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International Trauma-Informed Practice Principles for Schools (ITIPPS): expert consensus of best-practice principles

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Abstract

Recognition that schools should be responsive to children who are impacted by adversity and trauma is burgeoning internationally. However, consensus regarding the necessary components of a trauma-informed school is lacking. This research developed expert-informed and internationally relevant best-practice trauma-informed principles for schools. A four-phase methodology included (i) identification of school-relevant trauma-informed practice programs, (ii) inductive thematic analysis of the main concepts underlying programs, (iii) phrasing of draft Principles and (iv) Principle revision and finalisation via a two-round Delphi survey with international experts. Excellent agreement by experts on the importance of all Principles was achieved (round $1 \geq 86.4\%$, $2 \geq 92.3\%$). The final 'International Trauma-Informed Practice Principles for Schools' (ITIPPS) include four Overarching (A–D) and 10 Practice Principles (1–10). Summarised, these include that the school: (A) is student focussed; (B) models compassion and generosity; (C) is understanding and responsive; (D) incorporates recognition of their First Nations peoples in the school's ethos: (1) prioritises safety and wellbeing; (2) models positive relationships; (3) provides a positive culture and connects; (4) consults and collaborates; (5) supports vulnerable students; (6) teaches social and emotional learning; (7) provides trauma-informed practice training; (8) is predictable yet flexible; (9) identifies and nurtures strengths and (10) reflects, changes and grows. The ITIPPS provide clear guidance for education sectors, schools and other settings about appropriate learning environments for children and young people impacted by trauma. Research is now underway in Western Australian schools to pilot test the feasibility and impact of using the ITIPPS within a framework (thoughtfulschools.org.au) to establish trauma-informed schools.

Keywords Trauma-informed · Education · Trauma · Adversity · Student · Learning

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Introduction

Understanding trauma

Trauma is a lasting response to a deeply disturbing event or circumstance which is physically or emotionally harmful or life threatening and overwhelms an individual (American Psychiatric Association & Association, 2013; Substance Abuse and Mental Health Services Administration (SAMHSA), 2022). Potentially traumatic events include family and domestic violence, sexual assault, motor vehicle accidents, disasters (such as floods, bushfires, and earthquakes), bullying and community violence, illness, exposure to war, impacts from racism and dispossession from Country and homelands (The National Child Traumatic Stress Network, 2007a). Increased risk of trauma exists for children and young people who face childhood adversity such as poverty, social disconnection, housing insecurity, disability or other factors leading to more challenges or barriers for an individual (Centers for Disease Control & Prevention, 2021). The amount of adversity experienced in childhood was noted by Felleti and colleagues in the late 1990s to be associated with negative outcomes later in life (Felitti, 2002; Felitti et al., 1998). These events, coined adverse childhood experiences (ACEs), have been categorised as: abuse (physical, sexual, emotional), household challenges (mother treated violently, substance abuse in the household, mental illness in the household, parental separation or divorce), and neglect (emotional, physical) (Centers for Disease Control & Prevention, 2019). Felleti and other researchers spent the next few decades identifying the increased risk of a multitude of negative outcomes with the more ACEs an individual experiences (Felitti, 2002; Felitti et al., 1998) (see https://www.cdc.gov/violenceprevention/aces/about.html for a comprehensive list).

There is clear and increasing evidence that adversity and trauma impact a child's immediate functioning with comparatively compromised mental, physical, social and emotional outcomes (Nelson et al., 2020; Perfect et al., 2016). These short and medium-term outcomes are proposed to increase the risk of negative outcomes across the whole lifespan (Beilharz et al., 2020; Merrick et al., 2017). Over the past few decades, it has become clear that stress and trauma are associated with brain and body physiological and structural adaptations which lead to poorer health, educational and social outcomes (Bick & Nelson, 2016). It is important to note, however that positive outcomes are sometimes evidenced for individuals who experience childhood adversity or trauma, for example empathy-mediated compassion (Lim & DeSteno, 2016) and post-traumatic growth (Meyerson et al., 2011).

