because they did not have either.

Evidence of Trustworthiness

Credibility

Credibility involves an accurate description of the phenomenon being studied and the research claims being made pertaining to the topic. This is accomplished by using a logical method throughout all phases of the research (Liao & Hitchcock, 2018). To ensure credibility in this study both teachers and administrators were invited to participate. Credibility is established in this study using triangulation. According to Abdalla et al. (2018), the use of triangulation reduces the chance of contradictions and variations in the data collected. Triangulation is a technique to provide validity and reliability to the phenomena. Fusch and Ness (2015) discussed how, by implementing data triangulation, a researcher will reach data saturation which also contributes to credibility.

During data collection, the goal was to reach data saturation. The number of responses for this study did not reach the anticipated amount. Because of this, a detailed account of the interviews was included to provide detailed information. Reflexivity or the

researcher's personal lens was also taken into consideration. Fusch and Ness (2015) referred to reflexivity as the researcher's personal lens and it is existing in all qualitative research whether the researcher realizes the bias is present. A way to acknowledge the personal lens is to know that there is a bias and be aware of this when seeing the research through the participants (Fusch & Ness, 2015). The concept of reflexivity was taken into consideration by completing an honest self-assessment. This was demonstrated by providing an honest and truthful description of the researcher's bias. The assistant superintendent approved all research questions and provided feedback before the study questions were distributed to potential respondents.

Transferability

The transferability of this study is indicated in whether the results can be transferred and become applicable to other settings. Transferability in qualitative research is important for studies to be replicated in other areas and with different participants, this is achieved through specific explanations (Anney, 2014). The process of selecting school districts is described above as the original plan changed once attempting to contact the district. While originally, there were to be multiple districts involved, in the end only one district agreed to participate. The lack of responses was also addressed. While there was a good response to the questionnaire it was not as many as was anticipated. With the use of survey monkey, it provided the amount of time that each participant took to complete the questionnaire. The original suggested time was approximately 1 hour but it took participants 10 to 12 minutes on average. The method to analyze and code the responses

is detailed above. The transferability of a study's results is ultimately at the discretion of future researchers.

Dependability and Confirmability

Dependability and confirmability are demonstrated in this study by describing the data and the process in detail. Korstjens and Moser (2018) described dependability as being transparent throughout the research process. Wester (2011) explained confirmability pertaining to the data being able to be corroborated or confirmed by another researcher. This was done by keeping records of the process and journaling throughout the process. By writing down the steps and holding the process accountable it ensured triangulation and transferability were taking place. The importance of explaining choices made and backing up decisions with explanations based on facts ensures the trustworthiness of this data.

Interpretation of the Results

The literature review of this study focused on three areas: the impact of trauma, teacher and student interaction, and implementation of TIC. The research collected during this study provided information to each of these three core areas. All the questionnaire respondents and all the interview participants had encountered a student that was impacted by trauma. Because their students have had trauma in their life the participant needed to take this into consideration during their interaction. Finally, participants were implementing trauma interventions even though they may not have been cognizant of such a method.

All of the following behaviors were identified by participants as an impact of trauma: change or transition, seeking attention, not feeling well physically, reacting to past, feeling like the work is too difficult for them, reacting to a court decision, fearing failure, parental or other family visits, reacting to something that happened in their current living environment. Teachers do not have access to a student's trauma history, and this often causes a barrier (Walkley & Cox, 2013). Therefore, a trauma-informed approach is beneficial as it assists in overcoming the barriers that teachers face. This question enforced that while teachers may not be aware of the reason for the behavior, they are addressing behaviors related to trauma.

Research has shown that students who have experienced trauma have a greater need for positive relationships (Cavanaugh, 2016). Cavanaugh (2016) found that this can be achieved by providing students with rewards for positive behavior, being specific when providing praise, or welcoming the student into the learning environment. There was a mixed response when it came to rewards as some participants saw the benefits while others did not. Rewards are an important aspect when used correctly.

Respondents felt that they were able to recognize trauma in students, but minimal responses included actual examples of internal and external symptoms. Teachers need to be aware of students internal and external symptoms of trauma (Lansing et al., 2017). Internal symptoms are defined as a student being withdrawn, depressed, or showing signs of anxiety and external symptoms as being disruptive, aggressive, and attention-seeking (Lansing et. al., 2017). Many responses stated that they believed they were aware of the

effects of trauma but did not elaborate on the fact that there are internal and external symptoms. Those that did provide an example were external factors.

Participants focused heavily on the academic material pertaining to their interaction with students. There was minimal data provided on how the teacher builds a relationship with the student or on stressing the importance of feeling safe. The teacher-student relationship is necessary for learning, and even more important for students who have experienced trauma. Teachers who are properly trained understand that misbehavior in the classroom has multiple reasons and one of those is that the student has had some type of emotional, sexual, or physical trauma in their lives (Cavanaugh, 2016). Schools can begin the healing process by providing safety and stability. When a student feels safe, positive relationship building can take place (Cavanaugh, 2016).

The area that respondents were the least confident in understanding is the impact of trauma on the brain. The question proposed was that participants provide their knowledge pertaining to this area. This is the question where answers varied from knowing it changes the structure to requiring more education. While the primary focus of teachers is to provide an academic education, they are also responsible for the student's social and emotional understanding (McConnico et al., 2016). By being trained in TIC, teachers should feel more comfortable in addressing trauma. This begins with educating teachers on the science that trauma changes the brain structure (Plumb et al., 2016). This is one example of where trauma training would be beneficial to educators.

One of the goals of this study is to promote the importance of the relationship between an educator and a student. While the student is important in overcoming trauma

so is the educator. The guiding principles for this study are built upon the attachment, regulation, and competency (ARC) framework. The ARC framework consists of three core areas and nine building blocks (Hodgdon et al., 2013). The three core areas that ARC focuses on are attachment, self-regulation, and competency. The area of attachment contains the building blocks of caregiver management of affect, attunement, consistent response, and routines. The attachment portion of ARC focuses on the caregiver (parent, guardian, or teacher) responses to the trauma. Participants were aware of their tone and language used when interacting with students. While being aware is important, participants did not provide specific examples such as ways they stay calm or find patience when interacting with a student that has encountered trauma.

