Trauma-Informed Educational Practices in the Middle School Classroom During the COVID-19 Pandemic

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Trauma-Informed Educational Practices in the Middle School Classroom During the COVID-19 Pandemic

A Dissertation

Presented to the Faculty of the Department of Education and Social Work West Chester University West Chester, Pennsylvania

In Partial Fulfillment of the Requirements for the Degree of Doctor of Education

By Loralynne Yost

May 2022

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Dedication

To the children, teenagers, adults that have experienced trauma, real or perceived. May they each have champions to support them.

Every child deserves a champion: an adult who will never give up on them, who understands the power of connection, and insists they become the best they can possibly be.

-Rita Pierson, TED Talk, 2013

To the teachers who champion their students. May they appreciate the significance of their power to make students feel connected, safe and supported. May the use this power to help students understand and believe in their own self-worth and importance.

I’ve come to the frightening conclusion that I am the decisive element in the classroom. It’s my personal approach that creates the climate. It’s my daily mood that makes the weather. As a teacher, I possess a tremendous power to make a child’s life miserable or joyous. I can be a tool of torture or an instrument of inspiration. I can humiliate or humor, hurt or heal. In all situations, it is my response that decides whether a crisis will be escalated or de-escalated and a child humanized or de-humanized.

-Haim Ginott, Between Teacher and Child, 1972
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Thank you to my grandparents, parents, siblings, aunts, uncles, in-laws, sisters-in-law, brother-in-law, cousins, nephews, and nieces. You each play an important role in my life. Thank you to those that checked in with visits, weekly phone calls, and texts of encouragement to show your love and support. The depths of my gratitude are overflowing!

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pandemic, having your own families, and navigating life. You made this work come to life. You are shining examples of excellence for all of us.

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Finally, to the teachers in my life who were my champions. I may not remember everything that you taught academically, but the moments when you made me feel safe, connected, and appreciated will forever be ingrained in my heart.
Abstract

This collective case study used a mixed methods approach to examine how Trauma-Informed Educational Practices (TIEP) manifest in the middle school classroom. This study is important due to the trauma students experienced during the COVID-19 pandemic. Teacher participants had district training in trauma-informed practices prior to this study.

Teacher participants took an initial survey to capture their conceptualization and perceived usage of the TIEP in the classroom. Teachers then used TIEP in their classrooms for two weeks. Teachers kept a checklist of which of the TIEP they used each day and commented on the context for the use of the practices. There was also space for teachers to comment on how effective the practices were in their classroom. Finally, teachers participated in a voluntary interview which allowed the researcher to capture their individual choices and stories from using TIEP strategies.

Overall, the results from the surveys, checklist and interviews showed that teachers perceived the TIEP strategies as effective and that they used the strategies often in the classroom. Implementation of the strategies revealed that teachers perceived they had success with students when creating a safe space, making connection and showing interest in their students. Teachers concurred that the TIEP strategy of Creating a Safe and Supportive Classroom needs to be implemented at the very beginning of the school year. Teachers reported that many of concepts of the nine TIEP strategies can be interwoven and used together.

**Keywords:** COVID-19, trauma, trauma-informed, trauma-informed educational practices, TIEP, student/teacher connection
Table of Contents

List of Tables ......................................................................................................................................... xii

List of Figures ........................................................................................................................................ xiii

Chapter I: Introduction .......................................................................................................................... 1

Purpose of the Study ............................................................................................................................. 4

Significance of the Study ....................................................................................................................... 4

Rationale for the Study ........................................................................................................................ 6

Research Questions .............................................................................................................................. 6

Rationale for the Methods .................................................................................................................... 8

Positionality .......................................................................................................................................... 11

What’s ‘Wrong’ with You? ................................................................................................................... 12

What ‘Happened’ to You? .................................................................................................................... 16

Validation ............................................................................................................................................ 19

Controversies of Studying Trauma and Trauma-Informed Educational Practices ...................... 20

Definition of Terms ............................................................................................................................ 25

Summary ............................................................................................................................................. 26

Chapter II: Review of Literature ........................................................................................................... 27

History of Trauma Research and Childhood Trauma Research ....................................................... 27

Previous Approaches to Trauma Intervention ..................................................................................... 30

Impact of Trauma on Students ........................................................................................................... 32
Assessing and Documenting Trauma

Trauma-Informed Educational Practices

The Role of Teachers as Trauma Identifiers and Trauma Interventionists

Construction and Adaptation of the Trauma-Informed Educational Practices

Description of the Trauma-Informed Educational Practices

Connecting with Students to Create Trusting and Comfortable Relationships

Promoting a Predictable and Consistent Classroom Environment

Encouraging Students to Think Positively

Interacting in a Thoughtful Manner with Students

Staying Calm and Expecting Unexpected Responses

Limiting Exclusionary Practices

Finding Ways to Use Positive and Supportive Feedback

Creating Islands of Competence for Students by Using Positive Praise

Theoretical Framework

Summary

Chapter III: Methodology

Description of the Setting

Description of Participants in Quantitative and Qualitative Data Collection

Research Design

Research Questions
**Historical Trauma and Trauma-Informed Research Designs** .................................................. 58

**Convergent Mixed Method Design with Trauma and Trauma-Informed Research** ............. 60

**Survey Design** .................................................................................................................. 60

**Case Study Design** .......................................................................................................... 61

**Instrumentation and Data Collection Procedures** ............................................................ 64

**Design Integration** ............................................................................................................ 64

**Quantitative Teacher Surveys and Checklist** .................................................................... 67

**Teacher Checklist** ............................................................................................................ 68

**Qualitative Teacher Interview** .......................................................................................... 69

**Triangulation** .................................................................................................................... 70

**Threats to Validity and Reliability** .................................................................................... 71

**Analysis and Coding Procedures** ...................................................................................... 73

**Analysis for Teacher Perception of the Effectiveness of the TIEP Strategies** ................. 73

**Analysis for Teacher Perceived Usage of the TIEP Strategies** ........................................ 74

**Analysis for Teacher Perceived Implementation of the TIEP Strategies in the Classroom** 74

**Analysis for RSQ 3 Qualitative Teacher Interview Qualitative** ....................................... 75

**Convergent Analysis** ........................................................................................................ 75

**Summary** ............................................................................................................................ 76

**Chapter IV: Results** .......................................................................................................... 77

**Demographics and Teaching Experience** .......................................................................... 80
Study Results........................................................................................................................................85

Data Collection and Analyzation for Research Sub-Question 1: Teacher Perception of
Effectiveness of the TIEP Strategies ....................................................................................................85

Teacher Perceived Usage of the TIEP Strategies ..................................................................................87

Teacher Perceived Implementation of the TIEP Strategies .................................................................89

Creating a Safe and Supportive Classroom Environment ..................................................................91

Connecting with Students to Create Trusting and Comfortable Relationships ..............................95

Promoting a Predictable and Consistent Classroom Environment for Students .........................99

Encouraging Students to Think Positively ..........................................................................................103

Interacting in a Thoughtful Manner with Students ............................................................................108

Staying Calm and Expecting Unexpected Responses ........................................................................110

Limiting Exclusionary Practices ..........................................................................................................113

Finding Ways to Use Positive and Supportive Feedback with Students ........................................117

Creating Islands of Competence for Students by Using Positive Praise .......................................118

Summary ...............................................................................................................................................120

Chapter V: Discussion ........................................................................................................................122

Summary of the Study ..........................................................................................................................122

Discussion of Results ..........................................................................................................................128

Teacher Awareness of Personal Trauma and Bias ............................................................................129

Creating a Safe and Supportive Classroom as a Necessary Foundation ........................................131
Successful Student-Teacher Connection .......................................................... 131
Limitations of the Study .................................................................................. 132
Limitations in Methodology ............................................................................ 132
Limitations in Analysis .................................................................................... 133
Limitations in Generalizability ....................................................................... 134
Implications for Educational Practice ............................................................... 135
Implications for Future Educational Research .................................................. 136
Summary ............................................................................................................ 136
References ......................................................................................................... 137
Appendices ........................................................................................................ 145
List of Tables

Table 4.1. Demographics ............................................................................................................. 82
Table 4.2. Demographics and Certifications: Part 2 .................................................................. 83
Table 4.3. Teacher Perceived Effectiveness of the TIEP Strategies ........................................... 86
Table 4.4. Teacher Perceived Usage of the TIEP Strategies ....................................................... 88
Table 4.5. Average Percentage of Perceived Implementation of the TIEP Strategies .............. 90
## List of Figures

<table>
<thead>
<tr>
<th>Figure</th>
<th>Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1</td>
<td>Research Design Diagram</td>
<td>11</td>
</tr>
<tr>
<td>2.1</td>
<td>Theoretical Framework Diagram</td>
<td>54</td>
</tr>
<tr>
<td>3.1</td>
<td>Convergent Mixed Methods Design Diagram</td>
<td>67</td>
</tr>
<tr>
<td>3.2</td>
<td>Triangulation and Validation</td>
<td>73</td>
</tr>
<tr>
<td>4.1</td>
<td>Research Sub-Questions and Instruments</td>
<td>78</td>
</tr>
<tr>
<td>5.1</td>
<td>Components of Theoretical Framework as Reflected in Study Results</td>
<td>127</td>
</tr>
</tbody>
</table>
Chapter I: Introduction

In 2020, COVID-19 changed life as we knew it. Our daily routines were halted and simple activities like hugging and shaking hands now came with a sinister shroud of danger. In the United States, people were restricted to their homes, schools were closed, and video conferencing became the norm for visiting friends and relatives. Two weeks of uncertainty turned into three months of desolation, in which schools remained closed to in person learning. The 2020-2021 school year did not bring much hope as the virus was not contained and school administrators had to make precarious decisions about how students would receive education. We are now into our second year of the COVID-19 pandemic with new variants of the disease introducing themselves regularly. The uncertainty and unrest surrounding COVID-19 are still extremely prevalent.

The World Health Organization (WHO) defined the coronavirus disease as “an infectious disease” that “anyone can get sick with. . . and become seriously ill or die at any age” (WHO, 2021). WHO’s Director-General, Tedros Adhanam Ghebreyesus, argued that the trauma caused by the COVID-19 pandemic was worse than the effects of World War II, as the pandemic has affected more lives. Ghebreyesus emphasized that the impact of the trauma from COVID-19 will be lasting (WHO, 2021).

The trauma that students experienced during the COVID-19 pandemic adds to the trauma that students may have experienced prior to the pandemic. The Substance Abuse and Mental Health Services Administration (SAMHSA) (2014b) defined trauma as "experiences that cause intense physical and psychological stress reactions" (p. 7). Trauma from events like COVID-19 have affected the lives of people worldwide (WHO, 2021). A single traumatic event or series of traumatic events, such as those associated with the COVID-19 pandemic, can cause experiences
to an individual that are "physically or emotionally harmful or life threatening and that [have] lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being" (SAMHSA, 2014b, p. 7).

These adverse effects, or adverse childhood experiences (ACEs), are events that can be real or perceived, yet both are traumatizing and damaging to children (Blodgett & Dorado, 2016; Cavanaugh, 2016). Before the trauma experienced as a result of the COVID-19 pandemic, almost half of the children in the United States had already experienced adverse childhood experiences (Bethell, 2014). Of these children, around 22% had actually experienced two or more adverse childhood experiences (Bethell et al., 2014; Sparks, 2020). As researchers began to understand the significance of childhood trauma, organizations like SAMHSA’s National Child Traumatic Stress Initiative allowed for research to better understand childhood trauma and create interventions that would be productive for helping children and students affected by trauma (SAMHSA, 2014b). Having initiatives such as these in place, are extremely helpful for studying the effect of the trauma on children and students as a result of the COVID-19 pandemic.

The impact of COVID-19 pandemic-related trauma is not widely part of the academic discussion about trauma. Crosby et al. (2020) stated that individual trauma and collective trauma from the COVID-19 pandemic has had an unparalleled impact on education. Crosby et al. (2020) concurred with the above definition from SAMHSA (2019), that psychological trauma from the COVID-19 pandemic, can be from one or multiple traumatic events that are emotionally or physically difficult. This trauma can cause problems with someone’s ability to function. Crosby et al. (2020) noted the United Nations Educational, Scientific and Cultural Organization (UNESCO) reported that in 2020 the pandemic caused schools to close in 190 countries. This
As a result of COVID-19 pandemic, academic discussion regarding trauma now includes the impact of the trauma from the COVID-19 pandemic. Crosby et al. (2020) stated that individual trauma and collective trauma that has been created from the COVID-19 pandemic has had an unparalleled impact on education. Crosby et al. (2020) concurred with the above definition from SAMHSA (2019), that psychological trauma from the COVID-19 pandemic, can be created from one or multiple events that are emotionally or physically difficult. This trauma can cause problems with someone’s ability to function. Crosby et al. (2020) continued that in 2020, the United Nations Educational, Scientific and Cultural Organization (UNESCO) reported that the pandemic caused schools to close in 190 countries. This closure of 190 schools affected around 55 million Kindergarten through 12th-grade students (Crosby et al., 2020).