Prevalence of trauma and adversity

There is sometimes misconception that few children and young people experience one or more potentially traumatic events. However, a recent Australia-wide representative survey of people aged 16 and over identified a high prevalence of maltreatment during childhood, with 32% reporting physical abuse, 28% sexual abuse, 31%

emotional abuse, 9% neglect and 40% exposure to domestic violence (Mathews, 2023). These rates exceed those reported in other international research. For example, a 2005 study measuring the prevalence of child maltreatment in the United Kingdom (UK) reported that 21% of respondents experienced some form of physical abuse perpetrated by parents or carers, of which 7% was considered 'serious' (May-Chahal & Cawson, 2005). A further 6% of children experienced serious absence of physical care (neglect), 6% emotional maltreatment and 16% of children experienced sexual abuse (including 11% that involved sexual contact from parents/carers or other adults) (May-Chahal & Cawson, 2005). In 2013, 14% of New Zealand adolescents reported being purposefully physically harmed by an adult in their home, with 20% of girls and 9% of boys experiencing sexual abuse (Clark et al., 2013). Of further concern, in 2020, 7% of children in New Zealand had a registered family violence notification to child protective services (Oranga Tamariki Ministry for Children, 2020). Some populations are at greater risk of adversity and trauma, for example, First Nations peoples (United Nations, 2009) and culturally and linguistically diverse populations experience higher adversity in many countries (O'Connor et al., 2020). This is exemplified by statistics such as those reported by the United Nations (United Nations, 2009) that although Indigenous peoples comprise approximately 5% of the global population, they make up 15% of the world's impoverished people.

Trauma-informed practice

An individual (or organisation) who understands and responds sensitively to the impact of adversity or trauma on behaviour, avoids traumatisation, and educates the community, is said to be trauma informed, trauma sensitive, and/or trauma responsive. Trauma-informed practice is increasingly being promoted over punishment as a more appropriate way to respond to children displaying unexpected or challenging behaviours (Capatosto, 2015). Emerging evidence indicates trauma-informed practice can lead to positive change for communities (Capatosto, 2015). For instance, a New York juvenile justice facility significantly improved behaviour outcomes (lower violence) following a trauma-informed practice intervention (Baetz et al., 2019).

Trauma-informed practice in a school incorporates understanding and responding to students and other school community members in a way that recognises the potential impact of adversity and trauma, as well as educating whole school communities about the underpinning evidence. In application, trauma-informed practice promotes a shift from a 'behavioural management' approach to a 'behavioural understanding' philosophy (Berger, 2019) and highlights the importance of positive relationships. Although somewhat in it's infancy, early research indicates that there are benefits to be gained from promotion and support of trauma-informed practice in schools (Berger, 2019; Dorado et al., 2016; Kim et al., 2021; Rishel et al., 2019). For example, one of the most comprehensive investigations of a trauma-informed practice intervention in schools by Dorado et al., (2016) identified significant improvements in student outcomes, including their ability to learn, increased time on task and school attendance, as well as reduced disciplinary office referrals, incidents involving physical aggression, out-of-school suspensions and trauma-related symptoms.

Gaps in trauma-informed research and practice

Despite this foundational evidence, a paucity of research has examined the impact of trauma-informed practice in schools across diverse communities. This may be because within schools, punitive approaches (such as withdrawal of privileges and suspension) remain common (Chafouleas et al., 2016) and there is a lack of guidance about how to respond to and address the impact of trauma. This is somewhat exemplified by jurisdictional variation in policies. For instance, policies regarding use of suspension vary between Australian states. For instance, New South Wales revised their behaviour policies in 2022 encouraging suspension to be used as last resort, with the only two grounds for suspension being actual harm and unacceptable risk to health and safety, learning and/or wellbeing. Whereas, it appears Queensland still applies the 2006 Education Act (Queensland Government, 2006) which includes the somewhat less serious grounds for suspension such as 'disobedience', 'misbehaviour' and 'conduct that adversely affects or is likely to adversely affect, the good order and management of the school' (Queensland Government, 2022). The new Western Australian Department of Education Student Behaviour Policy V3 (Government of Western Australia, 2023), encourages schools to use restorative practices yet still incorporates a zero-tolerance punitive policy created in 2018 (Government of Western Australia, 2018) ascribing an automatic suspension and loss of good standing for any government school student who records, publishes or uploads to social media a video of fighting or bullying involving students.

Corporal punishment is also still allowed in many countries. Recent data indicate that despite growing support for the ceasing of corporal punishment in schools, it remains prevalent in the United States (US) (Heekes et al., 2022). Further, students exposed to family and domestic violence in the home are at an increased risk of experiencing punitive practices such as suspension (Orr et al., 2022) and corporal punishment at school (Heekes et al., 2022). These practices and policies exist despite discourse indicating they do not change behaviour (American Psychological Association Zero Tolerance Task Force, 2008); and indeed, that these strategies only further disadvantage the most disadvantaged (Hemphill et al., 2010; Mallett, 2017; McCarthy & Hoge, 1987).