Summary

Each participant in this study works directly with students that have encountered trauma and have individualistic interactions. No student that displays trauma inflicted behavior is the same. While participants generally feel well trained to address the students' needs there are some core concepts of TIC that were overlooked in the responses. Students and administrators are aware that their students have encountered physical, emotional, and sexual abuse and they are seeing the behaviors in the school.

However, the importance of the relationship between the adult and student is not provided in the responses. The responses to the questions are like that of the research that was found during the literature review, it focused on the student, not the relationship. That is not to place blame on anyone but to give insight into our mindset. There is such a focus on standards and benchmarks that the humanistic intervention is overlooked. When

schools professionally train their teachers, it brings awareness to the prevalence of trauma, the usefulness of the intervention, and promotes a culture of understanding. While the primary focus of teachers is to provide an academic education, they are also responsible for the student's social and emotional understanding (McConnico et al., 2016).

In Chapter 5 this concept will be discussed further and a more in-depth description of future research that could provide further insight. This research and future research have the potential for social change that will assist teachers, administrators, students, and parents. The following chapter will bring past research and present data collection together to form an interpretation of the findings to assist those that are encountering this phenomenon daily.

Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this basic qualitative study was to explore classroom teachers' perceptions and experiences with addressing trauma-related behavior and interventions in the classroom among students who have experienced trauma in Southwest Pennsylvania. This was achieved through questionnaires and optional follow-up in-person individual interviews with teachers and administrators in which I collected data pertaining to perceptions, teaching styles, and responses to students. Participants were invited to participate in the questionnaire via email. To understand the need for trauma training, there needs to be an understanding of intervention techniques being used in the classroom, how they are being used, and their effectiveness in assisting the learning behavior of the child.

In this qualitative study, I used questionnaires with an optional follow-up individual interview to collect data about teacher perceptions of trauma-based child misbehavior. Teachers and administrators participated by completing the questionnaire. Qualitative questionnaires were selected because of the aim to explore perceptions. The participants were recruited in Southwest Pennsylvania using a nonprobability, convenience sampling method.

The key findings of this study were all teachers encounter trauma, external behaviors are more likely to be noticed, teachers need to structure their day based on the possibility of triggering a student, and there is no consistent response to trauma. Teachers understand the overarching theme of trauma but not the science that goes behind it. They are expected to provide interventions to individuals in the same room without having the

background knowledge of each student. The most important finding was that teachers are willing to try multiple approaches to help their students.

Interpretation of Findings

Trauma theory was introduced by Herman (1992) and focused on hyperarousal, intrusion, and constriction (Zaleski et al., 2016). These are effects on people who have encountered trauma. Findings in the current study demonstrated that teachers and administrators encountered students who exhibited these characteristics. Hyperarousal is defined as the person always feeling as though they are in state of fight or flight. They have strong emotions without being provoked, and these actions can be confusing to others. Intrusion is explained as reliving the event even though the person may not realize that is what is happening. Constriction involves pulling away from others and not being able to form relationships (Zaleski et al., 2016). In the current study, questionnaire respondents indicated that they often must modify lesson plans because they address certain topics that can trigger students in their room at that time. The triggers had the possibility of being hyperarousal, intrusion, or constriction. The purpose of this study was to explore the teachers' perspectives and not the students because the latter had been addressed in previous research. There was a need to understand perspectives from both sides.

TIC was developed from trauma theory but does not have a universal definition. There is, however, a consensus of the fundamental practice. The core components described by Yatchmenoff et al. (2017) are the prevalence of trauma, the impact of utilization, and commitment to incorporating. Plumb et al. (2016) provided a model of

principles and practices in which they indicated that a model needs to include properly trained staff, be implemented from a school-wide perspective, promote healing relationships between teachers and students, incorporate caregivers, and empower students through resiliency. Results indicated that although teachers and administrators encounter students who have had trauma in their lives, there is no implementation of TIC. This was demonstrated by a wide array of responses that were not consistent. Respondents apply different techniques and interventions, but everyone had their own approach.

Restorative justice or restorative practice involves students making decisions to empower them in the interventions or resolutions of the behavior. Restorative practice includes all individuals who are involved in an issue, which improves communication skills (Harden et al., 2015). Processing misbehavior and including the youth in the decision-making process provide the environment for an individual who has experienced trauma to feel safe (Harden et al., 2015). However, in the current study's questionnaire data, there were minimal responses that indicated having a discussion with the student. However, there was discussion of this in the one-on-one interviews.

A school-wide approach is appropriate because school employees may not know when or whether they may be interacting with someone who has experienced trauma. The implementation of TIC is more effective as school-wide measure compared to an individual approach (Cavanaugh, 2016). Creating a school culture that incorporates TIC is helpful to all students to make them feel safe and involved, which promotes school connectedness (Schwerdtfeger Gallus et al., 2015). This was evident in the current study

when a respondent indicated that because of privacy laws they do not always know the background of a student. It was also evident that everyone working at the school at some point in their career came across a student exhibiting behaviors related to trauma.

However, there was no specific training pertaining to trauma or an adopted framework.

Research has shown that students who have experienced trauma have a greater need for positive relationships (Cavanaugh, 2016). Cavanaugh (2016) found positive relationships can be achieved by providing students with rewards for positive behavior, being specific when providing praise, or welcoming the student into the learning environment. Respondents in the current study provided various answers pertaining to the use of rewards. Most of the respondents did not follow trauma theory. This was evident as only one of the responses indicated that rewards need to be child specific to be successful.

Teachers need to be aware of students' internal and external symptoms of trauma (Lansing et al., 2017). Internal symptoms are defined as a student being withdrawn, depressed, or showing signs of anxiety, and external symptoms being disruptive, aggressive, and attention-seeking (Lansing et. al., 2017). Teachers and administrators in the current study identified external behaviors more than internal behaviors. Internal behaviors have an equal opportunity to disrupt the relationship between the student and the teacher. The questionnaire responses referred to internal triggers when lesson planning, but the behaviors that were provided placed an emphasis on the outward behaviors.