According to Crosby et al. (2020), the closure of schools and the unprecedented switch to online or remote learning for students and families created a definite traumatic situation. However, there are more aspects of the pandemic that remote learning and overall living through a pandemic caused for students, including: fears and concerns about illness, health, safety, and a sense of students’ normalcy and consistency being lost (Crosby et al, 2020).

The attention of educators is important when the symptoms of this trauma and adverse childhood experiences expose themselves. According to Bell et al. (2013) and Cohen and Mannarino (2011), educators may be the only adults regularly present in students' lives that can recognize behavior changes indicative of trauma exposure. Furthermore, Bell et al. (2013) noted that early detection of trauma is the only way a student will get treatment and that it is the responsibility of educators to advocate for students. According to Holmes et al. (2014), both the
identification of at-risk students and early intervention by (and support from) teachers have the potential to help students that have experienced trauma.

Honsinger and Brown (2019) addressed that a teacher’s positive demeanor and caring approach to students that have experienced trauma plays a key role in the student's success. The researchers continued to state that the overall success for students often depends upon their teachers' knowledge of trauma-based learning and the use of the tools provided during training in trauma-informed education. Blodgett and Dorado (2016) concurred that teachers have a tremendous impact on children's educational success who have experienced trauma. Thus, to properly recognize the signs of trauma in students, educators need to be trained in appropriate mental health interventions (Reinke et al., 2011), including trauma-informed educational practices.

**Purpose of the Study**

The purpose of this study was to examine Trauma-Informed Educational Practices in the middle school classroom during the COVID-19 pandemic. This study aimed to understand teachers’ perceptions of the effectiveness of Trauma-Informed Educational Practices in the classroom (RSQ 1), teachers’ perceived usage of the Trauma-Informed Educational Practices in the classroom (RSQ 2), and teacher reported implementation of the Trauma-Informed Practices in the classroom (RSQ 3). Finally, this examined themes, similarities, and/or differences in teacher perception and usage that emerged from the collected data. This analysis allowed for a better understanding of the practices that were most and least beneficial for the participants.

**Significance of the Study**

This study is important to better understand how teachers perceived and utilized Trauma-Informed Educational Practices during the COVID-19 pandemic. Almost half of the children in
the United States have experienced adverse childhood experiences and over 20% of these children have experienced more than one adverse childhood experience (Bethell et al., 2014; Sparks, 2020). When students display symptoms of trauma and adverse childhood experiences in the classroom, educators may be the only people in a position to intervene. According to Bell et al. (2013) and Cohen and Mannarino (2011), educators may be the only adults regularly present in students' lives that can recognize behavior changes indicative of trauma exposure. Students see their teachers regularly during the school year and teachers can become systems of support and comfort for their students (Bell et al., 2013). If students feel that they have a safe and trusting relationship with their teachers, they will be more willing allow their teacher to help them (Bell et al., 2013).

The detection of trauma in students is imperative for treating students that have experienced trauma Bell et al. (2013) and Holmes et al. (2014) argued that detection of trauma in students is imperative for treatment. Holmes et al. (2014) further discussed the importance of the teacher not only identifying, but also supporting, the students that have experienced trauma. However, teachers that do not have personal experience with ACEs or experience working with trauma, might not be equipped to help students. Reinke et al. (2011) elaborated that the school setting is an important place for understanding the importance of student mental health. Teachers are often asked to use mental health interventions, which includes Trauma-Informed Educational Practices, in their classrooms. However, without training, teachers perceived that this role fell more to the school psychologist or mental health specialist (Reinke et al., 2011).

Trauma is often individualized and perceived differently by each student. This study allowed for the assessment of student and teacher perceptions of Trauma-Informed Educational Practices. If teachers perceive and reveal that the use of the Trauma-Informed Educational
Practices gives students connection and sense of comfort in the classroom of the studied middle school, then there is an argument for implementation of these practices in a larger district setting.

**Rationale for the Study**

Bell et al. (2013) and Holmes et al. (2014) stated that a teacher's demeanor and responses to a child's real or perceived trauma play a key role in the student's success. They explained that the overall success for students often depends upon their teachers’ knowledge of trauma-based learning and the use of the tools provided during training in trauma-informed education. Blodgett and Dorado (2016) concurred that teachers have a tremendous impact on the educational success of children who have experienced trauma. Thus, to properly recognize the signs of trauma in students and create situations where students can be successful even if they have experienced trauma, educators need to be trained in trauma-informed teaching practices.

**Problem Statement**

The problem that prompted this study was the increase trauma experienced by students during the COVID-19 pandemic. As a result of a lack of training and understanding, teachers may or may not have the tools necessary to break down barriers presented by students that have experienced trauma.

**Research Questions**

The overall research question guiding this study was *How do middle school teachers perceive and use Trauma-Informed Educational Practices to support their students during the COVID-19 pandemic?* I explored this question with the following three sub-questions:

1. How do teachers perceive the effectiveness of the Trauma-Informed Educational Practices?
2. How often do teachers perceive they use the Trauma-Informed Educational Practices in the classroom?

3. In what ways do Trauma-Informed Educational Practices manifest themselves in the classroom?

This study used a convergent mixed method design with three main phases. The first phase of the study addressed Research Sub-Question 1 and used quantitative survey design to explore how teachers perceived the effectiveness of the Trauma-Informed Educational Practices (see Appendix C). Teachers perceived effectiveness was captured using a quantitative survey and a 5-point Likert-Scale rating.

The second research sub-question was addressed with a six-point rating scale that teachers used to report how often they perceived using each of the TIEP strategies in the classroom (see Appendix C). This information enhanced understanding of teachers’ perceptions and ideas about which trauma-informed practices would be the most useful in their classrooms.

The third research sub-question examined the ways in which Trauma-Informed Educational Practices manifested themselves in the classroom (see Appendix D). For a period of 10 days, teachers intentionally used the TIEP strategies in their classrooms. The teachers kept a daily checklist to indicate how often they used the Trauma-Informed Educational Practices. The checklist had open-ended questions to give teachers space to reflect on the use of the practices. This data helped to understand the types of trauma-informed practices teachers used in the classroom and the general context in which they were used. After completion of the use of the Trauma-Informed Educational Practices in the classroom and teacher checklists and open-ended questions, some of the teacher participants were asked to participate in a semi-structured
qualitative interview. These interviews allowed for a deeper look at the teachers experiences with using the Trauma-Informed Educational Practices.

**Rationale for the Methods**

This study was conducted at a public middle school in the mid-Atlantic region of the United States. The teacher participants taught core subjects (English/Language Arts [ELA], History, Math, or Science) at the middle school.

This study used convergent mixed methods that combined survey and case study designs. In this design format, both qualitative and quantitative data are collected, and then the results are merged (Creswell & Plano Clark, 2018).

The use of survey, checklists, and interviews aimed to capture the experiences and perceptions of teachers, when Trauma-Informed Educational Practices are used in the classroom. This study contains case study and for the context of this study *case* is defined as individual classrooms (teacher and their students), using both Robert Yin and Sharan Merriam’s perspectives on case study. Yin stated that a *case* is “a contemporary phenomenon within its real-life context, especially when boundaries are not clear” (Yazan, 2015, p. 148), while Merriam noted that a *case* is “a thing, a single entity, a unit around which there are boundaries” (Merriam, 1998, p. 27; Yazan, 2015, p. 148). Yin’s approach discussed that boundaries between the issue being studied are not clear and offer the researcher minor control (Yazan, 2015). Merriam’s approach noted the *case* studied can be a person or a group which can have boundaries that allow the researcher to study only a particular situation. For the purpose of this study, Merriam’s definition of case will be used for this study, as to study the case of this middle school, the research must be bound to two things: (a) teachers in the middle school that are using the
Trauma-Informed Educational Practices with their students and (b) students that are in the classes where teachers are using the Trauma-Informed Educational Practices.

For the purpose of this case study, Yin’s approach will be used for analyzing and understanding data. Of the three case study researchers, Yin, Stake, and Merriam, Yin (2018) is the only one who agreed that both quantitative and qualitative data have a place in a case study (p. 62). When a researcher does not have to choose between only a quantitative method or a qualitative method they are “freed…and the relevance and reality of a broad variety of ‘mixes’ emerges” (Yin, 2003). Yin (2018) discussed that mixed-methods research gained attention from researchers. He to report that using mixed methods in research can make it more difficult than only using one method, but that mixing methods can “enable [the researcher] to address broader or more complicated research than case studies alone” (p. 64). Merriam did not vehemently deny the use of quantitative data, but she does address the flaws with using quantitative data. Stake’s methods were not an appropriate match for this study because he attempted to have quantitative data removed from being used in case studies. Therefore, Yin is the only of the three researchers that embraces equal importance in using both quantitative and qualitative data within a case study (Yazan, 2015). This research studies the case of a where teachers are using Trauma-Informed Educational Practices. By aligning this study with Merriam’s perspective, I can define boundaries to allow for a clearer picture of what is actually being studied for this specific research.

Yin favored specific and detailed plans for every part of the data collection process. Yin also stated the importance of the combination of quantitative and qualitative data (Yazan, 2015). The initial quantitative and qualitative data will be analyzed separately, but they will be merged for a more thorough understanding of the results later in the study.
The sampling and qualitative data procedures will follow the approach from Merriam. Merriam's suggestion is to have completed the sampling of purposeful candidates before gathering data (Yazan, 2015). This approach does not align with Stake or Yin, as Stake does not describe approaches for sampling and Yin prefers sampling to be done after the case study is designed and is the only one of the three researchers that recommended using Merriam’s ideas for data collection that consists of using various evidence sources (Yazan, 2015).

I analyzed quantitative data and qualitative data separately, but then merged the results for a deeper explanation and possible new angle from which to view the study (Creswell & Plano Clark, 2018). I hoped to gain more profound and more specific insight on exactly how the Trauma-Informed Educational Practices affected these students. Through these means, there is also a hope to enhance the current research. See Figure 1 for a diagram of this study’s design.
Figure 1.1

Research Design Diagram

Note. Figure 1.1 illustrates the research design for this study.

Positionality

One instrument that is frequently used as a screening measure for trauma is the Adverse Childhood Experiences (ACEs) (Felitti et al., 1998). The ACEs was introduced in 1998 in a study conducted by Felitti et al. The measure is a 10-item survey intended to help recognize experiences related to personal, physical, sexual, and verbal abuse and neglect. My interest in treating children who experienced trauma came from my realization that I have experienced childhood trauma. After years of telling myself that I must be remembering things incorrectly and that I was just exaggerating, I took the ACEs. I have an ACEs score. My trauma actually happened.

It was not until I took a class for this doctoral program, that included a component on
trauma, that I became aware I had an ACEs score. Our professor introduced trauma by explaining the delicate nature of the work we were studying and that it could possibly trigger emotions or memories for each of us. When I took the ACEs there were quite a few boxes I was able to check off. While my experiences are not a direct part of this study, these experiences allow me to have a more purposeful lens into the study. It also allowed me to better understand trauma and the effects it can have on children if the trauma is left undetected or in my case, untreated until adulthood.

I have always been told my memory is off. I remember things more if they leave an emotional impact on me. If you asked me to name all of my 6th grade teachers, I probably couldn’t. However, if you asked me to name the 6th grade teachers that were either kind or very unkind (based on my perception at the time), I would be able to do that. I can even tell you the name of my kindergarten and first-grade teachers that I remember making me feel special even though I was leaving the end of first grade early. It doesn’t mean the other teachers weren’t good, it just means that they were not someone that invested time and interest in me personally. If you ask me to recall an event from my childhood, I most likely will only remember it if it had either a very positive emotional effect on me, or if it had a very negative emotional effect on me. Details like what kind of car someone drove or the street numbers of a house, are usually clouded over by the more emotional times from my childhood.

What’s ‘Wrong’ with You?

I have been told that I was not an easy child, and I own that. I struggled (and still do) with ADHD, anxiety, and OCD. I am a verbal processor, so in order to answer difficult questions, I have to verbally say my answer to process what I am saying. I would constantly look like I was talking in class and get in trouble, when I was really just “verbalizing” my answer to make sure it
made sense. I was (am) opinionated, but I also am learning to be okay with being wrong.

I would often bring up childhood situations that were traumatic for me and ask later why they happened or what I had done to make them happen. As a victim of trauma, it had to have been my fault if someone was going to verbally, mentally or sexually abuse me, right? No one who was supposed to love me would hurt me for no reason, right?

As a teenager, when anytime I had the courage to bring up something I’d experienced or a memory I had that was traumatic, regardless of who I told- the response was always that I was making things up. I started to believe that I must be making things up and twisting and manipulating the truth to make others look bad, because I obviously wanted to hurt them. I was told that I had a distorted memory of the facts. The people telling me these things were people I trusted enough to confide in. People that were supposed to love me, so how could they be wrong? I would cry daily for multiple reasons. Sometimes the trauma was arguments, sometimes it was feeling rejected, sometimes it was more. I would often cry leaving certain people that I loved, because my heart was breaking with a warped sense of loyalty that created a severe separation anxiety. When friends went to my middle school counselor to share that they were worried about me because I seemed really sad and depressed. I thought I was hiding it well. If I started to cry during the school day it was because someone said something rude, or particularly when something happened that made me feel rejected or unwanted, it triggered my traumatic experiences. I would do everything I could to squash the buildup of tears that were getting dangerously close to my eyes, tears buried deep inside with the truth, until I could get into a bathroom stall, sit down, and cry. I’d stopped eating and once soccer season was over, I just moped around school. My mood only lifting on rare occasions when I interacted with my friends. The counselor called me in and sked what was going on, but I didn’t want to tell her or anyone
about what I was going through. After all, it was my fault and I deserved it. Even my middle
school counselor told me I had to fix myself and be more respectful. I was told that if I wasn’t
better behaved, child services would come to take me way, because I was ruining my family.
Compounding the ideas that child services would to take me away because I had single-handedly
ruined my family. I didn't know what else I could do to fix myself, so I could be normal like
everyone else and be a good kid and a nice kid and, most importantly, a respectful child. That
night, I sat and wrote a list in my diary titled, “What to do to be a better kid.”