In Australia and the US, various bodies governing education and individual schools have engaged different programs in an attempt to become trauma-informed. Promisingly, some education departments have funded programs which support trauma-informed practice implementation in their schools (for example; New South Wales, Trauma-Informed Practice for Improved Learning and Wellbeing (NSW Government, 2021) and Tasmania (Tasmanian Government, 2022)). Over the past 5 years the NSW Government have funded the development, delivery and evaluation of trauma-informed education for specific schools within the region. The Tasmanian Government have committed to trauma-informed practice through the Tasmania's Child and Youth Wellbeing Strategy which identifies and addresses needs at a whole-of-school and individual student level (Tasmanian Government, 2021).

Many communities though, lack clear expectations or guidance from education authorities about how to create and sustain a trauma-informed school. Further, there is limited consensus or delineation regarding what a trauma-informed

school incorporates. This is evident, for example, in Australia and the US where teachers receive limited and perceived insufficient training about trauma or what trauma-informed practice 'looks like' in schools (Anderson et al., 2015; Barrett & Berger, 2021; Berger et al., 2021; Davies & Berger, 2019). Inadequate knowledge and understanding are likely to result in responses to children which are unsupportive and potentially damaging; this may further marginalise these young people from their school and community. This can be conceptualised as a 'cycle of distress', in which adversity and negative events can generate stress, trauma and physiological, social and behavioural challenges, which leads to poor treatment and negative messaging, thus, creating further stress, trauma and challenges.

Universally applicable trauma-informed principles have been generated by the Substance Abuse Mental Health Service Administration (SAMHSA) (U.S. Department of Health & Human Services, 2022). Although these are not school-specific, they can provide guidance to the education sector about appropriate trauma-informed and responsive policies. In Australia, broad guidelines for how the education sector and schools can become trauma-informed have been developed (Howard, 2021). There are also many comprehensive and useful trauma-informed practice programs available internationally for schools, some at no cost; for example, Compassionate Schools (Hertel et al., 2009) and Harvard Trauma and Learning Policy Initiative (TLPI) (Cole et al., 2005). However, clear and concise guidance regarding what constitutes a trauma-informed school is lacking, and there is no consensus about appropriate guidelines, policies or practices needed within a trauma-informed environment. Having universally and internationally applicable school-specific principles will provide a framework for expectations of a trauma-informed school, thus, ideally assisting education sectors to generate system-wide trauma-informed policies, guidelines and interventions.

To provide appropriate and expert trauma-informed practice guidance, this research aimed to;

1. Identify common themes underpinning existing trauma-informed practice frameworks or programs relevant to schools
2. Generate draft trauma-informed practice Principles
3. Survey international experts to gain feedback on terminology and appropriate order in which the Principles need to be achieved and
4. Achieve consensus of final International Trauma-Informed Practice Principles for Schools (ITIPPS).

Methods

This mixed-study incorporated four main steps: (1) identification of school-relevant trauma-informed practice programs, (2) inductive thematic analysis of main themes underlying existing programs, (3) generation of draft trauma-informed Principles, and (4) revision and finalisation of the ITIPPS via a Delphi survey.

To ascertain universal consensus about perceived best-practice principles, an international Delphi survey was considered appropriate. Delphi surveys facilitate group

communication to effectively and collaboratively synthesise information, and reach consensus among a panel of individuals (Diamond et al., 2014). This process is seen to offset subjective bias which can occur in group discussions, with more vocal or persuasive individuals skewing group discussion and consensus (Diamond et al., 2014). Within this research, drafted statements indicating principles of a trauma-informed school were sent to a panel of experts in two survey rounds. After each survey round, responses from experts regarding their level of agreement with each drafted principle and their order, combined with qualitative feedback were examined and responded to with an aim to achieve consensus. Although there are different methods for determining Delphi study consensus, our research incorporated a threshold of 75% or greater agreement (Diamond et al., 2014) for each Principle. Thus, if more than 75% of respondents agreed that the Principle was important, it was retained.

Step 1: identification of school-relevant trauma-informed practice programs

The study commenced with collating a database of school trauma-informed practice programs. The school-relevant practice programs were included in the database upon meeting the following inclusion criteria:

- The program was promoted as supporting trauma-informed, trauma-aware, trauma-sensitive, trauma-responsive or adverse childhood experience-aware school environments.
- The program was available publicly.
- The program was applicable or appropriate for implementation in a primary, middle and/or secondary school setting.

Exclusion criteria included:

- Programs focusing on early childhood settings due to the different structural and care needs in these settings (Barnes et al., 2021).

A preliminary database of programs which had been generated by the first author was expanded via an initial broad internet search using terms ('trauma*' OR 'adverse*'), AND ('program*' OR 'framework' OR 'principles' OR 'guidelines') AND ('school*' OR 'education'). Links to other sources of information were also followed, and thus, two additional programs were identified. In total, 18 programs were identified in 2018 which met the inclusion criteria (see Table 1).