The questionnaire responses revealed that respondents were less confident regarding the brain structure of trauma-inflicted individuals. Most of the respondents indicated this was something they were not aware of pertaining to trauma. Teachers should feel comfortable in addressing trauma, which begins with educating teachers on the science that trauma changes brain structure (Plumb et al., 2016). Respondents indicated that they were comfortable addressing trauma; however, they also reported that if they understood the brain science behind it, they would feel more comfortable.

The association between trauma and the student-teacher relationship was evident by teachers being willing to structure their day based on the potential to trigger a student. Teachers use frequent breaks; use wait time after giving a direction; have sensory outlets; use repetition, compromises, games, safety zones, accommodations; and rearrange their classroom so their students can be successful. Teachers and administrators are also mindful of their tone during an interaction. Respondents understood that the way in which they speak to students will influence the response by the student. One respondent stated that sarcasm has no place in the classroom. They understood that sarcasm is not always well received and can interfere with the interaction.

All respondents reported having interacted with trauma-inflicted individuals, but there was no consistent response. Techniques and interventions used by respondents varied, and there was no specific framework or training that was provided. Education establishments often lack a trauma-informed approach to provide interventions to those inflicted with trauma symptoms and do not offer trauma intervention training to teachers (Anderson et al., 2015). However, trauma is something that influences teachers' decisions

every day. Students' internal and external behaviors need to be identified, and a consistent response needs to be implemented.

Limitations of the Study

There was minimal published data pertaining to the student and teacher relationship from the teacher's perspective. Because of the lack of related research, the results of the current study had several limitations. One limitation was using questionnaires with optional individual follow-up interviews was an approach that had minimal precedent in the literature. Because teachers lack training in trauma (Alvarez, 2017), it was necessary to collect data to understand their perspective. There was minimal research to compare the current findings to, but the results of this study may be beneficial in promoting future research.

The participants had similar backgrounds pertaining to ethnicity because the geographic setting of the study was rural. It would be useful for future research to be conducted in an area with a more diverse population to obtain a broader collection of views from different backgrounds. Everyone's views and opinions are important, but more varied life experiences may yield different responses.

Researcher bias was a potential limitation because I am trained in trauma and implement the ARC framework in my daily work. Researcher bias occurs when the researcher allows their thoughts and beliefs to skew the results (Anney, 2014). I work for an organization that is trained in being trauma informed. The organization has a monthly training pertaining to the ARC framework and incorporates TIC interventions into daily

routines. These aspects of my life had the potential to introduce bias in the study because I advocate for students daily.

Recommendations

The three recommendations for further research are to examine the perspective of teachers pertaining to trauma in a geographic location that is more diverse, study more closely the perspective of teachers based upon their training in trauma, and a more in-depth examination from both the teacher and the student perspective. All individuals regardless of their geographic location, ethnicity, or race should have their input included. The research addressed in the literature review focused on the importance of trauma training (Plumb et al., 2016). It would be beneficial to study the benefits of this training pertaining to the relationship between student and teacher. Also, research pertaining to student and teacher interactions should include both.

Understanding teacher perspectives on trauma in various geographic locations would be beneficial because of broader input. This study was conducted in a rural setting that was primarily White. Although diversity was appreciated during the study, there was minimal diversity among the respondents. This study may promote research on other populations in different geographic locations.

Another recommendation is to compare teachers who are trained in trauma with teachers who are not. The purpose of the current study was to understand teachers' experiences and perceptions of trauma; however, these perceptions may be different if individuals are trained in trauma. The comparison of these two groups would provide useful data in improving the student-teacher relationship. A positive relationship would

promote school connectedness, which would lead to a student being successful (Coleman, 2015).

The goal of this study was to give teachers and administrators a platform to share their lived experiences because prior data came from the student perspective. Future research that incorporates both the student and the teacher perspective has the potential to improve the school experience. A focus of TIC is the relationship of the student and teacher. If the goal is to improve the relationship, then conducting a study that includes both would be beneficial.

Implications

The implications for positive change are wide-ranging. Improving the student's performance in school would benefit the student, parents, teachers, administrators, and society. If the student is performing better in school, it promotes school connectedness. There will be less conflict between the student and the adults in their life. Students who are not successful in school or have too much stress and have the potential to drop out. This can affect society as there is the probability of not gaining employment or becoming involved in the criminal justice system. An individual graduating from high school has an endless positive benefit.

The ARC framework includes attachment, regulation, and competency. This framework focuses on the school system, family system, and individual. The implication for improvement in these areas is positive for everyone involved. Attachment is important because a student overcomes trauma by having any one positive adult in their life. Regulation is the ability to modulate internal and external behaviors. This gives the

student the ability to be successful in school not only academically but also pertaining to their relationships. Competency is the goal of school, including self-development and identification. Being successful in school prepares a person for the rest of their life.

Conclusion

Trauma is not an isolated phenomenon and does not affect only that person. Trauma has an impact on every aspect of a person's life including how that person interacts with the world around them. Teachers, administrators, counselors, custodians, cafeteria workers, teachers' aides, or secretaries interact with students daily. These individuals should have every tool available to help their students. Plumb et al. (2016) indicated that teachers lack training in trauma, but teachers address trauma in their classrooms, then training should be considered.

The written portion of this study was concluded during the 2020 coronavirus pandemic. Teachers and administrators were forced into a new way of conveying information and interacting with students. People responsible for the education of students were forced to rise above their expected roles. This gave a new perspective to everyone regardless of age, race, ethnicity, or geographic location. The effects of trauma were not put on hold because of the pandemic and perhaps brought new light to the challenges. Social distance does not mean emotional distance and learning did not end. We need to give teachers and administrators every piece of knowledge to be successful in preparing the next generation.

Summary

In this final chapter, I covered the findings of my current research and the interpretation of the findings. The information presented related to the information pertaining to the framework and literature that was outlined in Chapter 2. The topics reviewed in the chapter included interpretation of the findings, limitations of the study, recommendations, and implications for social change. This study indicates that teachers and administrators interact with trauma inflicted individuals and the need for the training. School staff are required to take on several roles in their daily interactions and this study demonstrated they are willing to structure their days based on those roles. However, a school-wide framework pertaining to trauma is lacking which does not provide consistency to those individuals that have encountered trauma. Teachers and administrators do amazing things every day in their profession and deserve credit for the impact they make on their students' life. They also deserve to have the resources needed to aid in the education of all their students but especially those who have encountered trauma.