The counselor called home. I sat there staring at my shoes. I’ve already said I was a
difficult child, and I knew the counselor would just get mad at me too because I was so difficult,
negative, and disrespectful. When she hung up the phone, she told me that she was shocked at
the description of my behavior. For a second, I thought that maybe the counselor was shocked
because it wasn’t true. But then the counselor said that she couldn’t understand how I could
present as such a nice and kind child at school and was so horrible at home. I didn’t really say
anything, because the counselor must have been right. She had experience in this and had gone to
school to learn how to deal with these situations. The counselor told me that I needed to fix
myself and be more respectful. She didn’t really care what happened to me, she just focused on
what was wrong with me.

I left her office, trudged to my classes, and in each one class at waiting for someone to
come and take me away, because I was a horrible person. When I arrived home that day, I was
told that the counselor called and said I was disrespectful and that I was no longer allowed to
spread lies about people that loved me. I just didn’t know what else I could do to fix me so I
could be normal like everyone else, a respectful child who helped her family and friends instead
of hurting them and meeting the needs of her family. That night, I sat and wrote a list in my diary
I understood from an early age that as a child I needed to respect and help my elders. I understood from an early age that the stress in my family was pretty much my fault. At the center of every argument or issue was something I had done, or something I should have done, so that the argument would have never happened. When those around me started to experience similar traumatic effect, I made myself a bigger target. I was angrier and actually caused trouble, because I didn’t want anyone else in my life to experience it. At this point I was arguing with everyone in an effort to protect myself from pain. Only when I knew that I had exhausted any demons, would I take out my journals and write. By fighting the demons for everyone else, the narrative shifted. I went from being “the problem” to being “the aggressor.” Therapists were brought in to work with me with the understanding that my behavior was uncontrollable. The guidance counselor called me back in and said that if I couldn’t control my behavior I would have to be removed from my house and school. She has never saw the behavior, but she knew it to be true. The counselor read me a list of things that I had supposedly said or done. When I said I didn’t know what she was talking about, the counselor replied, “That’s what everyone said you would say.” Case closed. I was now the official problem. Therapists came to the house and told me that if I didn’t listen my parents they could kick me out of the house. One therapist met with my family and then met with me privately. I still remember her name and the pungent lemon smell of her office, because it was an emotional experience. She told me I was not the monster that I believed I was and we discussed how difficult life could be. I felt what I thought was relief and maybe hope that things could change, that I could change. However, I also questioned her motives, I didn’t trust anyone anymore. I had been told for so many years that I was the source of the problem, so who was this person now saying something different. When we all sat down
together, she told me that I needed to be more respectful and better behaved. My breath, heart, and world all left me at once. The bottom dropped out, it always does. The flimsy, flickering candle of hope I was holding on to that someone finally understood me, was extinguished. I stared at the therapist. I asked her what had happened. She raised a hand to stop me from talking and said that she wished us all the best.

Years later, as a young adult, I called the therapist at her office. I wasn’t mad. I knew that this was my fault, everything was my fault. I just wanted to apologize to her for being that awful of a child that she couldn’t work with my family. When she picked up, I said that she probably would not remember me, but I said my name. She stopped me and immediately started to cry. When she found her words, she told me that she hadn’t known what to do. The two sides of the coin were so far apart that she had to go with one…and that side was not mine. She had deep regret for her decision. I forgive her though, it was my fault anyway.

*What ‘Happened’ to You?*

There is so much more I could write, but with only my memories and diaries as proof, I wouldn’t want to bore you with lies. When I was on my own, I started therapy. I didn’t want to, but when I went to college, I started having horrific anxiety and panic attacks. Receiving real or perceived threats about what will be taken from you or what will hurt you, can “result in a brain that exists in a persisting state of fear (Perry & Hambrick, 2008). These attacks lasted for weeks. I would wake up in my dorm in the morning and feel ok. . . for maybe five seconds. . . and then the spiral of dread and doom would set in. My thoughts would race worrying about anything and everything. Was my family ok? Would someone die that day? What if someone in my family got in a car accident? What if something happened to the girl I saw eating an apple as I looked down on the quad? What if she choked on her apple? What if I couldn’t’ save her? It never ended.
Then at night the panic would set in. I would fall asleep, over exhausted from the anxiety and worry, only to wake up a few hours later short of breath and afraid I was going to die. I would sit on the floor next to my bed and just wait for the panic to go. Freeze, flight or fight... I just froze like that until the panic eventually subsided and I fell asleep. Only waking up stiff and cold on the floor, to enjoy the five seconds of peace before the dread set in and the cycle began again.

Anxiety was not something discussed or treated often in the early 2000s. I went to the nurse the next day, only to find that my panic was looked at by many as an effort to get out of tests and manipulate others.

I am thankful for the friend who finally realized something was wrong and a few weeks later showed up at my dorm. She took me back to her dorm an hour away. She put on all of my favorite songs and listened to the verbal vomit of anxious thoughts spewing out of my mouth. I was so out of it, from lack of sleep, stress and emotion, and I don’t know the exact steps that led to it, but my friend took me to psychiatrist that was well respected. When she told me where we were going, I thought that I was in trouble. I apologized and said I would just leave because I was making their lives difficult because I was “the problem.” My friend didn’t listen, and she made me get in the car and took me to what was the beginning of a very long and twisted journey unwinding the destruction that my trauma had played on my mind, heart, and soul. I am still on this path to truth, acceptance, understanding, self-worth, self-love, and self-respect.

This new psychiatrist did not ask me what I had done wrong or what was wrong with me. She asked me to tell her what had happened to me. I didn’t know where to start. Hadn’t I been the cause of all of these horrible things? Was there a chance that these things had actually happened to me? I explained the feelings I was having amidst my self-loathing sobs. She listened and listened, and then she simply said, “You have panic disorder. We can work on this. It’s
going to be ok.” I felt something similar to the relief and hope I had felt years before when the
therapist had told me she would help me fix things and talk to my parents. But then she hadn’t,
so why would this situation be any different. I didn’t trust anyone because they always let me
down, so why would this person come through for me. I wasn’t worth it anyway. This
psychiatrist, my psychiatrist, was the first medical professional to validate that I wasn’t going
crazy and to help me work through the things that had happened to me. I didn’t tell anyone about
my visit to the psychiatrist or the medicine she had prescribed for the panic. I was deathly afraid
they would call and tell her about all of the horrible things I had done and that just like everyone
else who abandoned helping me, my psychiatrist would leave too. I moved into my friend’s dorm
and slept on her floor, because I still could not deal with the real world. I questioned what was
true, what was false, who was being honest to me, who was lying to me. . . the downward spiral
was endless. .I remember one day, I followed one of my family members around the house
incessantly. I could not be in a room alone, because I started to panic. I tried to distract myself
with TV, books, running…anything. The family member eventually asked me to stop having a
pity party and act like an adult. I don’t blame them; I must have been incredibly annoying.
Borrowing courage from my psychiatrist, I took a semester off to work on myself. I was willing
to get a job, help around the house, and do whatever I could to help. They didn’t let me. That was
when the therapists started to come to the house. One even said that I could live at home, but the
very moment I did something disrespectful, I was done. I knew at that moment I had to leave. As
sad and difficult as it was, it was the only way my family could heal. Looking back, I think
everyone was trying their best to get through a situation that none of us understood. I couldn’t
say at home, it was too much for everyone. I don’t think anyone understood what I was going
through. Panic and anxiety weren’t real, and if they were, it was other people that dealt with
By now I had been working with my psychiatrist twice a week and was slowly starting to see things differently. She understood my panic and anxiety. She was a medical professional that told me I was going to be ok and that we would figure it out. Just hearing that brought back that spark of hope.

**Validation**

I was interested in this lesson on trauma because I wanted to help my students. As I listened to the professor’s warning about triggers, I thought that I wouldn’t have to worry. I had lost a great-grandmother and had some sad things happen, but that wasn’t really trauma… until we took ACEs. I answered yes to some of the questions but didn’t think anything of it. When I got to the end of the ACEs and followed the instruction of tallying up my score, the number blurred as my eyes burned with the cleansing sting of tears. Tears for the child I was, the child I still held on to, and the adult I was trying so hard to become. I had an ACEs score. I had suffered trauma. These things had happened to me. I felt a feeling of validation that was almost euphoric. This really had happened to me. I wasn’t delusional.

The more we studied about the adverse effects of childhood trauma, the more I learned about myself. I felt my professor was explaining my story and why I felt the way I did and acted the way I did. The effect of my traumatic experiences made my “stress response oversensitive, overreactive and dysfunctional” (Perry & Hambrick, 2008). It started to make sense. . . Why I felt like I did not deserve love. Why I self-sabotaged the good things in myself, because I did not feel worthy. Why my anxiety manifested into all aspects of my life, because I did not have the stable foundation of self-worth and respect. Most importantly, that trauma, especially intergenerational trauma, is passed on to children without the complete understanding from the
I know that there will be people that doubt my traumatic experiences, and perceive that this obviously never happened. I’ve learned that’s ok. Maybe one of those people experienced their own trauma from the same situation and thus their perception is completely different. My trauma is real and therefore valid. My trauma is my truth in all its many forms. The events happened, and this is my perception of the beautiful disaster that was is my experience. All I have are my memories and my diaries.

It took many years, but I own my trauma and accept it as real. The debate ends there. My perception about my life and my trauma is the one that counts here. The same goes for all of the children and students that we work with that do not feel validated and feel as though they don’t know who to trust and what to think (Blodgett et al., 2016). Their trauma is real. Their trauma is a part of them, but with appropriate interventions, like Trauma-Informed Educational Practices, it does not have to define them or encompass their lives. Without such interventions, the trauma continues and becomes generational trauma. This is the trauma I experienced. It is hard to understand and accept your own trauma, if no one ever helps you change your narrative from crazy to authentic. If someone is not fortunate to have someone intervene, they grow up believing that they are the problem until they can’t take it anymore and have to make someone else the problem (Canale et al., 2021). Hence, how I became the problem. The people traumatizing others with words, mental games, or worse, might not even be aware that they are doing this. . . because they know no different.

**Controversies of Studying Trauma and Trauma-Informed Educational Practices**

Interventions like Trauma-Informed Educational practices could have made a difference for myself and many others; however, in the past there have been struggles with implementation.
In regards to Trauma-Informed Educational Practices, Chafouleas et al. (2021) stated that there are still many difficulties with implementing interventions and care for students who have experienced trauma. As previously mentioned, the researchers discussed the original ACE study (Felitti et al., 1998) as a reason for government and national recognition of trauma and its impact on individuals. However, the researchers argued that even with over a decade of research on trauma, the answers are still lacking (Chafouleas et al., 2021).

When an educator’s approach to trauma-informed care is not appropriate, there is a risk of re-traumatizing the student (Chafouleas et al., 2021). Venet (2019) suggested the role of educators when working with students that have experienced trauma is to provide a safe and supportive classroom environment. The researchers explained that establishing this safe environment, developing a positive educator-student relationship is very important. Venet (2019) argued that most educators are not trained mental health professionals. Thus, the educator’s role is not to advise or offer any mental health treatment for the student (Venet, 2019), but to connect the student with a counselor or school mental health specialist for dealing with the actual traumatic event.

According to Venet (2019), educators often want to be a trauma detective (p. 2) and know specifics about the trauma incurred by the student in order to deliver trauma-informed education correctly. Approaches to trauma-informed education such as connecting with students, creating a comfortable environment, and increasing positivity can happen without knowing the details of the student’s trauma. Thus, teachers should refrain from directly questioning students about past traumatic experiences to avoid adding more stress or triggering emotions related to the trauma. One way to avoid retriggering a student’s trauma is to have clearly defined boundaries and roles so the teacher is not inclined to start to mesh into the role of a non-qualified
psychologist. This enmeshment will only confuse students and alleviate any feelings of safety and connection that have been fostered previously (Venet, 2019).