Recent publicly available program data were retrieved from websites, directly from program authors and peer-reviewed publications. Few programs had been rigorously evaluated; thus, evidence of impact was not required for inclusion in the research.

Step 2: inductive thematic analysis

Inductive thematic analysis using Braun and Clarke's approach (Braun & Clarke, 2006) was used to analyse existing programs/frameworks and create draft

Table 1 Trauma-informed practice program or framework and location included in analysis

Country	Program Name
United States	Compassionate schools—Learning and teaching support. https://www.k12.wa.us/sites/default/files/public/compassionateschools/pubdocs/theheartoflearningandteaching.pdf
	CF learning: Who we are. http://cflearning.org/
	Circle of courage. https://starr.org/circle-of-courage/
	Circle of courage—Response ability pathways (RAP). *Courses* https://starr.org/course/response-ability-pathways-rap/
	Ramapo for children. https://ramapoforchildren.org/
	The sanctuary model. http://www.thesanctuaryinstitute.org/about-us/the-sanctuary-model
	Safe and civil schools. http://www.safeandcivilschools.com/
	Safe and caring schools and communities. https://safeandcaring.ca/
	Tribes learning community: a new way of learning and being together. https://tribes.com/
	Trauma smart works: reduce the negative impact of trauma and violence on our children today for a better tomorrow. http://traumasmart.org/
	Substance abuse and mental health services administration, SAMHSA's concept of trauma and guidance for a trauma-informed approach. https://store.samhsa.gov/product/SAMHSA-s-Concept-of-Trauma-and-Guidance-for-a-Trauma-Informed-Approach/SMA14-4884
New Zealand	Restorative schools training & development: workshops & training packages. http://restorativeschools.org.nz/training/training
United Kingdom	Restorative justice 4 schools. http://www.restorativejustice4schools.co.uk/wp/?page_id=45
Australia	Mind matters[a], Kids matter primary[b] https://beyou.edu.au/
	Safe schools hub[c], Student wellbeing hub. https://studentwellbeinghub.edu.au//?origin-host=safeschoolshub.edu.au
	Strategies for managing abuse-related trauma (SMART)—Australian Childhood Foundation SMART online: strategies for managing abuse-related trauma in the classroom *Training & Development* https://professionals.childhood.org.au/training-development/smart-online-training/
Canada	Engage: restorative practices. http://engage-rp.com/

[a]No longer in operation. Has since been replaced by the 'Be You' program

[b]No longer in operation. Has since been replaced by the 'Be You' program

[c]Now known as 'Student Wellbeing Hub'

Principles. This incorporated the first author learning about and understanding each program/framework (data familiarisation) and identifying main program/framework concepts (domains, themes or principles). At this stage the concepts and associated descriptive commentary were imported into NVivo. Codes were created from these main concepts (creating initial codes) and themes were generated via the combining and separating of codes (searching for, defining and naming themes). For example, codes 'early intervention', 'inclusion', 'individualised attention' and 'vulnerable students' were combined to create the theme *early identification and individualised support*.

Step 3: generation of draft Principles

Each theme was then transformed into a draft Principle by the first author, in consultation with an education expert and prior teacher (author LB) and then other team members (authors MF, KF, AKL). The above example of the theme *early identification and individualised support* was incorporated in the draft Principle; *The school identifies vulnerable children and young people early and provides individualised attention and support.* An Advisory Group consisting of academics, practitioners,[1] and community members[2] revised the draft Principles further to ensure all terminology were appropriate for the education sector and school audiences. The Advisory Group also recommended that the Principles be classified as either an 'Overarching' Principle (i.e. an underpinning trauma-informed concepts for a school) or a 'Practice Principle' (i.e. specific guidance about practices/approaches which schools can use).

Step 4: revision and finalising via a Delphi study

Ethical approval

Due to the involvement of human participants, this study was approved by the Human Research Ethics Committee (HREC) at the governing institution (Ref # RA/4/20/6041).

Expert sampling and recruitment

Academics and practitioners within the Advisory Group identified experts as those who had a minimum of 1 year's experience in trauma-informed practice relating to children or young people (i.e. experience working with children/young people directly, via research or via other ways which built knowledge about trauma-informed practice). Potential international experts with knowledge about trauma-informed practice in schools were identified using the authors' existing contacts and networks, internet searching of program founders, trauma-informed practice academics and expert snowballing. This process identified 133 potential experts.