References

- Abdalla, M. M., Oliveira, L. G. L., Azevedo, C. E. F., & Gonzalez, R. K. (2018). Quality in qualitative organizational research: Types of triangulation as a methodological alternative. *Administração: Ensino e Pesquisa*, *19*(1), 66–98.
doi:10.13058/raep.2018.v19n1.578
- Alisic, E. (2012). Teachers' perspectives on providing support to children after trauma: A qualitative study. *School Psychology Quarterly*, (1), 51-59. doi:10.1037/a0028590
- Alisic, E., Bus, M., Dulack, W., Pennings, L., & Splinter, J. (2012). Teachers' experiences supporting children after traumatic exposure. *Journal of Traumatic Stress*, *25*(1), 98–101. doi:10.1002/jts.20709
- Alvarez, A. (2017). "Seeing their eyes in the rearview mirror": Identifying and responding to students' challenging experiences. *Equity & Excellence in Education*, *50*(1), 53-67. doi:10.1080/10665684.2016.1250686
- Anderson, E. M., Blitz, L. V., & Saastamoinen, M. (2015). Exploring a school-university model for professional development with classroom staff: Teaching trauma-informed approaches. *School Community Journal*, *25*(2), 113-134. Retrieved from <https://www.questia.com/library/p436743/school-community-journal>
- Anney, V. N. (2014). Ensuring the quality of the findings of qualitative research: Looking at trustworthiness criteria. *Journal of Emerging Trends in Educational Research and Policy Studies*, *5*(2), 272-281. Retrieved from https://journals.co.za/content/journal/sl_jeteraps

- Arvidson, J., Kinniburgh, K., Howard, K., Spinazzola, J., Strothers, H., Evans, M., ... Blaustein, M. E. (2011). Treatment of complex trauma in young children: Developmental and cultural considerations in application of the ARC intervention model. *Journal of Child & Adolescent Trauma*, 4(1), 34.
doi:10.1080/19361521.2011.545046
- Balaev, M. (2008). Trends in literary trauma theory. *Mosaic-A Journal for the Interdisciplinary Study of Literature*, 41(2), 149-166. Retrieved from <https://muse.jhu.edu/journal/536>
- Barr, D. A. (2018). When trauma hinders learning. *Phi Delta Kappan*, 99(6), 39-44. Retrieved from <https://pdkintl.org/publications/kappan/>
- Bartlett, J. D., Griffin, J. L., Spinazzola, J., Fraser, J. G., Noroña, C. R., Bodian, R., ... Barto, B. (2018). The impact of a statewide trauma-informed care initiative in child welfare on the well-being of children and youth with complex trauma. *Children and Youth Services Review*, 84, 110-117.
doi:10.1016/j.childyouth.2017.11.015
- Baum, N., Cardozo, B., Pat-Horenczyk, R., Ziv, Y., Blanton, C., Reza, A., ... Brom, D. (2013). Training teachers to build resilience in children in the aftermath of war: A cluster randomized trial. *Child & Youth Care Forum*, 42(4), 339-350. Retrieved from <https://link.springer.com/journal/10566>
- Berardi, A., & Morton, B. M. (2017). Maximizing academic success for foster care students: A trauma-informed approach. *Journal of At-Risk Issues*, 20(1), 10-16.

Retrieved from <http://dropoutprevention.org/resources/journals/journal-of-at-risk-issues-online-issues/>

- Blitz, L. V., & Mulcahy, C. A. (2017). From permission to partnership: Participatory research to engage school personnel in systems change. *Preventing School Failure, 61*(2), 170-180. doi:10.1080/1045988x.2016.1242061
- Branson, C. E., Baetz, C. L., Horwitz, S. M., & Hoagwood, K. E. (2017). Trauma-informed juvenile justice systems: A systematic review of definitions and core components. *Psychological Trauma: Theory, Research, Practice, And Policy, 9*(6), 635-646. doi:10.1037/tra0000255
- Brunzell, T., Stokes, H., & Waters, L. (2016). Trauma-informed flexible learning: Classrooms that strengthen regulatory abilities. *International Journal of Child, Youth & Family Studies, 7*(2), 218. doi:10.18357/ijcyfs72201615719
- Brunzell, T., Stokes, H., & Waters, L. (2018). Why do you work with struggling students? Teacher perceptions of meaningful work in trauma-impacted classrooms. *Australian Journal of Teacher Education, 43*(2), 116-142. doi:10.14221/ajte.2018v43n2.7
- Buxton, P. S. (2018). Viewing the Behavioral Responses of ED Children from a Trauma-Informed Perspective. *Educational Research Quarterly, 41*(4), 30-49. Retrieved from <http://erquarterly.org/>
- Çapulcuoğlu, U. U., & Gündüz, B. (2017). Opinions of school administrators and counselors regarding psychological counseling services at school: A qualitative

review. *International Online Journal of Educational Sciences*, 9(2), 500-515.

doi:10.15345/iojes.2017.02.015

Cavanaugh, B. (2016). Trauma-informed classrooms and schools. *Beyond Behavior*,

25(2), 41-46. doi: 10.1177/107429561602500206

Centers for Disease Control and Prevention. (2014). Child Maltreatment. Retrieved from

<https://www.cdc.gov/violenceprevention/pdf/childmaltreatment-facts-at-a-glance.pdf>

Chenail, R. J. (2011). Interviewing the investigator: Strategies for addressing

instrumentation and researcher bias concerns in qualitative research. *The*

Qualitative Report, 16(1), 255-262. Retrieved from

<http://nsuworks.nova.edu/tqr/vol16/iss1/16>

Clemens, E. V., Helm, H. M., Myers, K., Thomas, C., & Tis, M. (2017). The voices of youth formerly in foster care: Perspectives on educational attainment gaps.