Even with warnings about the need for boundaries for teacher so they do not play the role of mental health specialists, there is seem research that says otherwise. Minahan (2019a) discussed Trauma-Informed Educational Practices as important interactions and interventions that are appropriate for use by the teacher who is a non-medical health professional. researcher discussed the need for teacher training in these practices so that student intentions are not misinterpreted as negative when they are simply that of a student struggling with trauma. The aforementioned explanations of the role of the teacher is appropriate. However, the researcher mentioned that there are teachers that have a “knack” for helping students, and this teacher becomes apparent after the student has been in trouble with many of their teachers, except for one who has built a relationship with the student. Minahan then discussed student success can be dependent on their teacher being trauma-informed and that not all students are lucky enough to have “a teacher with a knack for meeting mental health needs” (p. 57). Perhaps, it is just a poor choice of wording, but I have included other articles from Minahan in my research, and this article could leave teachers feeling that they want to be that special teacher who has the “knack” Minahan mentioned. Minahan (2019a) continued that this misunderstanding could lead teachers into trying to help children in a way that is beyond their scope of reference appropriate resources of the mental health professionals and counselors if there is a situation where a student begins to discuss the specifics of their trauma with the teacher.

I continued to research this idea to better understand what and why certain research did not vehemently ban teachers as mental health professionals and am very interested in my findings. Rothi et al. (2008) discussed the role of teachers as observers of students’ mental
health. The researchers stated that there was an expectation that teachers should have a role as Tier 1 mental health professionals. Tier 1 would be the least restrictive or invasive tier of mental health intervention for a student with, for example, a Multi-Tiered System of Support (MTSS) in a school. The researchers quoted the Department of Health as stating that teachers are responsible for the initial referral to an MTSS or support team (Rothi et al., 2008).

As previously mentioned in my research, Bell et al. (2013) and Cohen and Mannarino (2011), agreed that educators may be the only adult that a child sees on a regular basis that can recognize behavior changes indicative of trauma exposure. Bell et al. (2013) continued that detection of trauma is the only way a student will get treatment and that it is the responsibility of educators to advocate for students. However, neither Cohen and Mannarino (2011), or Bell et al. (2013) referred to the educator as a mental health specialist, but rather stressed the importance of the educator referring the student to the mental health professional or counselor. These ideas seem clear-cut and do not muddy the waters of educators treating or working with students in a capacity of which they are not trained.

If there are not enough mental health professionals to work with students that have experienced trauma and educators need to take on some duties of mental health professionals they will need to be adequately trained (Rothi et al., 2008; Minahan, 2019a). Rothi et al. (2008) continued that the training teachers receive does include a plethora of child development skills, yet there is a large question as to whether it is enough for teachers to be able to truly understand student mental health. While the researchers found that teachers were not opposed to receiving the mental health training necessary to allow them to further assist their students, most teachers did feel it was necessary so as not to re-trigger or cause further trauma to students.

These boundaries are even beneficial for protecting teachers from the “cost of caring” or
stress that comes from working with students that have experienced trauma (Venet, 2019, p. 3). They will prevent teachers, though unintended, from living vicariously through student trauma (Venet, 2019). The National Child Traumatic Stress Network (NCTSN) agreed that the act of listening to a child tell their traumatic story can affect an adult’s emotional well-being and cause secondary traumatic stress for the educator (NCTSN, 2011). The need for boundaries and educator self-care is essential to making sure the student is always receiving the most effective help (NCTSN, 2011). I have an ACEs score, after going through adverse childhood experiences. When I took the ACEs there were quite a few boxes I was able to check off. While my experiences are not a direct part of this study, these experiences allow me to have a more purposeful lens into the study. It also allowed me to better understand trauma and the effects it can have on children if the trauma is left undetected or in my case, untreated until adulthood.

It was not until I took a class for this doctoral program, that included a component on trauma that I became aware I had an ACEs score. Our professor introduced trauma by explaining the delicate nature of the work we were studying and that it could possibly trigger emotions or memories for each of us. Our professor made our class a safe and comfortable environment and told us that if we needed to take a break at any time, we could.

I have always been told my memory is off. I remember things more if they leave an emotional impact on me. If you asked me to name all of my 6th grade teachers, I probably couldn’t. However, if you asked me to name the 6th grade teachers that were either kind or very unkind (based on my perception at the time), I would be able to do that. I can even tell you the name of my kindergarten and first-grade teachers that I remember making me feel special even though I was leaving the end of first grade early. It doesn’t mean the other teachers weren’t good, it just means that they were not someone that invested time and interest in me personally.
If you ask me to recall an event from my childhood, I most likely will only remember it if it had either a very positive emotional effect on me, or if it had a very negative emotional effect on me. Details like what kind of car someone drove or the street numbers of a house, are usually clouded over by the more emotional times from my childhood.

**Definition of Terms**

Below is a list of the definition of terms used most frequently throughout this study:

*Adverse Childhood Experiences (ACEs) –* events that can be real or perceived but are both traumatizing and damaging to children (Blodgett & Dorado, 2016, p. 4; Cavanaugh, 2016, p. 41).

*Trauma –* the experiences that cause intense physical and psychological stress reactions (SAMHSA, 2014b).

*Trauma-Informed Educational Practices (TIEP) –* proactive and responsive teacher practices and interventions that allow students to feel safe, known, and cared for in the classroom (Minahan, 2019b).

*Trigger Warning –* notifying an audience or participant(s) that the information they are being given can be emotionally troubling (Jones et al., 2020).
Summary

The research surrounding COVID-19 and the effect of its trauma on students is only starting to emerge. There is also a lack of research supporting the need for Trauma-Informed Educational Practices in middle school classrooms. This study aimed to understand how Trauma-Informed Educational Practices manifest for students and teachers in the classroom, with the hope to inform how teachers can use these practices for students to thrive in positive, safe, and connected classrooms.
Chapter II: Review of Literature

In this chapter, I will discuss an extensive review of the literature necessary for this study. First, I will include a history of trauma research and childhood trauma research. Then, I will then discuss the impact that trauma, including trauma from the COVID-19 pandemic, has on students. Finally, I will describe the role of teachers as identifiers of childhood trauma and the importance of trauma-informed educational practices. This chapter concludes with an explanation of the theoretical framework used for this research.

History of Trauma Research and Childhood Trauma Research

Before the publication of The Adverse Childhood Experiences (ACE) study (Felitti et al., 1998), most research on trauma mainly focused on a single type of childhood abuse and its traumatic effects on an individual. Chafouleas et al. (2016) explained that the ACEs differed from previous studies on trauma because the ACEs studied the impact of multiple types of childhood abuse and their traumatic effects on an individual. In 1998, Felitti et al. (1998) explored correlations between patient health problems as an adult and their exposure to trauma as a child (Chafouleas et al., 2016). They designed the ACE survey as the instrument for this study.

The ACE survey revealed that more than 9,500 patients at Kaiser Permanente's San Diego Health Appraisal Clinic had experienced childhood trauma (Felitti et al., 1998). The questions in the ACE survey were categorized under abuse that is psychological, physical, or sexual; witnessing violence against a mother; and having mentally ill, suicidal, imprisoned, or users of illegal substances living in the same household (Felitti et al., 1998). The ACE study comprehensively evaluated and addressed multiple types of abuse which increased literature to understand childhood trauma (Felitti et al., 1998; McLaughlin et al., 2013; SAMHSA, 2014b; Chafouleas, 2016; Alvarez, 2017). The ACEs were a catalyst for increasing researcher attention
on trauma and how trauma impacts individuals (Chafouleas et al., 2021). As the original purpose of the ACEs research was to study the medical effects of childhood trauma on adults, Chafouleas et al. (2021) recognized a need for further studies to enhance the understanding of adverse childhood experiences and childhood trauma (Felitti et al., 1998). This attention encouraged other researchers to study and add recognition to the epidemic of childhood trauma (Chafouleas et al., 2019).

In subsequent years, other researchers have attempted to study childhood trauma using similar tactics. McLaughlin et al. (2013) use a questionnaire, similar to Felitti et al. (1998), to gather quantitative data and study exposure to childhood trauma. McLaughlin et al. (2013) also added a qualitative aspect to their research by conducting face-to-face interviews with their participants. However, the interview questions also mirrored the interview questions in Felitti's study. The McLaughlin study focused on the effects that childhood trauma had on Post Traumatic Stress Disorder (PTSD); and thus, McLaughlin et al. (2013) stated they were studying Potentially Traumatic Experiences (PTEs) to replace the Adverse Childhood Experiences documented by Felitti et al. (1998) While Felitti's ACE study surveyed adults, the McLaughlin study questioned 6,483 adolescents between the ages of 13-17.

To find their sample population, McLaughlin et al. (2013) focused on families that had taken part in the National Comorbidity Survey Replication (NCS-R), which studied mental disorders in adults. Self-administered questionnaires and interviews were the main instruments used in these studies. One parent or guardian of each child in the study took the questionnaire. McLaughlin et al. (2013) conducted face-to-face interviews with the adolescents. These interviews were similar to the Composite International Diagnostic Interview (CIDI), which the WHO organization uses to study mental disorders. The beginning questions on the self-
administered questionnaires asked about exposure to interpersonal abuse by someone the adolescent knew, exposure to accidents and natural disasters, and exposure to someone else's death (McLaughlin et al., 2013).

Once the findings were sorted and analyzed, McLaughlin et al. (2013) concluded that if a participant was exposed to one category of trauma, they were likely to have been exposed to another category of trauma. These findings were similar to Felitti et al. (1998) in that there were relationships between the participants and multiple categories of childhood trauma. The findings indicate that interventions and trauma-informed educational practices are necessary to combat the effects of the trauma experienced (Felitti et al., 1998; McLaughlin et al., 2013; SAMHSA, 2014b).

To understand what practices best combat the adverse effects of trauma experienced by students, educators need to have trauma-informed educational practices to use in the classroom. However, the research and data on specific practices is lacking. Thomas et al. (2019) stated that research regarding trauma-informed training and education for teachers has much to be studied. Thomas et al. (2019) agreed with the statement from Alvarez (2017) that there is a “noticeable gap in the educational research literature specifically focused on trauma and documenting effective educator practices” (Alvarez, 2017, p. 1).

Alvarez (2017) described the previously-mentioned trauma studies such as the ACEs study by Felitti et al. (1998) as contributing to the understanding of childhood trauma even though the ACEs dealt with trauma from a medical perspective or juvenile justice issues. Alvarez (2017) found that the consensus among many researchers is that trauma studies that originated with student health and behavior (juvenile justice) are now interconnecting with education. The
need for educators to play a key role in identifying and understanding the effects of trauma in their students and using appropriate interventions is very important (Barrett et al., 2012).

These findings are consistent with research of Barrett et al. (2012) that studied trauma that students experienced from Hurricane Katrina. Barrett et al. (2012) spent much time studying the natural disaster, which had some similarities to the effects of the COVID-19 pandemic on students. The aftermath of the hurricane left students feeling isolated, without in-person education, and in some cases finding new homes as a result of a lack of family income. Barrett et al. (2012) concluded that schools played a large role in creating a sense of normalcy for students, due to the large portion of the day that children spend at school. Barrett et al. (2012) discussed that some administrators wanted to help but could not as a result of budgets restraints. There were also some school personnel that posited that students did not need special attention after the hurricane, because everyone had suffered from the hurricane (Barrett et al. 2012). The researchers then countered this point by sharing that they did find individual educators who sought out students and families at home to offer support and help (Barrett et al. 2012).

Previous Approaches to Trauma Intervention

The study of trauma can be noted as early as with soldiers in American Civil War which took place from 1861-1865. The reactions of the soldiers to the traumatic stress of the American Civil War were labeled in medical records as “soldiers’ heart” and “nostalgia” (SAMSHA, 2014, Appendix C). With the passing of each subsequent war (e.g., World War I, World War II, and the Vietnam and Korean Wars), psychologists and psychiatrists studied the trauma of soldiers deeper. By World War II, soldiers were being screened for symptoms of traumatic stress which were at the time, considered a sign of weakness and could deem someone ineligible to fight. SAMHSA (2014b) identified more terms that emerged in an effort to explain or treat trauma.
“Battle fatigue” recognized the need for a soldier to have a period of rest in between battles and “shell shock” was used to describe the traumatic after effects of explosions and bombs. Vietnam soldiers were introduced to the idea of meeting in groups and discussing their trauma as a way of treating and understanding trauma.

This work with soldiers led to a new awareness of the effects of trauma, and the medical diagnosis of Post-Traumatic Stress Disorder (PTSD) was born in 1980 (Berger, 2004; Salasin, 2011). While Salasin (2011) argued that the PTSD diagnosis did not accurately describe every type of trauma, it was still important as a starting point for exploring more medical conditions relating to trauma. Another benefit of the PTSD diagnosis was that it allowed for more research on trauma. Once more research began, experts realized that PTSD did not apply only to soldiers. Cases became apparent for non-military patients who had experienced horrific situations such as being forced to flee their home to avoid death and even survivors of national disasters.

In 1998, Dr. Felitti and Dr. Anda were studying their patients and realized that might be a correlation between health problems later in life and being exposed to trauma as a child (Chafouleas et al., 2016). As previously mentioned, this study became the ACEs study and opened many doors for understanding and analyzing childhood trauma (Felitti et al., 1998; SAMHSA, 2014b; Chafouleas 2016). In 2001, SAMHSA funded the National Child Traumatic Stress Initiative to increase understanding of child trauma and develop effective interventions for children exposed to different types of traumatic events. Perfect et al. (2016) discussed that research has led SAMHSA to highlight the importance of identifying and understanding symptoms of trauma and how they affect the individual. Symptoms of trauma can create issues relating to behavior, emotional regulation, social skills and social interaction, and cognition and memory (Perfect et al., 2016). These symptoms of trauma can create issues for students that
affect school performance by including learning struggles, increasing behavioral issues, and even decreasing school attendance (Perfect et al., 2016). Both Perfect et al. (2016) and SAMHSA agreed that recognition and assessment of trauma and the symptoms of trauma is of utmost importance for student success (Perfect et al., 2016).