Round 1

An initial email was distributed to all identified potential experts inviting those eligible to read further project and consent information, ask any questions they may have and then complete the questionnaire on the Qualtrics platform (Qualtrics, Provo, UT). After two reminders, 70 responses (52.6% response rate) were obtained. The first question focused on screening participants who self-reported their experience related to trauma-informed practice in schools. Those who did not meet the

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[1] public health, tertiary education, secondary school teaching, primary school teaching, social work, psychiatry and Indigenous health.

[2] parent of primary children, parent of secondary school children, recent school graduates.

eligibility criteria were redirected out of the survey and informed they did not meet eligibility criteria; this included an acknowledgement thanking them for their time.

Participants meeting the eligibility criteria who gave their consent to participate were sent the survey link consisting of demographic questions (Table 2) and draft Principles (i.e. for Round 1, three Overarching and 10 Practice Principles; see Table 3). Participants were asked to indicate: (a) the extent to which they agreed or disagreed that each Principle should be included in the ITIPPS (utilising a Likert scale from strongly disagree to strongly agree); (b) feedback about any perceived missing Principles; (c) wording of each Principle; and (d) which Principle/s (if any) need to be successfully adopted prior to achieving subsequent Principles (i.e. order of Principles). For each Principle they were asked to consider a series of questions (i.e. Does the Principle make sense? Is this Principle important? Is the Principle relevant in my community? Is the terminology culturally appropriate?). Participants were then provided with the opportunity to qualitatively describe their rationale for one or more of their decisions.

Expert responses were collated and the percent agreement with each Principle calculated (excluding missing data). To establish a draft order for the Principles, the sum of the experts' rankings for each Principle provided a total number; with the lowest number becoming the first Principle. The order from the Principle ranking summation is provided in Table 3.

The Advisory Group were provided the anonymous collated data and met to review Round 1 results. All feedback, comments and proposed changes to the ITIPPS were dated and tracked. Expert responses guided discussion about incorporation of each Principle into the final list, wording revision and Principle order until consensus was achieved.

All additional Principles suggested by participants were incorporated into existing drafted first round ITIPPS, except one which related to the importance of referencing partnerships specifically with First Nations peoples. This was suggested by an expert as: 'Intergenerational trauma experienced by parents, careers and guardians from Stolen Generations need secure pathways to disclose and recover so their children are not destined to repeat abusive behaviour's. In consultation with a First Nations team member, this suggestion was reworded slightly and specified as an Overarching Principle due to the impact of ongoing colonisation on First Nations peoples worldwide. However, after discussion between Advisory Group members, the Principle was revised to 'The School recognises the intergenerational trauma experienced by many First Nations peoples, families and communities' and confirmed as appropriate by a First Nations research team member.

Round 2

A threshold of 75% or greater agreement by participants was also set for round 2 (Diamond et al., 2014). The second round Delphi survey was sent to the 38 participants who had agreed in Round 1 to participate in Round 2. Of these, 16 responded (42.1% response rate) after two reminders. Round 2 coincided with the beginning of the COVID-19 pandemic (March 2020) which is likely to have impacted the response rate (Table 4).

Table 2 Demographic descriptors of Delphi Round 1 expert respondents

Variable	Category	N	%
Years of experience in trauma-informed practice relating to children/young people[a]	<1 year	1	1.72
	1–2.9 years	5	8.62
	3–4.9 years	10	17.24
	5–10 years	15	25.86
	>10 years	27	46.55
Location	Australia	27	64.29
	United Kingdom	2	4.76
	United States	12	28.57
	New Zealand	1	2.38
Age group	21–30	1	2.44
	31–40	12	29.27
	41–50	8	19.51
	>50	20	48.78
Gender	Male	8	20.00
	Female	31	77.50
	Non-binary/gender diverse	1	2.50
Sector	Government	22	44.00
	Not-for-profit	6	12.00
	Private	3	6.00
	Academic	17	34.00
	Other	2	4.00
Works at a school (or directly with a school) for at least seven hours/wk?	Yes	28	68.29
	No	13	31.71

Table 2 (continued)

Variable	Category	N	%
Main role	Teacher	3	6.52
	School leader (e.g. Principal, Deputy)	6	13.04
	Policy or project 0fficer	2	4.34
	Academic	9	19.57
	Psychologist	11	23.91
	Social Worker	4	8.70
	Other	11	23.91
School type	Government funded	23	71.88
	Private	1	3.13
	Community	3	9.38
	Catholic	1	3.13
	Anglican	3	9.38
Which school/s year/age groups do you work within or with?[b]	Early Childhood/Kindy/Preschool	11	17.46
	Primary	18	28.57
	Middle School	12	19.05
	Secondary/High	16	25.40
	Other	6	9.52