Children and Youth Services Review, 79 (1), 65-77.

doi:10.1016/j.chilyouth.2017.06.003

Coleman, N. (2015). Promoting resilience through adversity: Increasing positive

outcomes for expelled students. *Educational Studies*, 41(1), 171-187.

doi:10.1080/03055698.2014.955741

Crosby, S. (2015). An ecological perspective on emerging trauma-informed teaching

practices. *Children & Schools*, 37(4), 223-230. doi:10.1093/cs/cdv027

- Crosby, S. D., Day, A. G., Baroni, B. A., & Somers, C. L. (2015). School staff perspectives on the challenges and solutions to working with court-involved students. *Journal of School Health*, (6), 347-354. doi:10.1111/josh.12261
- Cummings, K., Addante, S., Swindell, J., & Meadan, H. (2017). Creating supportive environments for children who have had exposure to traumatic events. *Journal of Child & Family Studies*, 26(10), 2728–2741. doi:10.1007/s10826-017-0774-9
- Damian, A. J., Gallo, J. J., & Mendelson, T. (2018). Barriers and facilitators for access to mental health services by traumatized youth. *Children and Youth Services Review*, 85273-278. doi:10.1016/j.chilyouth.2018.01.003
- Day, A. G., Baroni, B., Somers, C., Shier, J., Zammit, M., Crosby, S., ... Hong, J. S. (2017). Trauma and triggers: Students' perspectives on enhancing the classroom experiences at an alternative residential treatment-based school. *Children & Schools*, 39(4), 227–237. doi:10.1093/cs/cdx018
- Dods, J. (2013). Enhancing understanding of the nature of supportive school-based relationships for youth who have experienced trauma. *Canadian Journal of Education*, 36(1), 71-95. Retrieved from <https://journals.sfu.ca/cje/index.php/cje-rce/article/view/1460>
- Dray, J., Bowman, J., Campbell, E., Freund, M., Hodder, R., Wolfenden, L., ... Wiggers, J. (2017). Effectiveness of a pragmatic school-based universal intervention targeting student resilience protective factors in reducing mental health problems in adolescents. *Journal of Adolescence*, 57, 74-89. doi:10.1016/j.adolescence.2017.03.009

- Ehrenhalt, J. (2016). 'I thought about quitting today....'. *Education Digest*, 81(6), 9.
Retrieved from <https://www.eddigest.com/>
- Etikan, I., Musa, S., Alkassim, R. (2016). Comparison of convenience sampling and purposive sampling. *American Journal of Theoretical and Applied Statistics*. Vol. 5, No. 1, pp. 1-4. doi: 10.11648/j.ajtas.20160501.11
- Fecser, M. E. (2015). Classroom strategies for traumatized, oppositional students. *Reclaiming Children & Youth*, 24(1), 20. Retrieved from <http://nbtlib.com/wp-content/uploads/2016/08/Classroom-strategies-for-Traumatized-children-2.pdf>
- Forster, M., Gower, A. L., Borowsky, I. W., & McMorris, B. J. (2017). Associations between adverse childhood experiences, student-teacher relationships, and non-medical use of prescription medications among adolescents. *Addictive Behaviors*, 6830-34. doi:10.1016/j.addbeh.2017.01.004
- Fusch, P. I., & Ness, L. R. (2015). Are we there yet? Data saturation in qualitative research. *The Qualitative Report*, 20(9), 1408-1416. Retrieved from <http://nsuworks.nova.edu/tqr/vol20/iss9/3>
- Gehlert, S., & Mozersky, J. (2018). Seeing beyond the margins: Challenges to informed inclusion of vulnerable populations in research. *Journal of Law Medicine & Ethics*, 46(1), 30-43. doi:10.1177/1073110518766006
- Golafshani, N. (2003). Understanding reliability and validity in qualitative research. *The Qualitative Report*, 8(4), 597-606. Retrieved from <http://nsuworks.nova.edu/tqr/vol8/iss4/6>

- Goodman, L. A., Sullivan, C. M., Serrata, J., Perilla, J., Wilson, J. M., Fauci, J. E., & DiGiovanni, C. D. (2016). Development and validation of the trauma-informed practice scales. *Journal of Community Psychology, 44*(6), 747-764.
doi:10.1002/jcop.21799
- Goodman, R. (2017). Trauma theory and trauma-informed care in substance use disorders: A conceptual model for integrating coping and resilience. *Advances in Social Work, Vol 18, Iss 1, Pp 186-201 (2017)*, (1), 186. doi:10.18060/21312
- Goodman, R. D., & West-Olatunji, C. A. (2010). Educational hegemony, traumatic stress, and African American and Latino American students. *Journal of Multicultural Counseling and Development, 38*(3), 176-186. doi:10.1002/j.2161-1912.2010.tb00125.x
- Hales, T., Nochajski, T., & Kusmaul, N. (2017). Exploring the dimensionality of trauma-informed care: Implications for theory and practice. *Human Service Organizations Management Leadership & Governance, 41*(3), 317-325.
doi:10.1080/23303131.2016.1268988
- Hagaman, A. K., & Wutich, A. (2017). How many interviews are enough to identify metathemes in multisited and cross-cultural research? Another perspective on Guest, Bunce, and Johnson's (2006) landmark study. *Field Methods, 29*(1), 23-41. doi:10.1177/1525822X16640447
- Harden, T., Kenemore, T., Mann, K., Edwards, M., List, C., & Martinson, K. J. (2015). The truth n' trauma project: Addressing community violence through a youth-led,

trauma-informed and restorative framework. *Child & Adolescent Social Work Journal*, 32(1), 65-79. doi:10.1007/s10560-014-0366-0

Herman, J. (1992). *Trauma and Recovery*. New York: Basic Books.

Hodgdon, H., Blaustein, M., Kinniburgh, K., Peterson, M., & Spinazzola, J. (2016).

Application of the ARC model with adopted children: Supporting resiliency and family well being. *Journal of Child & Adolescent Trauma*, 9(1), 43.

doi:10.1007/s40653-015-0050-3

Hodgdon, H. B., Kinniburgh, K., Gabowitz, D., Blaustein, M. E., & Spinazzola, J.