**Impact of Trauma on Students**

As mentioned in Barrett et al.’s (2012) study, the natural disaster of Hurricane Katrina had lasting traumatic effects on students. Phelps and Sperry (2020) noted a connection between the traumatic effects of the COVID-19 pandemic and the children who lived through Hurricane Katrina. Phelps and Sperry (2020) expressed concern that a disaster such as Hurricane Katrina not only adds problems for children, but that it can make pre-existing problems and trauma worse. There is no doubt that the COVID-19 pandemic left a remarkable amount of trauma on our society (WHO, 2021). The World Health Organization’s Director-General, Tedros Adhanam Ghebreyesus, stated that the COVID-19 will be a “mass trauma [that] affects communities for many years to come” and that there is a need to address the mental health trauma that has been caused by COVID-19 (WHO, 2021).

Phelps and Sperry (2020) discussed how children and students with trauma are coping as a result of the COVID-19 pandemic and identified that the COVID-19 pandemic added an intense amount of financial and emotional stress on families. Phelps and Sperry (2020) stated that this increased stress and at home makes focusing on academics and cognitive functioning much more difficult for students (Phelps & Sperry, 2020). In further regards to learning, Perfect et al. (2016) also discussed that children who have experienced trauma "may be profoundly impacted and exhibit significant barriers to learning" (p. 8). They also revealed that a class of 30 students can contain 15-20 students with exposure to traumatic events (Perfect et al., 2016, p.
These numbers are indicative of large problems for students and the ACEs Connection has identified childhood trauma as “America’s hidden health crisis” (Thomas et al., 2019, p. 424).

The effects of the trauma can filter into areas of the victim's life, including an educational setting where the child may be unable to focus on their schoolwork and prevent academic success (Day, 2015). More specifically, SAMHSA (2014b) noted that adverse effects of trauma can affect the victim's ability "to cope with the normal stresses and strains of daily living; to trust and benefit from relationships; to manage cognitive processes, such as memory, attention, thinking; [and] to regulate behavior" (p. 8).

Bethel et al. (2014) concurred that adverse childhood experiences add to increased health problems and more problems in school. The researchers found that over two or more adverse childhood experiences are prevalent in at least 20% of children aged 0-17, in the United States. In additions, the researchers found that students that had suffered from two or more ACEs often missed more than two weeks of school and more often had to repeat a grade than peers without an ACEs score (Bethel, 2014). The conclusion of the study expounded that interventions at the classroom level, for students with ACEs scores need to include “. . . safe, stable, and nurturing environments” (Bethel et al., 2014).

Students that have experienced trauma can struggle with connections, relationships, cognitive ability (SAMHSA, 2014b) and other factors that are needed to navigate the school day. Educators interact with students on a regular basis. If proper training is used, educators can understand how their role involves taking that crucial first step to identify students that have experienced trauma (Jennings & Siegel, 2019). Once students have been identified, teachers will be able to use interventions to help these students.

Ongoing trauma can leave a child in a heightened state of stress caused by their traumatic
experiences (Perry, 2009). Perry (2009) explained that human beings cannot tolerate stress for long periods. This heightened state of stress can negatively affect a child’s ability to interpret and react to information coming from their senses (Perry, 2009). If these signals are too strong or weak, the child’s brain does not know how to process or interpret the signals. This lack of processing makes it difficult for the child to know how to interact with the environment around them.

The ability to manage emotions and impulses lies in the cortex of the brain (Perry & Hambrick, 2008; Perry, 2014). Perry and Hambrick (2008) have noted that this area of the brain develops primarily through interactions with caregivers. Therefore, Perry explains, that children who have experienced trauma have less ability to regulate their emotions and behaviors.

This decrease in the ability to regulate emotions creates deficits in a child’s cognitive functioning (Perry & Hambrick, 2008; Perry, 2009). If a child experiences trauma, their brain is still in the developmental stages, and the trauma's experience impedes that development. Perry stated that disruption in cognitive functioning in children who have experienced trauma can be connected to the areas of the brain that were the most active in the child’s development during the trauma. The underdevelopment of the brain can leave children struggling and only reaching a small part of their full potential (Perry & Hambrick, 2008).
Assessing and Documenting Trauma

Each school day a student is continually being challenged to learn new things and go out of their comfort zone. If a child already has lost their sense of control due to trauma, then they can enter the classroom feeling much more fearful and defensive than students that have not experienced trauma (SAMHSA, 2014b). As mentioned, both SAMHSA (2014b) and Perfect et al. (2016) noted that the symptoms from trauma can spread to many areas of a child’s life and affect school performance. Chafouleas et al. (2016) explained that a student’s behavioral and academic issues in schools were historically addressed using a process where the student would exhibit the behaviors, then there would be a discussion among team members and staff to refer the student for needing support, which would be followed by appropriately testing the student, and only if the student met requirements were they given supports or placed in special education programs. A 2004 update to the Individuals with Disabilities Education Act, included revised approaches such as Response to Intervention (RTI) and Multi-Tiered Systems of Support (MTSS) for student identification and early intervention (Blodgett & Dorado, 2016). RTI and MTSS consists of the referral of a student who is struggling, but then instead of waiting for testing, the educators, counselors and administrators use tiered levels of support to assist the student (Chafouleas et al., 2016). Schools are currently moving towards MTSS and RTI approaches, as they are more prevention based by including supports ranging that start with the least intensive and progress to more intensive as per student need (Chafouleas et al. 2016). Blodgett and Dorado (2016) noted that often RTI and MTSS are used interchangeably, but that MTSS emphasizes using whole school strategies with interventions that can help all students, while RTI is more individualized.

Currently there are not many laws in place for student success with regards to trauma.
The 2004 Individuals with Disabilities Act (IDEA) states in Title 1, Part C, Section 365, that early intervention can be given to a student “following a substantial case of trauma due to exposure to family violence.” However, IDEA does not define trauma and traumatic experiences as a disability. Thus, there is often not a trauma-informed approach used to creating individualized student education plans. From a federal standpoint, P-Law 114-95, Every Student Succeeds Act, was passed in 2015 and identifies a possibility for trauma-informed classroom management training. As of 2018, only four states have laws in regards to trauma-informed training (Posamentier, 2018). The District of Columbia (B594) and Tennessee (SB 1386) are the only two states that require professional development for trauma-informed learning. Massachusetts enacted a law in 2018 (H 4742) that created a commission to work towards promoting trauma-informed care in schools. Washington has a similar law (HB 2861) which created a task force to understand trauma-based learning and increase training over five years. In 2018, Pennsylvania attempted a law (SB 1218) to require training to employees on trauma-informed learning, but it was not passed and the information was passed to the Education Committee. Finally, with the impact of COVID-19, Pennsylvania’s Governor Wolf passed Senate Bill 144 which recognizes the existence of ACEs and requires a minimum of one hour of training on trauma-informed approaches for every school board director and educator. However, much of the bill will not begin to be enacted until the current 2021-2022 school year (Public School Code, 2019).

**Trauma-Informed Educational Practices**

Trauma-informed educational practices give educators strategies to use when working with students that have experienced adverse childhood experiences and trauma in their lives. Trauma-informed care (TIC) emphasizes an understanding of how adverse childhood
experiences and trauma which take place in childhood can have a lasting effect (Goddard, 2021). While TIC is often practiced by health care professionals and counselors, bringing a version of these practices into the classroom enables educators to help their students cope with their everyday experiences that seem more difficult as a result of the adverse childhood and traumatic experiences.

Blodgett and Dorado (2016) stated that even though the ACEs are helpful in identifying trauma exposure, the questionnaire does not detail all of the mental health struggles students face. In response to this plethora of mental health struggles and the complexity of trauma, schools need more resources (Blodgett & Dorado, 2016). Mental health services are a large part of the help that students need to receive; however, the services are not distributed evenly (Blodgett et al., 2016). Once a student that has experienced trauma is identified, school supports must find the appropriate mental health professional to work with the student. Blodgett and Dorado (2016) stated that because mental health systems are limited in the number of patients they can see, often school referrals have to wait for treatment.

Blodgett and Dorado (2016) continued that another struggle associated with trauma-informed practices is that there are students that have experienced trauma that suffer but will never exhibit symptoms commonly identified with trauma exposure. Thus, acting out in class, failing grades, or discipline issues are rarely looked at under the trauma microscope or trauma lens, and students do not get help.

Duffy et al. (2019) stated another concern that deals with the effective training for educators. Pennsylvania Senate Bill 1271 included “a call for training school staff on trauma-informed approaches” (Duffy et al., 2019, p. 14). The researchers explained that while this bill moves Pennsylvania “closer to realizing a fully trauma-informed educational approach” it does
not make it mandatory (Duffy et al., 2019, p. 14). By not making training mandatory, schools are still able to decide what is most important for their district. If trauma-informed educational training is not at the top of the list, it might not happen. Duffy et al. (2019) stated that experts have recommended not mandating training, because schools that do not put an importance on the program might not be give the program much support. However, the researchers continued to advise that the state could provide grants for this type of training, to get schools on board. With the increase of student trauma from the COVID-19 pandemic, the state might spend money on the training to make it happen. This training truly proves the importance of teacher training in trauma-informed educational practices.

For the trauma-informed policy, procedures, and training to be successful it should be reviewed by both policy makers and educators so that the training fits into the current models of MTSS and RTI (Duffy et al., 2019). Having the framework and training align with current school infrastructure is important; however, it also adds more time to the already busy schedules of teachers and administrators by including, meetings, reviews, and extra time to the implementation process and a danger of the bills getting stuck in legislative red tape.

Blodgett and Dorado (2016) explained that trauma-informed training needs to include training of any multi-tiered systems of support (MTSS) that are already in place and also ideas on positive interventions when dealing with negative student behavior. This research focuses on the trauma-informed educational practices in the classroom.

The Role of Teachers as Trauma Identifiers and Trauma Interventionists

Venet (2019) defined the role and responsibilities of teachers as creating learning environment that is safe and comfortable for the student. They emphasized that this is the teacher’s role “regardless of [the teacher’s knowledge] about each student’s history” with trauma
(Venet, 2019, p.1). Students that have experiences with trauma often have difficulties in finding and trusting the different adults in their lives (Venet, 2019). Venet (2019) noted that some students are excited to have an adult, in this case the teacher, pay attention to them and will readily share every detail about themselves, while other students will struggle to make connections. If a student begins to trust a teacher and shares details about their lives, Venet (2019) advised that the student could share details about their mental health or trauma. However, the research strongly agreed that while the relationship is important, teachers need to refrain from taking on the role of treating the student’s mental health. In the case of a student sharing their experiences with trauma, the teacher would refer the student to the school counselor or mental health specialist. Even though the teacher would step aside from attempting to treat the student’s trauma, they would still maintain the connection and relationship that has been built in the classroom.

Using a trauma-informed approach does not mean educators need to be informed of the details of a student’s traumatic experience(s). Venet (2019) stated that teachers are often coming from a good place in wanting to know this information, as educators often perceive that specific information will make them more capable of helping the student. Another argument that teachers make for wanting to knowing the student’s trauma story is that they want to avoid unintentionally saying something that triggers the student or brings back memories from the trauma. Venet (2019) insisted that teachers cannot question students directly about their traumatic experiences in conversation or with writing assignments. If a teacher was preparing students for a college essay about personal adversity, the question for the entire class would need to be written so that it did not trigger trauma.
For instance, when I worked for an SAT prep company, there was an essay question student had to answer that read, “Describe the worst day of your life and how you dealt with it.” A better version of the question that would be less likely to trigger a response to trauma would be, “Think of a day where something just did not go your way. How did you feel? What did you do to change things?” Both questions allow students to reflect upon how they have dealt with adversity, but the wording of describing “the worst day of your life” has more possibility to bring the student back to the traumatic events they have experienced. If a classroom activity does trigger a student’s trauma, teachers should immediately contact the counselor or mental health specialist so that the student has a trained mental health professional to speak to about their experiences.

Venet (2019) reassured that while there might be important details the counselor or mental health specialist needs to share with the teacher, generally teachers do not need the details of the student’s trauma. With the right lens and trauma-informed educational approaches, any teacher can work with any student and build a caring and safe relationship and classroom experience. Venet (2019) ascertained that the trauma-informed practices that create this connection and safe space are beneficial for all students and not just students that have experienced trauma.

**Construction and Adaptation of the Trauma-Informed Educational Practices**

A review of research regarding trauma-informed educational practices revealed that the use of trauma-informed educational practices in the classroom is a relatively new approach and there is not one set of practices or guidelines in place (Blodgett & Dorado, 2016; Chafouleas et al., 2019; Thomas et al., 2019). Teachers, in general, do not have the tools to manage trauma when students are in the classroom (Sitler, 2009). Phelps & Sperry, (2020) saw the need for
schools to increase their effort to address the trauma-related needs for students, which can be
done with teacher intervention. The researchers emphasized that with the lack of such
interventions, “the COVID-19 pandemic could be contributing to cumulative trauma for many
children” (Phelps & Sperry, 2020, p. S74).