[a]Experience working with children/young people directly, via research or other ways that has built knowledge
[b]Could choose multiple

Table 3 Best-practice principles for trauma-informed schools draft; Round 1

Principle[a]	Draft non-ordered Principles	Strongly agree n (%)	Agree n (%)	Unsure n (%)	Disagree n (%)	Strongly disagree n (%)	Combined ranking[b]
A	The School responds to the needs of children and young people first and foremost (n=49)	36 (73.5)	10 (20.4)	1 (2.0)	1 (2.0)	1 (2.0)	N/A
B	The School is culturally, socially and emotionally understanding and responsive (n=49)	42 (85.7)	3 (6.1)	2 (4.1)	1 (2.0)	1 (2.0)	N/A
C	The School models and honours compassion, empathy, caring and generosity (n=49)	38 (77.6)	9 (18.4)	1 (2.0)	1 (2.0)	0 (0.0)	N/A
1	The School works with families and community services to address trauma (n=43)	38 (88.4)	4 (9.3)	1 (2.3)	0 (0.0)	0 (0.0)	142
2	The School provides a positive school culture that acknowledges and honours diversity (n=43)	35 (81.4)	6 (14.0)	1 (2.3)	1 (2.3)	0 (0.0)	95
3	The School values respectful relationships, open communication and positive interactions (n=43)	36 (83.7)	4 (9.3)	3 (7.0)	0 (0.0)	0 (0.0)	87
4	The School prioritises physical and emotional safety and wellbeing for all (n=44)	32 (72.7)	6 (13.6)	3 (6.8)	2 (4.5)	1 (2.3)	81
5	The School teaches social and emotional learning, and enhancing emotional intelligence and resilience (n=43)	31 (72.1)	10 (23.3)	2 (4.7)	0 (0.0)	0 (0.0)	145
6	The School identifies vulnerable students early and provides individualised attention and sources external professional support when needed (n=43)	31 (72.1)	10 (23.3)	2 (4.7)	0 (0.0)	0 (0.0)	144
7	The School educates staff, children and young people, and the community about trauma and its impact and offers support (n=43)	29 (67.4)	13 (30.2)	1 (2.3)	0 (0.0)	0 (0.0)	150
8	The School offers a predictable and consistent routine with structure yet responsive/adaptable flexibility (n=43)	28 (65.1)	10 (23.3)	5 (11.6)	0 (0.0)	0 (0.0)	179

Table 3 (continued)

Principle[a]	Draft non-ordered Principles	Strongly agree n (%)	Agree n (%)	Unsure n (%)	Disagree n (%)	Strongly disagree n (%)	Combined ranking[b]
9	The School advocates, supports and identifies all children and young peoples' strengths to ensure they feel challenged, valued and appreciated and able to set and achieve goals (n=43)	30 (69.8)	9 (29.9)	2 (4.7)	2 (4.7)	0 (0.0)	188
10	The School reflects, changes and grows in response to the integration of trauma-informed strategies (n=41)	31 (75.6)	6 (14.6)	2 (4.9)	2 (4.9)	0 (0.0)	219

[a]Overarching Principles; A–D and Practice Principles; 1–10

[b]Ranking; Lowest number indicating Principle should be achieved first and so on until highest number representing the last Principle needing to be achieved. Only asked for Practice Principles

The results of Round 2 are displayed in Table 4. Results indicated overall agreement with all revised Principles (one respondent disagreed with the importance of every Principle, however, their comments about the Principles and project were positive). Only one respondent recommended reordering the Principles; hence, the research team determined it was appropriate to retain the order determined by Round 1 participant responses.

Final principles

Due to the focus of using strengths-based terminology, in consultation with two First Nations members of the research team, Overarching Principle D was revised to 'The culture and experiences of the traditional custodians of the land on which the school sits are incorporated into the school's ethos'. The order and final wording of Overarching and Practice Principles are listed in Table 5.

Discussion

By drawing on the experience and knowledge from international experts, the final ITIPPS provide guidance for schools to create and sustain environments which support children who experience adversity and have been impacted by trauma. The use of sound methodology and the level of expert agreement indicate clear consensus regarding what constitutes a trauma-informed school.

A single or series of professional development sessions are unlikely to be sufficient to facilitate the extent of changes that most schools require to be trauma-informed. Schools must investigate and address multiple aspects of the policy and practice environment to comprehensively demonstrate their commitment to being trauma-informed (Berger & Martin, 2021). Schools able to demonstrate alignment with the ITIPPS can have increased confidence that they provide a trauma-informed environment for their students and community.