(2013). Development and implementation of trauma-informed programming in youth residential treatment centers using the ARC framework. *Journal of Family Violence*, 28(7), 679-692. doi:10.1007/s10896-013-9531-z

Hoover, S. A., Sapere, H., Lang, J. M., Nadeem, E., Dean, K. L., & Vona, P. (2018).

Statewide implementation of an evidence-based trauma intervention in schools.

School Psychology Quarterly, 33(1), 44-53. doi:10.1037/spq0000248

Humphries, M. L., Williams, B. V., & May, T. (2018). Early childhood teachers'

perspectives on social-emotional competence and learning in urban classrooms.

Journal of Applied School Psychology, 34(2), 157-179.

doi:10.1080/15377903.2018.1425790

Iachini, A. L., Petiwala, A. F., & DeHart, D. D. (2016). Examining adverse childhood

experiences among students repeating the ninth grade: Implications for school

dropout prevention. *Children & Schools*, 38(4), 218-226. doi:10.1093/cs/cdw029

- Ijadi-Maghsoodi, R., Marlotte, L., Garcia, E., Aralis, H., Lester, P., Escudero, P., & Kataoka, S. (2017). Adapting and implementing a school-based resilience-building curriculum among low-income racial and ethnic minority students. *Contemporary School Psychology, 21*(3), 223-239. doi:10.1007/s40688-017-0134-1
- Kalantari D., H., Kalantari D., E., & Maleki, S. (2011). E-survey (surveys based on e-mail & web). *Procedia Computer Science, 3*, 935–941.
doi:10.1016/j.procs.2010.12.153
- Kelley, T., Pransky, J., & Sedgeman, J. (2014). Realizing resilience in trauma exposed juvenile offenders: A promising new intervention for juvenile justice and prevention professionals. *Journal of Child & Adolescent Trauma, 7*(3), 143.
doi:10.1007/s40653-014-0018-8
- Keesler, J. M. (2016). Trauma-informed day services for individuals with intellectual/developmental disabilities: Exploring staff understanding and perception within an innovative programme. *Journal of Applied Research in Intellectual Disabilities, 29*(5), 481-492. doi:10.1111/jar.12197
- Kinniburgh, K. J., Blaustein, M., Spinazzola, J., & Van der Kolk, B. A. (2005). Attachment, self-regulation, and competency. *Psychiatric Annals, 35*(5), 424.
doi:10.1007/978-3-319-46138-0_14
- Kline, D. S. (2016). Can restorative practices help to reduce disparities in school discipline data? A review of the literature. *Multicultural Perspectives, 18*(2), 97-102. doi:10.1080/15210960.2016.1159099

- Ko, S. J., Ford, J. D., Kassam-Adams, N., Berkowitz, S. J., Wilson, C., ... Wong, M. (2008). Creating trauma-informed systems: Child welfare, education, first responders, health care, juvenile justice. *Professional Psychology-Research and Practice, 39*(4), 396-404. doi:10.1037/0735-7028.39.4.396
- Korstjens, I. & Moser, A. (2017). Series: Practical guidance to qualitative research. Part 2: Context, research questions and designs. *European Journal of General Practice, Vol 23, Iss 1, Pp 274-279 (2017)*, (1), 274. doi:10.1080/13814788.2017.1375090
- Korstjens, I., & Moser, A. (2018). Series: Practical guidance to qualitative research. Part 4: Trustworthiness and publishing. *European Journal of General Practice, 24*(1), 120-124, doi: 10.1080/13814788.2017.1375092
- Krause, D. J., Green, S. A., Koury, S. S., & Hales, T. W. (2018). Solution-focused trauma-informed care (SF-TIC): An integration of models. *Journal of Public Child Welfare, 12*(2), 117-135. doi:10.1080/15548732.2017.1348312
- Lansing, A. E., Plante, W. Y., Golshan, S., Fennema-Notestine, C., & Thuret, S. (2017). Emotion regulation mediates the relationship between verbal learning and internalizing, trauma-related and externalizing symptoms among early-onset, persistently delinquent adolescents. *Learning and Individual Differences, 70*, 201–215. doi:10.1016/j.lindif.2017.01.014
- Layne, C. M., Pynoos, R., Stuber, M., Curtis, A., Jackson, L. A., Ippen, C. G., ... Lipscomb, L. (2011). The core curriculum on childhood trauma: A tool for

- training a trauma-informed workforce. *Psychological Trauma-Theory Research Practice and Policy*, 3(3), 243-252. doi:10.1037/a0025039
- Lee, C. S., Anderson, J. R., & Klimes-Dougan, B. (2016). Potentially traumatic experiences, academic performance, and psychological distress: The role of shame. *Journal of Counseling & Development*, 94(1), 41-50. doi:10.1002/jcad.12060
- Leitch, L. (2017). Action steps using ACEs and trauma-informed care: A resilience model. *Health & Justice*, 5(1), 1. doi:10.1186/s40352-017-0050-5
- Lelli, C. (2014). 10 strategies to help the traumatized child in school. *Kappa Delta Pi Record*, 50(3), 114-118. doi:10.1080/00228958.2014.931145
- Liao, H., & Hitchcock, J. (2018). Reported credibility techniques in higher education evaluation studies that use qualitative methods: A research synthesis. *Evaluation and Program Planning*, 68, 157–165. doi:10.1016/j.evalprogplan.2018.03.005
- McConnico, N., Boynton-Jarrett, R., Bailey, C., & Nandi, M. (2016). A framework for trauma-sensitive schools. *Zero to Three*, 36(5), 36-44. Retrieved from <https://www.zerotothree.org/>
- Mendelson, T., O'Brennan, L., Leaf, P. J., Ialongo, N. S., & Tandon, S. D. (2015). Brief report: Moving prevention into schools: The impact of a trauma-informed school-based intervention. *Journal of Adolescence*, 43, 142-147. doi:10.1016/j.adolescence.2015.05.017
- Meyers, A. (2016). Trauma and recovery. *Family Journal*, 24(2), 147-156. doi:10.1177/1066480716628565