SAMHSA (2014b) posited that such interventions can help victims overcome the effects
of their traumatic experiences. Chafouleas et al. (2019) recommended that these interventions
follow the guidance from SAMSHA (2014b) and (a) make classrooms safe and supportive, (b)
understand and identify the signs of trauma in students, and (c) teach and respond to students
using a trauma-informed approach. From studying the many different ideas of trauma-informed
educational approaches, it is clear that a safe and trusting connection between the student and
teacher is important (Blodgett & Dorado, 2016; Chafouleas et al., 2019; Jennings & Siegel,
2019; Minahan, 2019b; Thomas et al., 2019; Venet, 2019). Many of the researchers used in this
dissertation touch on the need for trauma-informed educational practices, and some, even begin
to create practices. The trauma-informed educational practices I constructed for this study were a
mostly adapted from Minahan (2019b), and further explained with research from Brooks (1998,
2007), O’Connor & McCartney (2007), Naylor and Wright (2012), SAMSHA (2014b), Blodgett
and Dorado (2016), Chafouleas (2019), and Jennings and Siegel (2019). I will provide the
research basis for each of the trauma-informed educational practices that are the focus of this
study.

Description of the Trauma-Informed Educational Practices

While there are a wide variety of trauma-informed educational practices that teachers
may choose to use to address trauma in their classrooms, I will focus on the following practices
in this literature review: (1) creating a safe and supportive classroom environment, (2)
connecting with students to create trusting and comfortable relationships, (3) promoting a predictable and consistent classroom environment, (4) encouraging students to think positively, (5) interacting in a thoughtful manner with students, (6) staying calm and expecting unexpected responses, (7) limiting exclusionary practices, (8) finding ways to use positive and supportive feedback, and (9) creating islands of competence for students by using positive praise.

**Connecting with Students to Create Trusting and Comfortable Relationships**

Many researchers included in this emphasize importance of building trusting and comfortable relationships between students and teachers (Brooks, 1998; O’Connor & McCartney, 2007; Blodgett & Dorado, 2016; and Jennings & Siegel, 2019). If teachers are asked to simply create or “build a relationship” with students, that request leaves much room for personal interpretation (Minahan, 2019b). Jennings and Siegel (2019) posited that building trusting and safe relationships between teachers and students should be at the forefront of supports students that have experienced trauma.

Outside of the school setting, students that have experienced trauma may have experienced relationships and interactions that were volatile and disruptive, leaving students feeling unsafe and unable to trust (Jennings & Siegel, 2019). These unhealthy relationships and interactions may leave students without examples of how they should respectfully respond to their teacher. To build a trusting relationship with the student, the teacher needs to show a direct interest in the student. Simple acts like greeting students by name at the door and as they enter the classroom, can make them feel more comfortable with the teacher. Teachers can also express and interest in activities the student enjoys. If a teacher knows a student is an avid soccer player, the next time a math problem comes up and soccer explanation can be used to explain, the teacher can reference the student. An example would be, “I know that Sarah is such a wonderful
soccer player, and, in this example, Sarah is kicking three soccer balls and she kicks all three into the goal. How many soccer balls does Sarah have left?” This example is rather simple, but the point withstands that showing the student that the teacher remembers something they shared in conversation, allows the trusting teacher-student relationship to build.

Although the initial actions seem small, with repetition they can successfully build trusting and comfortable teacher-student relationships. These relationships can also enable students to feel safe enough to share concerns with teachers and allow teachers to help them navigate difficult situations (Jennings & Siegel, 2019).

**Promoting a Predictable and Consistent Classroom Environment**

Students that have experienced trauma often remain on high alert because they never know when or if the trauma will reoccur. These feelings are often transferred into the classroom and students can feel uncertain about every situation (Minahan, 2019b). Teachers can help create more security by informing students about the day’s events or and changes that have been made. Reviewing a schedule or daily agenda with students at the beginning of class can create a sense of predictability and calm (Minahan, 2019b). Minahan also shared that students who have experienced trauma are often comforted with predictability. Informing students of any changes to a previously discussed schedule, such as the fact that recess will be inside because of the weather, allows the students to feel empowered and safe because they know what is going to happen.

**Encouraging Students to Think Positively**

The adverse effects of trauma can leave a student worrying and thinking in a negative way. Everyday classroom interactions could be viewed as negative experiences due to the perception of these students (Minahan, 2019b). Students that have experience trauma often
struggle with anxiety disorders (Blodgett & Dorado, 2016) which can leave a student in a spiral of negative thoughts. This feeling of a lack of safety not only prevents students from learning (Minahan, 2019b), but can lead students to act out or become anxious, often feeling as though they need to escape.

If a teacher is trained to understand actions of students that have experienced trauma, they can privately suggest alternatives for the student. Suggesting the child takes a walk in a manner that gives them power over their stress is a great diversion. For example, in my own classroom, I take a Post-It note, write a message to one of my colleagues to have a great day, staple it closed to add to the importance of the student’s mission, and ask my student if they can do me favor and deliver this information to a specified teacher. This type of cognitive distraction (Minahan, 2019b) or brain break can help the student calm down because the excitement or distraction of new task forces the negative thinking to stop. The student’s pattern of negative thinking is interrupted with the task and they feel as though they have a purpose or job to complete for the teacher. As an added bonus, the note may make a colleague’s day a little brighter.

**Interacting in a Thoughtful Manner with Students**

Teachers should use a *trauma lens* when interacting with students that have experienced trauma. A trauma lens has a significant impact on student and teacher interaction because it allows the teacher to view the interaction from a different perspective (Thomas et al., 2019). Jennings and Siegel (2019) and Thomas et al. (2019) stated that instead of wondering “what is wrong with you?” when interacting with difficult students, teachers should learn to rephrase their thoughts to wonder “what is happening to you?” This new perception allows teachers to take a
step back and look at a student’s behavior in a new way. Educators that use a trauma-informed lens, promote healing and success for students that have experienced trauma (Venet, 2019).

Every student and teacher interaction in the classroom is made up of 50% interaction from each participant (Minahan, 2019b). Rephrasing how teachers think and interact with students so that there is very little chance for misinterpretation is important. If a student that has experienced trauma is nervously tapping a pencil on their desk and bothering both the teacher and the rest of the class, shouting at the student to stop will not help ease the student’s nerves. This interaction can possibly create an escalating power struggle between the teacher and the student, as the teacher demands control of the class and the student demands acceptance of their actions of tapping the pencil (Minahan, 2019b). Instead of calling out to the student, if the teacher puts the request to stop tapping the pencil on a Post-It note and puts it on the student’s desk while walking by, the teacher delivers the message to the student in a private way that does not force the student to defend themselves and the teacher also allows the student space as the teacher continues to walk around the classroom. Minahan (2019b) added that leaving off words like “now” or “immediately” from a request also all the student time to absorb the teachers request and choose a calmer response to the teachers request. Venet (2019) agreed that this type of restorative approach to discipline, encourages trusting teacher and student relationships for a positive interaction for students that have experienced trauma.

Staying Calm and Expecting Unexpected Responses

Consider the following common scenario that frequently occurs in classrooms. Teachers ask students to turn in their homework, and if the student has the homework, they turn it in. If they do not, the teacher may ask, “Why don’t you have your homework?” While my experience as a teacher has shown that most often the student response to this is “I didn’t do it” or “I don’t
know,” students that have experienced trauma may not have the coping skills necessary this type of everyday student teacher interaction (Minahan, 2019b). When a teacher asks a student that has experienced trauma why they do not have their homework, there is a chance the student gets defensive and angry and answers the teacher rudely or with a negative outburst. Thomas et al. (2019) explained that the manifestation of this outburst varies dependent on the students “fight, flight, and freeze” response to the perceived danger of the triggering event (p. 427). A teacher’s first instinct could be to take a fight reaction of the student arguing with the teacher, or a flight reaction of student running out of the classroom, as a sign of disrespect (Minahan, 2019b).

However, students that have experienced trauma are already trying to navigate their school day under intense stress which makes it harder for these students to function (Jennings & Siegel, 2019). This one question could just set off intense feelings for the student that they have disappointed the teacher or that they have failed to perform. Minahan (2019b) described a way for teachers to understand this reaction by thinking of the student as a “soda can” that may have already been shaken by another person triggering the student’s trauma stress. Although the teacher perceives the question about homework is simple, if the student did not complete the assignment, this could be the trigger that opens the can and sprays the teacher with the student’s outburst.

To expect the unexpected responses means that that teacher is trained and ready for the student’s outburst. Teachers understand that the student’s outburst is not a personal attack and do not react to the negative with argument or a punishment. Instead, teachers can give the student a few minutes to calm down and later return to the student asking if they could work together or help with the assignment. This assurance to the student that the teacher is there to help and trust, may allow the student to relax and engage with the teachers help in completing the assignment.
Limiting Exclusionary Practices

Each classroom has rules and procedures in place to keep students safe. A student that has not experience trauma, may view these rules and simply things they can or cannot do. To a student that has experienced trauma, rules can become incredibly daunting, as students that have experienced trauma are more likely to fear the punishment or consequence from the rule. If students that have experienced trauma sense that they might be getting into trouble, the fear this causes, and quickly escalate their behavior to a very negative status. This negative behavior could cause the teacher to remove the student from class so that the rest of the class and the daily lesson are not disrupted. They can escalate their behavior very quickly, to keep students safe.

Some students need more “help” when following the rules. For example, When a student is frustrated and begins to argue with the teacher and disrupt the class, a teachers first thought could be to remove that student from the classroom, to preserve the integrity of the lesson. Peirce et al., 2021. Blodgett & Dorado(2016) state that even though culturally there is a belief that punishment will evoke change in student behavior, schools should avoid punishing students. The belief about punishment is actually the reverse and punishing a child only teaches them fear (Blodgett & Dorado, 2016). There is also a “casual association between school exclusionary practices” and larger negative effects on children (Blodgett & Dorado, 2016, p. 36).

Finding Ways to Use Positive and Supportive Feedback

This trauma-informed educational practice ties in with the ideas of eliminating negative thinking from the previous practice step. As a result of the negativity that may surround their trauma and manifest in their daily thoughts, students that have experienced trauma often emphasize any negativity in what a teacher is telling them. For example, if a teacher is checking a student’s work, they might ask the student to fix their solution to a specific problem. To the
student that has experienced trauma, this request is often heard as “You are stupid” or that the
teacher is angrily telling them that they cannot do the work (Minahan, 2019b). Rephrasing
teacher feedback to be more positive is key for students to feel emotionally supported (Brooks,
1998; Jennings & Siegel, 2019; Minahan, 2019b). The sandwich approach (Naylor & Wright,
2012; Minahan, 2019b) is one that works extremely well in these situations.

When offering feedback to students, the constructive sandwich approach (Naylor &
Wright, 2012) offers a three-step method. The first step is discussing something that went well or
that student did well. For example, the teacher could compliment the student on how hard they
worked on the assignment or how much the teacher appreciates the focus the student is giving to
the assignment. The second step allows the teacher to positively frame something that the student
needs to work on or something that the student did not do well. Since there has already been
praise for the student, they are calmer and more confident when they here this second step of
feedback that might not be as positive. During the second step of this method the teacher can
address a problem a student did incorrectly by asking them to “take another look at problem 4”
or “going back to review the steps they used for writing their conclusion paragraph to make sure
they included all of their great ideas.” In this second step, which Naylor and Wright, (2012)
refers to as the filling of the sandwich, the teacher is directing the student to areas that need more
work in a positive way. It is important to note that the more positive the teacher came frame the
feedback for the filling, the more confidence the student feels about their work. The third and
final step would have the teacher ending the conversation with a positive comment about the
students work, or encouraging the student by saying that the teacher “is proud of the way the
student listened to feedback and knows that the student can get try again to get a new answer.”
This positive ending to the conversation can reduce student anxiety and leave students with a
feeling of confidence and ownership about their work (Naylor & Wright, 2012). The above phrases are only examples from my own classroom experience, and each teacher needs to find positive feedback phrases and filling that works best for them.

**Creating Islands of Competence for Students by Using Positive Praise**

Students that have experienced trauma often have a low self-esteem and self-image (Jennings & Siegel, 2019; Minahan, 2019b). These students are swimming in a sea of inadequacy (Brooks, 2007; Jennings & Siegel, 2019; Minahan, 2019b). Sitler (2009), acknowledged that trauma leaves a child feeling a loss of control and power and that “traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection and meaning” (p. 1). When the child comes to school with rules, and tasks, and interaction with many different personalities, the child could feel like they are overwhelmed and drowning. Adding the stress of school to the already overwhelming feeling that trauma creates for a child, can lead to a hostile situation.