Clear common themes emerged from existing trauma-informed practice programs indicating there are shared international beliefs. These shared beliefs can support work in this space going forward; they provide a framework that this research has conceptualised to help a collective understanding and dialogue between practitioners, community members, researchers and policymakers. The specific delineation of Overarching and Practice Principles can assist schools to create, sustain, enhance and reflect on their trauma-informed policies and practices.

As well as enhancing the sense of shared understanding and the potential for dialogue around this important work, the ITIPPS provide a framework for action. The Principles identified within the ITIPPS enable focused and meaningful work that schools can undertake in contextually relevant and appropriate ways. For example, there is scope for schools to be responsive to the perspectives and practices of their local First Nations peoples and communities. Schools are also empowered to make curricular and pedagogical decisions that align with the ITIPPS. For instance, should a school prioritise achieving Practice Principle six (*teaches social and emotional*

Table 4 Best-practice principles for trauma-informed schools draft 2; Round 2

Principle[a]	Draft ordered principles	Strongly agree n (%)	Agree n (%)	Unsure n (%)	Disagree n (%)	Strongly disagree N[b] (%)
A	The School responds to the needs of children and young people first and foremost (n=16)	13 (81.3)	1 (6.3)	1 (6.3)	0 (0)	1 (6.3)
B	The School is culturally, socially and emotionally understanding and responsive (n=15)	13 (86.7)	1 (6.7)	0 (0)	0 (0)	1 (6.7)
C	The School models and honours compassion, empathy, caring and generosity (n=16)	13 (81.3)	2 (12.5)	0 (0)	0 (0)	1 (6.3)
D	The School recognises the intergenerational trauma experienced by many First Nation peoples, families and communities (n=16)	12 (75.0)	1 (6.3)	1 (6.3)	1 (6.3)	1 (6.3)
1	The school prioritises physical, social and emotional safety and wellbeing (n=13)	12 (92.3)	0 (0)	0 (0)	0 (0)	1 (7.7)
2	The school values and models positive relationships, communication and interactions (n=14)	11 (78.6)	2 (14.3)	0 (0)	0 (0)	1 (7.1)
3	The school provides a positive school culture that acknowledges and respects diversity and builds connectedness (n=13)	11 (84.6)	1 (7.7)	0 (0)	0 (0)	1 (7.7)
4	The school works with families, community and services to identify and respond to trauma (n=13)	12 (92.3)	0 (0)	0 (0)	0 (0)	1 (7.7)
5	The school identifies vulnerable children and young people early and provides individualised attention and support (n=13)	10 (76.9)	2 (15.4)	0 (0)	0 (0)	1 (7.7)
6	The school teaches social and emotional learning to promote emotional intelligence and resilience (n=13)	10 (76.9)	2 (15.4)	0 (0)	0 (0)	1 (7.7)
7	The school offers a range of learning opportunities to staff, students and the broader community about trauma and its impact (n=13)	7 (53.8)	5 (38.5)	0 (0)	0 (0)	1 (7.7)
8	The school provides a structured and predictable environment that is flexible to individual children and young peoples' needs (n=13)	11 (84.6)	1 (7.7)	0 (0)	0 (0)	1 (7.7)

Table 4 (continued)

Principle[a]	Draft ordered principles	Strongly agree n (%)	Agree n (%)	Unsure n (%)	Disagree n (%)	Strongly disagree N[b] (%)
9	The school identifies and nurtures children and young peoples' strengths to ensure they feel valued and challenged (n=13)	10 (76.9)	2 (15.4)	0 (0)	0 (0)	1 (7.7)
10	The school reflects, changes and grows in response to the integration of trauma-informed practices (n=13)	10 (76.9)	2 (15.4)	0 (0)	0 (0)	1 (7.7)

[a]Overarching Principles; A–D and Practice Principles; 1–10

[b]One respondent reported strongly disagree for every overarching and practice principle, however, provided a positive comment about the principles; thus, we believe they may have misread the response option order

Table 5 Final International Trauma-Informed Practice Principles for Schools (ITIPPS)

Overarching Principle A: The school responds to the needs of children and young people first and foremost

Overarching Principle B: The school is culturally, socially and emotionally understanding and responsive

Overarching Principle C: The school models and honours compassion, empathy, caring and generosity

Overarching Principle D: The culture and experiences of the traditional custodians of the land on which the school sits are incorporated into the school's ethos

Practice Principle 1: The school prioritises physical, social and emotional safety and wellbeing

Practice Principle 2: The school values and models positive relationships, communication and interactions

Practice Principle 3: The school provides a positive school culture that acknowledges and respects diversity and builds connectedness

Practice Principle 4: The school works with families, community and services to identify and respond to trauma

Practice Principle 5: The school identifies vulnerable children and young people early and provides individualised attention and support

Practice Principle 6: The school teaches social and emotional learning to promote emotional intelligence and resilience

Practice Principle 7: The school offers a range of learning opportunities to staff, students and the broader community about trauma and its impact

Practice Principle 8: The school provides a structured and predictable environment that is flexible to individual children and young people's needs

Practice Principle 9: The school identifies and nurtures children and young people's strengths to ensure they feel valued and challenged

Practice Principle 10: The school reflects, changes and grows in response to the integration of trauma-informed practices

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learning), there is impetus for them to work with specific frameworks, resources or programs which promote social and emotional learning.