- Moosa, D. (2013). Challenges to anonymity and representation in educational qualitative research in a small community: A reflection on my research journey. *Compare: A Journal of Comparative & International Education*, 43(4), 483-495.
doi:10.1080/03057925.2013.797733
- Morgan, A., Pendergast, D., Brown, R., & Heck, D. (2015). Relational ways of being an educator: Trauma-informed practice supporting disenfranchised young people. *International Journal of Inclusive Education*, 19(10), 1037-1051.
doi:10.1080/13603116.2015.1035344
- Morton, B. M., & Berardi, A. A. (2017). Trauma-informed school programing: Applications for mental health professionals and educator partnerships. *Journal of Child and Adolescent Trauma*, 11(4), 487–493. doi: 10.1007/s40653-017-0160-1
- Nadeem, E., Saldana, L., Chapman, J., & Schaper, H. (2017). A mixed methods study of the stages of implementation for an evidence-based trauma intervention in schools. *Behavior Therapy*, 49(4), 509–524. doi:10.1016/j.beth.2017.12.004
- Peter, E. (2015). The ethics in qualitative health research: Special considerations. *Ciência & Saúde Coletiva*, 20(9), 2625-2630. doi:10.1590/1413-81232015209.06762015
- Pezalla, A. E., Pettigrew, J., & Miller-Day, M. (2012). Researching the researcher-as-instrument: An exercise in interviewer self-reflexivity. *Qualitative Research: QR*, 12(2), 165–185. doi:10.1177/1487941111422107
- Pfluger, I. (2013). Psychotherapy with adult survivors of complex trauma: Undoing a person's aloneness in the face of overwhelming emotions. *Gestalt Journal of Australia & New Zealand*, 9(2), 44-67. Retrieved from <https://www.ganz.org.au/>

- Plumb, J. L., Kelly, A., Bush, K. A., & Kersevich, S. E. (2016). Trauma-sensitive schools: An evidence-based approach. *School Social Work Journal, 40*(2), 37-60. Retrieved from: <http://www.sswaa.org/>
- Revital, G. (2017). Trauma theory and trauma-informed care in substance use disorders: A conceptual model for integrating coping and resilience. *Advances in Social Work, Vol 18, Iss 1, Pp 186-201 (2017)*, (1), 186. doi:10.18060/21312
- Saldaña, J. (2013). *The Coding Manual for Qualitative Researchers*. Los Angeles, California: Sage Publications.
- Suleiman, S. R. (2008). Judith Herman and contemporary trauma theory. *Women's Studies Quarterly, 36*(1/2), 276-281. doi:10.1353/wsq.0.0016
- Walkley, M., & Cox, T. L. (2013). Building trauma-informed schools and communities. *Children & Schools, 35*(2), 123-126. doi:10.1093/cs/cdt007
- West, S. D., Day, A. G., Somers, C. L., & Baroni, B. A. (2014). Student perspectives on how trauma experiences manifest in the classroom: Engaging court-involved youth in the development of a trauma-informed teaching curriculum. *Children and Youth Services Review, 38*58-65. doi:10.1016/j.childyouth.2014.01.013
- Wester, K. L. (2011). Publishing ethical research: A step-by-step overview. *Journal of Counseling and Development, 89*(3), 301-307. doi: 10.1002/j.1556-6678.2011.tb00093.x
- Wiest-Stevenson, C., & Lee, C. (2016). Trauma-informed schools. *Journal of Evidence-Informed Social Work, 13*(5), 498-503. doi:10.1080/23761407.2016.1166855

- Willis, A. S., & Nagel, M. C. (2013). The role that teachers play in overcoming the effects of stress and trauma on children's social psychological development: Evidence from Northern Uganda. *Social Psychology of Education, 18*(1), 37-54. doi:10.1007/s11218-014-9282-6
- Wolmer, L., Hamiel, D., Margalit, N., Versano-Eisman, T., Findler, Y., Laor, N., & Slone, M. (2016). Enhancing children's resilience in schools to confront trauma: The impact on teachers. *Israel Journal of Psychiatry and Related Sciences, 53*(2), 25-32. Retrieved from <https://ijp.doctorsonly.co.il/>
- Schwerdtfeger Gallus, K. L., Shreffler, K. M., Merten, M. J., & Cox, R. J. (2015). Interpersonal trauma and depressive symptoms in early adolescents: Exploring the moderating roles of parent and school connectedness. *Journal of Early Adolescence, 35*(7), 990-1013. doi:10.1177/0272431614548067
- Seixas, B. V., Smith, N., & Mitton, C. (2017). The qualitative descriptive approach in international comparative studies: Using online qualitative surveys. *International Journal of Health Policy and Management, 7*(9), 778-781. doi:10.15171/ijhpm.2017.142
- Southwick, S. M., Bonanno, G. A., Masten, A. S., Panter-Brick, C., & Yehuda, R. (2014). Resilience definitions, theory, and challenges: Interdisciplinary perspectives. *European Journal of Psychotraumatology, 5*1-14. doi:10.3402/ejpt.v5.25338
- The World Health Organization. (2018). Research Policy. Retrieved from http://www.who.int/rpc/research_ethics/informed_consent/en/

- Tichy, M. (2017). Maslow illuminate resilience in students placed at risk. *Journal of Education & Social Justice*, 5(1), 94-103. Retrieved from <http://www.vul.edu/index.php/more/journal-of-education-and-social-justice>
- Tishelman, A. C., Haney, P., O'Brien, J. G., & Blaustein, M. E. (2010). A framework for school-based psychological evaluations: Utilizing a 'trauma lens'. *Journal of Child & Adolescent Trauma*, 3(4), 279. doi:10.1080/19361521.2010.523062
- Yatchmenoff, D. K., Sundborg, S. A., & Davis, M. A. (2017). Implementing trauma-informed care: Recommendations on the process. *Advances in Social Work*, 18(1), 167-185. doi:10.18060/21311
- Zaleski, K. L., Johnson, D. K., & Klein, J. T. (2016). Grounding Judith Herman's trauma theory within interpersonal neuroscience and evidence-based practice modalities for trauma treatment. *Smith College Studies in Social Work*, 86(4), 377-393. doi:10.1080/00377317.2016.1222110