A student that has not experienced trauma might come to school, do their work, maybe have an argument with a friend that upsets them, but they are able to work it out when they go home with the help of a parent. This argument is likely to have been upsetting to the student, but they are capable of understanding the situation and putting it into perspective. If the same thing happened to a student that had experienced trauma, even from the first moment they walk into school, they already feel worried or anxious about the day. The same events could happen to both students, but the student that experienced trauma is stuck in negative thinking and the weight of the moments with a negative perception add more stress to the student (Minahan, 2019b). Thus, when the argument happens with a friend, the “soda can” is shaken because the student does not have the positive self-esteem needed to cope with the situation (Brooks, 1998,
The student that has experienced trauma is unable to cope. This student’s inability to cope could be shown with negative outbursts and behavior or even shutting down, and thus the situation and days gets worse for this student.

Brooks (2007) posited that islands of competence are “symbols of hope and respect, [and] reminder[s] that all individuals have unique strength and courage” (p. 11). If educators help students create islands of competence with positive praise about the student’s strengths and abilities, students will learn how to appreciate themselves and build resilience for difficult moments that may happen in their day (Brooks, 2007; Minahan, 2019b). Educators can create these islands with students, by finding things that students do well and making sure to point them out. In this sense, educators can be “explorers looking for qualities in children [that they] had not through about in the past” (Brooks, 2007). Students that have experienced trauma might be so caught up in negative thinking they do not realize the good things they have done. If I know a student is usually in trouble or causes problems, I look to “catch” them doing good things in my classroom. Even if the actions are small, such as letting someone borrow a computer charger, or waiting their turn before calling out – the students need to know that the good things they do are important. Letting a student know that they are liked for who they are and not the behavior the produce also encourages competence and self-resilience (Minahan, 2019b). If educators can promote positivity about tasks and talents of the students that have experienced trauma and help these students feel competent about themselves and their accomplishments (Venet, 2019), the students can begin to change a possible negative narrative they have created for their lives into a positive story with hope and excitement (Brooks, 2007; Minahan, 2019b).
Theoretical Framework

The theoretical framework for this study began with a study of Sigmund Freud’s work with trauma in the late 1800s. Freud’s and other researchers studied the effects of traumatic injuries on patients and the effects experienced by women that suffered from hysteria (Anderson, 2012). From these and subsequent studies, the term “trauma-theory” emerged in 1990 when researchers, including Cary Caruth, began to study the cultural effects of trauma (Anderson, 2012; Carello & Butler, 2014). Trauma Theory is rooted in the medical field and practiced by mental health professionals. The role of a teacher is not that of a mental health professional (Venet, 2019). Therefore, the medically-focused “trauma theory” was adapted to a more educational approach of “trauma-informed” (Chafouleas et al., 2020). The etiology and causes of trauma can be traced to the studies of Sigmund Freud in 1919 and his work with psychoanalysis on soldiers that had traumatic injuries (Berger, 2004; Carello & Butler, 2014).

Berger shared that trauma studies lean towards psychoanalysis, and trauma studies work more with “theoretic and speculative psychoanalysis of Freud, Laca, and Slavoj” and trauma theory examine the action of taking the subjectiveness of an individual’s trauma, which can be real or perceived (Berger, 2004; Blodgett & Dorado, 2016), and transforming it into language and symptoms to create an explanation for the trauma (Berger, 2004).

The majority of the research included in this dissertation, including Felitti et al. (1998), McLoughlin et al. (2013), SAMHSA (2014b), Blodgett and Dorado (2016), and Chafouleas et al. (2021), do not directly include the phrase "trauma theory" in their research or findings. As seen in Chafouleas et al. (2016, 2019, 2021), the phrase "trauma theory" is commonly replaced with the phrase "trauma-informed." Specifically, Chafouleas et al. (2021) stated, "While research and theory have been put forth in the mental health world and social services fields. . . the discussion
of trauma-informed practices is less common” (p. 42). When Berger (2004) discussed "trauma theory", it mostly referred to medical cases that involve psychoanalysis.

This research case study takes on a pragmatic worldview and uses mixed methods to converge the final data information to better understand the ideas that emerge. The choice of a pragmatic worldview was purposeful as this worldview aligns with the researcher's beliefs and philosophical assumptions (Kaushik & Walsh, 2019). A pragmatic worldview attempts to decipher real-world problems and find the most effective method of solving the problem (Kaushik & Walsh, 2019). A pragmatic worldview is commonly used when researching with a mixed-methods approach (Farquhar et al., 2011; Creswell & Plano Clark, 2018; Kaushik & Walsh, 2019).

The theory of practices being studied will be referred to as “trauma-informed” educational practice. As noted elsewhere in this paper, the role of the teacher is to create a safe and comfortable learning environment for the classroom and not to be a mental health therapist for the student (Venet, 2019). As teachers are not mental health professionals, there is a need to adapt the medical-focused "trauma theory" to the more educational approach of "trauma-informed" when discussing the effects of the trauma-informed educational practices on the participants. As this research will be grounded and theories will emerge from the data, there is possibility that attachment theory can be used when studying any teacher and student connection that is formed from the use of the trauma-informed educational practices. The role of the teacher is to create a safe and comfortable learning environment for the classroom and not to be a mental health therapist for the student (Venet, 2019). The fact that teachers are not mental health therapists and are not discussing actual trauma with the students, aligns better with the use of “trauma-informed” as opposed to trauma theory. Once a teacher is able to identify a student that
has experienced trauma, counselors and school mental health specialists work with students regarding their actual exposure to trauma. The role of the teacher in using the trauma-informed practices is to aim to help the students feel safe and connected in the classroom. If these connections are successful, there is a possibility that strains of attachment theory emerge from the research.

Attachment Theory is rooted in the research of Sigmund Freud and his ideas regarding attachment with infants (Waters et al., 1985). Waters et al. (1985) noted that these original ideas have grown into more complex ideas regarding behavior towards a caregiver. A potential caregiver at school could be a teacher. Jennings and Siegel (2019) stated that children that have experienced trauma can feel safe at school with a supportive classroom and teacher. In this type of safe environment, school figures can become alternative figures of attachment to family figure (Blodgett & Dorado, 2016). The healthy attachment for students and teachers can create the safe environment and security needed to foster student growth (Blodgett & Dorado, 2016).

O’Connor and McCartney (2007) examined teacher-student relationships and found that stronger student achievement correlated with stronger teacher-student relationships. Students that have experienced trauma struggle to make relationships and connections. Sitler (2009) acknowledged that trauma leaves a child feeling a loss of control and power and that “traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection and meaning” (p. 1). When the child comes to school with rules, tasks, and interaction with many different personalities, the child could feel overwhelmed (Blodgett & Dorado, 2016). With the possibility of racing thoughts overwhelming students that have experienced trauma, they can feel like outsiders and rely on educators to foster important connections and feelings of safety at school.
O’Connor and McCartney (2007) also found that these strong teacher-child relationships can better predict student success than and achievement over insecure attachments with parents and peers (p. 361). If educators can use trauma-informed educational practices to create connections with students, students will have a chance of success and growth in spite of their past traumatic experiences. Rishel et al. (2019) argued that the need for a safe connection and relationship between the child and caregiver, or educator, is important when combating the effects of trauma. See Figure 2.1 for a diagram of this study’s theoretical framework.

**Figure 2.1.**

*Theoretical Framework Diagram*

![Diagram of Theoretical Framework](image)

*Note.* The figure above represents the theoretical lens used to focus on the adverse effects of trauma for students. Trauma theory is adapted to become “Trauma-Informed.” When “Trauma-Informed” educational practices are used with Attachment Theory, students’ connections and trust can emerge.

**Summary**
Trauma-informed educational practices are necessary in the classroom as interventions to mitigate the adverse effects of childhood trauma. Educators work with students daily and are often the only people who can identify that a student has experienced trauma. Educators are not mental health specialists and do not need to understand the actual trauma that a student went through. However, with proper training and an overall understanding of childhood trauma, educators can be an important source of identification. Once identified, students that have experienced trauma can be referred to the school counselor or mental health specialist for services. The role of the teacher is also important with the use of trauma-informed practices in the classroom. These practices will allow educators to use a trauma lens when working with students, and find ways to make safe and supportive classroom environments where all students, including students that have experienced trauma, can thrive.
Chapter III: Methodology

The study was designed to examine the overarching research question, *How do middle school teachers perceive and use Trauma-Informed Educational Practices to support their students during the COVID-19 pandemic?* This chapter examines the methods and research designs used in this mixed methods study. This chapter also provides information regarding research participants, setting, instrumentation, data collection, and analysis.

This study used a convergent mixed methods research design including survey (quantitative) and interview (qualitative). Creswell and Plano Clark (2018) defined *mixed methods* as a study where the researchers first collect and then rigorously analyze quantitative and qualitative data that correlate to the study's research questions. The multiple aspects of a convergent design include merging quantitative data results and qualitative data results after the separate collection and analysis of each type of data (Creswell & Plano Clark, 2018, p. 69). Creswell and Plano Clark (2018) recommended using a pragmatic worldview when conducting a convergent study design. A pragmatic worldview allows for merging the data and creates a more profound understanding of the story told by the combination of data. This study met all the above criteria as both the quantitative and qualitative data correlate appropriately to their corresponding research questions. Both types of data were analyzed separately and then merged for an enhanced understanding of the results.

In this chapter, I will: (a) discuss the setting for the study, (b) describe the participants and the purposeful sampling used for participant selection, (c) discuss the research design and research questions for the study, (c) briefly explain historical trauma as it related to this study, (d) explain the choice of survey design, (e) review the inclusion of case study design, (f) discuss the instruments used in the study, (g) examine the procedures for data collection, (h) discuss
triangulation, and threats to validity for the study, and (i) review the analysis procedures for the study.

Description of the Setting

The setting for this case study was a middle school in the mid-Atlantic region of the United States. In this case, the term middle school means it contains the grade bands of 6th-, 7th-, or 8th-grade. This choice of setting was necessary as the study calls for teachers that teach core subjects (English/Language Arts (ELA), History, Math, or Science) to students in grades 6, 7, or 8.

Description of Participants in Quantitative and Qualitative Data Collection

Merriam (1998) explained that purposeful sampling is necessary, especially for qualitative research, because purposeful sampling lies in the belief that there is a desire to discover or understand a specific problem. Therefore, the sample used needs to provide a substantial arena from which the researcher can learn (Merriam, 1998, p. 61). Merriam (1998), continued to explain that purposeful sampling must start with criteria that the sample participants must meet to be a part of the study. This criterion were the gatekeeper questions listed below.

For this study, I collected teacher emails from the middle school’s website used in this case study. I sent a recruitment email (see Appendix A) to the teachers’ school email accounts. The subjects they are listed next to each teacher’s email address on the same website. I used this information to find which teachers met the gateway requirements of teaching a core subject (English/Language Arts (ELA), History, Math, or Science) at this middle school, in 6th-, 7th-, or 8th-grade. Another gateway requirement for this study was that teachers participated in training delivered by the school district on trauma. Teachers were excluded from the study if they did not meet all the following requirements listed above.
**Research Design**

The research design for this study was convergent mixed methods. It included quantitative data from a survey to address Research Sub-Question 1, a quantitative survey to address Research Sub-Question 2, and a teacher checklist and a voluntary follow-up qualitative interview to address Research Sub-Question 3.

**Research Questions**

The overarching research question for this study was *How do middle school teachers perceive and use Trauma-Informed Educational Practices to support their students during the COVID-19 pandemic?* I examine this question using the following three sub-questions:

1. How do teachers perceive the effectiveness of the Trauma-Informed Educational Practices?
2. How often do teachers perceive they use the Trauma-Informed Educational Practices in the classroom?
3. In what ways do Trauma-Informed Educational Practices manifest themselves in the classroom?

**Historical Trauma and Trauma-Informed Research Designs**

Research regarding trauma and trauma-informed care historically contains *either* qualitative data *or* quantitative data. However, more traditional research collection methods regarding trauma studies usually rely on quantitative data (Felitti et al., 1998; Creswell & Zhang, 2009). Creswell and Zhang, 2009 stated that qualitative processes in trauma research were used by mental health professionals that collected stories, interviews, and interactions from their patients (Felitti et al., 1998; Creswell & Zhang, 2009). Other trauma research studies that have been done in the medical sector have come from the American Psychiatric Association (APA)
and helped define medical disorders associated with trauma (SAMHSA, 2014b). The studies contain qualitative research (Creswell & Zhang, 2009) conducted by mental health professionals studying the application of trauma-informed care on patients that had experienced trauma. This necessity of differentiating trauma-informed care and trauma-informed education has been previously illustrated in this paper, with the limitations that educators are not to ask students directly about their trauma or to try and treat student trauma.

The purpose of the Trauma-Informed Educational Practices used in this study were used to help teachers become trauma-informed and use a trauma lens for viewing teacher/student interactions from a different perspective (Thomas et al., 2019). I am not studying trauma-informed care because this collective case study ties to an educational setting and not a medical facility. The teacher participants delivered the Trauma-Informed Educational Practices in the educational setting of a middle school. The teacher participants were not mental health professionals, so they were not delivering trauma-informed care. This responsibility remains the job of the school psychologist or behavior specialist who have the necessary qualifications to give this type of care. In the literature review for this study, I discussed researchers that studied trauma-informed care in medical settings and researchers that studied trauma-informed care in educational settings, but where the care was facilitated by counselors and mental health professionals (Felitti et al, 1998; Berger, 2004; Salasin, 2011; SAMHSA, 2014b; Chafouleas et al., 2016; Blodgett & Dorado, 2016; & Perfect, 2016).