Schools can be further empowered to make informed decisions about how they develop and sustain relationships, and how this contributes to their overall enactment of the ITIPPS. For example, there is emphasis on connection, consultation and collaboration (Practice Principles three and four), on supporting vulnerable students (Practice Principle five) and on providing trauma training (Practice Principle seven). These ways of working are critical to embracing and enacting a trauma-informed approach; however, they also hinge on contextual knowledge and a range of key relationships. Schools can work within the ITIPPS framework to identify and action the following: How do we most effectively engage with our school community? Who are our vulnerable students and what support(s) do they need? What trauma training will best inform and support our school community? Which local services, agencies and experts can assist us?

In addition to providing information for schools and the education sector, this project also makes a methodological contribution. The approaches undertaken to establish the ITIPPS are transferable and may assist with identifying key concepts and shared understanding that can inform the development of best-practice principles across sectors, disciplines and jurisdictions for other community-identified issues.

Participating experts were highly experienced in trauma-informed practice relating to children and young people, with close to one-half of the respondents in Round 1 having more than 10 years of experience in this field. A high diversity of experts responded in Round 1 with heterogeneity in terms of age group, sector, role, school type and student year/age groups. Agreement about the importance of each trauma-informed Practice Principle for both Delphi rounds was very high.

Although this research provides commonly derived themes and, thus, goals to assist schools to become trauma-informed, there are some limitations to this work. Due to the lack of previous research in this field, nearly every program included in the initial analysis had not been evaluated at the time of concept extraction. Thus, evidence of their impact was not a requirement for inclusion in this research; hence, the themes identified following analyses are expert rather than evidence informed.

Identification of experts in this field was complex, and thus, data from the sample may not sufficiently represent a wider pool of expert opinions. There was a higher proportion of Australian experts than international experts. The definition of an expert is also multifaceted and, although we did specify eligibility criteria, it is possible that some of the respondents were not sufficiently experienced to identify characteristics of a trauma-informed school. With a lower response rate in Round 2, most likely due to the impact of the COVID-19 pandemic, results may not reflect the perspectives of the wider base of international trauma-informed experts. However, the response rates of 52.6% and 42.1% in Rounds 1 and 2, respectively, are consistent with those of previous research and considered appropriate for a Delphi study to establish consensus (Vogel et al., 2019). Further, high attrition and low response rates in Delphi studies are not uncommon, particularly for those which include a large number of items in each round, such as this study (Gargon et al., 2019). Finally, in the last round, one participant strongly disagreed with the importance of every Principle; however, these responses did not align with the positive comments provided by this participant. It is, thus, probable that this respondent assigned their responses to the opposite response option to which they intended.

It is noted that the ITIPPS are not static and will shift in response to new information and research. To assist schools to align with the ITIPPS, a framework has been created by the research team called Thoughtful Schools. This framework incorporates a distinct cyclical and reflective process for schools, supported by resources including a website, self-assessment instrument, Guidebook and Workbook (available via https://thoughtfulschools.org.au/). With funding provided by government and philanthropic organisations, pilot testing of Thoughtful Schools commenced in 2020 in 12 Western Australian schools. Online resources are supplemented with professional learning for pilot school staff, workshops for school champions and expert coaching by the research team for schools. Pilot test results are expected to be available in 2024. Future research envisages modifying the ITIPPS and resources in response to research results and testing Thoughtful Schools nationally and internationally.

Conclusion

There is a clear need for education sectors and school leaders in Australia and globally to adjust school policies, processes and practices to align with overwhelming evidence about how adversity and trauma impacts children. Benefits of adopting and adhering to best-practice principles include that self-assessment and transformation is place-based, context specific, reflexive and enduring. These 14 ITIPPS provide universal guidance and expectations for education sectors and schools in the embedding of trauma-informed practice into their policy and practice environments. Further research, including the pilot testing of ITIPPS, will provide additional information to ensure communities can work effectively towards meeting the needs of children who experience adversity and trauma.

Declarations

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