Appendix A: Teacher Perceptions of Student Behavior Scale

Students who ACT OUT in class are...	Never	Sometimes	Often	Most of the time	Always
Responding to change or transition	1	2	3	4	5
Seeking attention	1	2	3	4	5
Not feeling well physically	1	2	3	4	5
Reacting to something in their past	1	2	3	4	5
Fearing failure	1	2	3	4	5
Reacting from a parent or other family related visit	1	2	3	4	5
Reacting to something in their current living environment	1	2	3	4	5
Students who SHUT DOWN in class are...					
Responding to change or transition	1	2	3	4	5

Reacting to something in their past	1	2	3	4	5
-------------------------------------	---	---	---	---	---

Feeling that the work is too difficult for them	1	2	3	4	5
--	---	---	---	---	---

Reacting to a court decision	1	2	3	4	5
------------------------------	---	---	---	---	---

Fearing failure	1	2	3	4	5
-----------------	---	---	---	---	---

Responding from a visit with a parent or other family member	1	2	3	4	5
---	---	---	---	---	---

Reacting to something in their current living environment	1	2	3	4	5
--	---	---	---	---	---

Crosby, S. D., Day, A. G., Baroni, B. A., & Somers, C. L. (2015). School staff perspectives on the challenges and solutions to working with court-involved students. *Journal of School Health*, (6), 347-354. doi:10.1111/josh.12261

Appendix B: Teaching Traumatized Students Scale

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Rewarding students helps change problematic behavior					
I am aware of the effects of trauma on the behavior of students in my classroom	1	2	3	4	5
I consider my students' experiences with trauma as I design strategies to engage students in learning	1	2	3	4	5
I can identify traumatic responses in students	1	2	3	4	5
I am aware of aspects of the school environment that may trigger trauma reactions in students	1	2	3	4	5
I know how to handle difficult behavior related to traumatic reactions in students	1	2	3	4	5
I understand how the brain is affected by trauma	1	2	3	4	5

I am mindful on how my verbal	1	2	3	4	5
-------------------------------	---	---	---	---	---

expressions (tone, language, sarcasm)

impact a traumatized child

I am mindful of the way my body	1	2	3	4	5
---------------------------------	---	---	---	---	---

language and nonverbal expression

impact a traumatized child

Crosby, S. D., Day, A. G., Baroni, B. A., & Somers, C. L. (2015). School staff perspectives on the challenges and solutions to working with court-involved students. *Journal of School Health, (6)*, 347-354. doi:10.1111/josh.12261

Appendix C: Teacher Responses to Student Behavior Scale

How much do you use the following teaching strategies with students who ACT OUT?	Never	Sometimes	Often	Most of the time	Always
I use frequent breaks	1	2	3	4	5
I deliberately use wait time (i.e. pauses) after giving a direction	1	2	3	4	5
I have sensory outlets available in the classroom (i.e. stress balls, play dough, etc.)	1	2	3	4	5
I use repetition and compromises in my interactions with students	1	2	3	4	5
I use structured, interactive, and interpersonal games in the classroom setting (music, ball toss, string game, etc.)	1	2	3	4	5
I provide students access to a safety zone when needed	1	2	3	4	5
I adjust lessons in ways to accommodate	1	2	3	4	5

I have physically rearranged the classroom as a method to address student behaviors	1	2	3	4	5
---	---	---	---	---	---

How much do you use the following teaching strategies with students who SHUT DOWN					
---	--	--	--	--	--

I use frequent breaks	1	2	3	4	5
-----------------------	---	---	---	---	---

I deliberately use wait time (i.e. pauses) after giving a direction	1	2	3	4	5
---	---	---	---	---	---

I have sensory outlets available in the classroom (i.e. stress balls, play dough, etc.)	1	2	3	4	5
---	---	---	---	---	---

I use repetition and compromises in my interactions with students	1	2	3	4	5
---	---	---	---	---	---

I use structured, interactive, and interpersonal games in the classroom setting (music, ball toss, string game, etc.)	1	2	3	4	5
---	---	---	---	---	---

I provide students access to a safety zone when needed	1	2	3	4	5
--	---	---	---	---	---

I adjust lessons in ways to accommodate	1	2	3	4	5
I have physically rearranged the classroom as a method to address student behaviors	1	2	3	4	5

Crosby, S. D., Day, A. G., Baroni, B. A., & Somers, C. L. (2015). School staff perspectives on the challenges and solutions to working with court-involved students. *Journal of School Health*, (6), 347-354. doi:10.1111/josh.12261

Appendix D: Trauma Questionnaire

1. Do you believe that any of the following would be reasons why a student is acting or shutting down? Why or why not?
 - Responding to change or transition
 - Seeking attention
 - Not feeling well physically
 - Reacting to something from their past
 - Feeling like the work is too difficult for them
 - Reacting to a court decision
 - Fearing failure
 - Reacting from a parental or other family visits
 - Reacting to something that happened in their current living environment
2. Discuss your experience in providing students with rewards to change problematic behaviors?
3. Are you aware of the effects of trauma on the behavior of students in your classroom? If so, please elaborate (Do not include any information that would reveal the identity of the student)
4. Can you discuss ways that you consider students' experiences with trauma as you design strategies to engage students in learning? (Do not include any information that would reveal the identity of the student)
5. Are you able to identify traumatic responses in students? Provide examples

6. Are you able to identify aspects of the school environment that may trigger trauma reactions in students? Provide examples
7. How comfortable are you with handling difficult behavior related to traumatic reactions in students?
8. Provide your knowledge on how trauma effects the brain if you are aware of this topic.
9. Please discuss your knowledge pertaining to your own verbal expressions (tone, language, sarcasm), non-verbal expressions, and body language pertaining to a child that has encountered trauma. Can you discuss any experiences? (Do not include any information that would reveal the identity of a student)
10. Do you use any of the following teaching strategies with students who act out or shutting down?
 - Frequent breaks
 - Deliberately use wait time after giving directions
 - Have sensory outlets available in the classroom
 - Use repetition and compromises in your interactions with students
 - Use structured, interactive, and interpersonal games in the classroom setting
 - Provide students access to a safety zone when needed
 - Adjust lesson in ways to accommodate
 - Physically rearrange the classroom as a method to address student behaviors