This discussion also included studies about teachers’ perceptions of trauma-informed education in the classroom but did not include data from situations where teachers implemented the trauma-informed ideas. There is also a discussion of the researchers that have laid out frameworks and ideas for delivering actual concepts of trauma-informed practices (Minahan,
However, the research is lacking, and what I hope to understand with this research, are the actual effects and manifestations of Trauma-Informed Educational Practices in the classroom (Chafouleas et al., 2021).

**Convergent Mixed Method Design with Trauma and Trauma-Informed Research**

This research takes on a pragmatic worldview with a convergent mixed methods approach. The choice of a pragmatic worldview was purposeful as this worldview aligns with my beliefs and philosophical assumptions (Kaushik & Walsh, 2019). A pragmatic worldview attempts to decipher real-world problems and find the most effective method of solving the problem (Kaushik & Walsh, 2019). A pragmatic worldview aligns best with mixed-method research on real world topics (Farquhar et al., 2011; Creswell & Plano Clark, 2018; Kaushik & Walsh, 2019), including the use of Trauma-Informed Educational Practices in the classroom.

**Survey Design**

This research study attempts to separately analyze the data from each of the research sub-questions before merging the results for a final analysis. The surveys and teacher checklist from this study provided quantitative data, and the teacher interview provided the qualitative data. When the analyzed results from both quantitative and qualitative data were merged, they create a deeper understanding (Creswell & Zhang, 2009) of the results. This research uses survey design to address for Research Sub-Question 1 and Research Sub-Question 2.

This research study is a case study that includes survey designs. Yin (2003) stated that survey has a place in case study as the survey can “produce quantitative data as part of the case study evidence (p. 91). Yin & Campbell (2018) discussed that survey is relevant for research
when the focus on the research is a contemporary event, such as using Trauma-Informed Educational Practices during the COVID-19 pandemic.

**Case Study Design**

**Definition of Case Study Design.** Using the methodology of a collective case study (Yin, 2002). I sought to explore the use of Trauma-Informed Educational Practices in the middle school classroom. For this research study, the definition of a case comes from Yin’s research methods, Yin noted the importance of a case taking place in “it’s real-life context” as a “contemporary phenomenon” (Yin, 2002, p. 13; Yazan, 2015, p. 148). This case study is informed by the practices of Yin (2003) who posited that a case study should not be limited to one type of evidence and that the more knowledgeable case studies rely on multiple sources of evidence (p. 93). With this combination of sources of evidence, Yin (2003) stated the need for the qualitative and quantitative evidence to be converged and did not solely rely on results from just quantitative data or qualitative data (p.93). This mixing of quantitative and qualitative data fits well, I as this study is a convergent mixed-methods study.

For this research, I used direction on case study protocol from Yin (2003) and further guidance on case study framework from Yin & Campbell (2018). Yin (2003) stated that the protocol is essential because it contains information about instruments, procedures, and rules to be followed. If the protocol is done correctly, the reliability of the research is increased, as it allows for duplication or further studies by a party other than the researcher. Yin (2003) included a sample table of contents, a *Table of Contents of a Protocol for Conflicting Case Studies of Innovative Law Enforcement Practices*, as a guide to protocol procedures (p. 68). This research includes the following protocol from Yin’s sample and is listed and organized using the same lettering breakdown Yin (2003) used: (a) an introduction and explanation of my case study that
includes my research questions, my theoretical framework explanation, and my in depth review of the literature pertaining to my topic; (b) an explanation of any procedures necessary to access participants used in this case study and a data collection plan explicit to my study needed for this case study, (c) procedures necessary for data collection of the case study, including a description of the case study site and a plan for data collection, and (d) an explanation of the research available, including the research targets, any issues with the study, and the research I conducted prior to and during the examination of my topic.

Some important factors, as stated by Yin & Campbell (2018) that provide support for the use of case study in my research are that (a) case study is often used with research in the social sciences, such as education, (b) research questions for case studies often answer how or why questions, (c) my study is about a contemporary phenomenon that is relevant to current educational issues (Yin & Campbell, 2018). The researchers explain that contemporary refers to events that are very recently in the past and the present (Yin & Campbell, 2018). For this study, the COVID-19 pandemic has continued to impact the educational experiences of the students and teachers in this middle school setting. Another important factor in my case study is that I am studying the use of Trauma-Informed Educational Practices during the COVID-19 pandemic. Yin & Campbell (2018) described case studies as an appropriate choice for national crisis situations. The researchers feel that both case study and survey can be used together if the research focus is on contemporary events and answering how and why questions (Yin & Campbell, 2018)

**Rules for Data Collection for Collective Case Study.** The real-life contemporary context for this case is the teachers using the Trauma-Informed Educational Practices in the classroom. There have been many researchers that have discussed using a trauma lens or trauma-
informed ideas in the classroom. Still, there is a need for studies on the actual use of Trauma-Informed Educational Practices in the classroom (Chafouleas et al., 2021). Yin argued that qualitative data in a case study can answer the questions of “How?” and “Why?” (Yin, 2018, p. 27). Yin (2003) also argued that a case study is more thorough by using multiple sources of qualitative and quantitative evidence. For the purpose of this study, the case is the middle school where teachers will be using trauma-informed instructional practices in the classroom.

**Tensions and Limitations.** Yin (2003) stated that case study research is often “a less desirable form of inquiry” than surveys (p. 10). Yin (2003) attributed this to the fact that historically case study research was known for having a “lack of rigor” (p. 10). However, Yin (2003) argued that this previous case study research did not follow the necessary procedures.

Researchers who predominately use case studies have found flaws in using survey data. For example, Woodside (2008) argued that surveys include “fixed-point” questions which force participants to choose their answer from a prelisted set. The problem with a prelisted set of answers is that human beings (who are most often the participants) do not regularly think or speak in “fixed-point” responses (Woodside, 2008, p. 65). However, these fixed-point responses may not accurately show the “real-life outcome of interest in behavioral science” (p. 65).

Woodside (2008) continued to discuss that researchers who prefer using surveys and fixed-point responses do not feel that case study accurately captures results. Researchers that prefer to use survey methods can find case studies full of “thick descriptions” that can take away from generalizations needed to make conclusions in the research. Merriam (1998) also commented that case studies in the area of education could contain “thick description and analysis,” which could be too wordy or too detailed for all of the information to be used by its researcher (p. 42).
To assist with overly wordy or detailed data, a researcher could ask a colleague to review the data. Having multiple eyes on the data is also helpful for proving validity (Woodside, 2008). Woodside (2008) then cautioned that having two or more researchers review data could bring in multiple interpretations or sway the original researcher from their ideas (Woodside, 2008).

However, Merriam (1998) stated that bringing in multiple researchers to review data only adds to its validity by preventing an unethical researcher from picking only data that supports their desired results (p. 42).

Merriam (1998) also discussed that case studies in education are often funded by someone who has a form of power over the researcher. This power system can prevent researchers from revealing the entire truth as this could create issues for the researcher personally or politically (p. 43). Woodside (2008) offered recommendations to “bridge the chasm” between using multiple methods in research (p. 72). Woodside (2008) stated that accuracy is one of the most important things a research study can achieve.

**Instrumentation and Data Collection Procedures**

The convergent mixed methods design for this study included multiple phases. The quantitative survey data allowed me to understand the research questions more broadly in regards to teacher perception of effectiveness of the TIEP strategies and teacher perception of their usage of the TIEP strategies. The qualitative interviews yielded an invaluable perspective of the teacher’s voice and experience when implementing the TIEP.

**Design Integration**

Using a combination of quantitative and qualitative data was important in this study to answer the research questions thoroughly. This combination includes quantitative surveys and a qualitative interview. Creswell and Plano Clark (2018) explained this process, including that the
initial collection of quantitative data is then collected and analyzed and the same is done for the qualitative data. I first analyzed the quantitative data and then analyzed the qualitative data, both separately. After results were obtained and analyzed separately, I merged the quantitative and qualitative results for a more in-depth understanding of the patterns that emerged. This final merging of the quantitative and qualitative results truly makes the study mixed methods (Creswell & Plano Clark, 2018, p. 5).

Using a convergent mixed methods approach was also appropriate. For this study, the quantitative results from the survey helped to explain teacher perceptions of the effectiveness of the Trauma-Informed Educational Practices (TIEP) in the classroom. The quantitative results examined teachers’ perception of their usage of the TIEP in the classroom. Finally, the quantitative checklist component that teachers used to report the implementation of the TIEP in the classroom. This teacher checklist also contained open-ended questions for teachers to elaborate on their implementation in the checklist. In addition, I included follow-up interviews with each of the participants allowed teachers to further discuss their implementation choices from the checklist with the researchers.

The integration of the quantitative and qualitative data involves merging the results from each method for comparison (see Figure 3.1). For this study, the results of the Likert-scale scores of the quantitative survey were merged with the qualitative teacher interview. Separately, both types of data provided important results, but merging the quantitative and qualitative results allowed for a more complete and thorough understanding.

Trauma-Informed Educational Practices are an intervention for students. Creswell and Plano Clark, (2018) discussed that mixed methods can add an additional qualitative method, after the quantitative method is used to “provide an enhanced understanding of some aspect of the
intervention” (Creswell & Plano Clark, 2018, p. 10). This study met those criteria by using quantitative survey data and qualitative interviews which correlated appropriately to their corresponding research questions. Both types of data were analyzed separately and then combined for an enhanced understanding (Creswell & Zhang, 2009).

For this study, the quantitative data results added measurable data to the results for understanding teacher’s perceived effectiveness and teachers’ perceived usage of the TIEP strategies. The addition of the open-ended qualitative questions and a teacher interview, enhance the quantitative data by qualitatively explaining those effects in more detail. The open-ended questionnaire also allowed participants to explain why a particular trauma-informed educational practice did or did not work. The integration of the quantitative and qualitative data involved merging the results from each method for comparison (see Figure 3.1). For this study, the scores of the quantitative survey were merged with the open-ended questionnaire responses. Both types of data provided results but merging the quantitative and qualitative results allows for a more complete and thorough understanding.
Quantitative Teacher Surveys and Checklist

The first survey instrument for this study examines teacher participants with a collection of demographics information and information about their teaching certifications and grade levels taught. There is also a question asking if the teachers have participated in any additional trauma trainings (not including the district training including in the gatekeeper questions). Following the demographics inquiry, quantitative data was collected when teachers reported the effectiveness of the TIEP strategies in the classroom. Teachers rated their perceived effectiveness of the TIEP strategies using a 5-point Likert Scale. Teachers could rate the effectiveness of each of the nine TIEP strategies as Not Effective, Somewhat Effective, Effective, Mostly Effective or Extremely Effective.
A Qualtrics survey was also used for data collection for Research Sub-Question 2. On this survey, teachers were asked to rate their perceived usage of the TIEP strategies in their classroom over the course of a week. Teachers reported their usage on a 6-point rating scale that included the options of *Never, 1 Time Per Week, 2-3 Times Per Week, 4-5 Times per Week, Daily, or Multiple Times Per Week.*

Likert-scales were created in the 1930s and are a survey questionnaire that is structured and commonly used in social science fields (Chyung et al., 2018). The format of this scale "uses a symmetrical (bipolar) format with disagreement options on one side, agreement options on the other side, and a neutral option in the middle" (Chyung et al., 2018, p. 38). The Likert-scale is evidence-based and, for the purpose of this study, offered a discrete five-point answer choice scale (Chyung et al., 2018). For this study, the Likert-scale answer choices are ordered from the lowest rating to the highest rating. For Research-Sub Question 1, on the survey the answer choices were *Not Effective, Somewhat Effective, Mostly Effective or Extremely Effective.*

Chyung et al. (2018) stated that a benefit to using a Likert-scale is that the scale generates high completion rates when compared with other types of rating scales. This type of discreet Likert-scale has been proven to be both reliable and valid in research (Chyung et al., 2018).

The answer choices for the Research Sub-Question 2 followed in a similar pattern to the Likert-Scale, but have a 6-point rating scale for answer choices. These answer choices were ordered as *Never, 1 Time Per Week, 2-3 Times Per Week, Daily, or Multiple Times Per Week.*

**Teacher Checklist**

After the completion of the teacher survey regarding teacher perception of the effectiveness and usage of the TIEP strategies, teachers were asked to report on their implementation of the TIEP strategies in the classroom. This phase of data collection was
intended to take place over 10 days. Teachers used a daily checklist, with a list of all nine TIEP strategies to record if they did or did not use each strategy for that day of the study. This checklist also contained open-ended questions for teachers to elaborate on their decision for implementation of the TIEP strategies each day. The first open-ended question asks the teachers to share the context of how they used one of the Trauma-Informed Educational Practices. This question also reminds teachers not to use any specific information, such as student names, in their answers when they share information about which of the TIEP strategies they used and what prompted this use. The second open-ended question asks the teachers, without sharing specific details like student names, to share the outcome of the Trauma-Informed Educational Practice they used. The third open-ended question asks teachers to report which TIEP strategies worked better than others or if any of the TIEP practices did not work.

**Qualitative Teacher Interview**

Part of the examination of implementation of the TIEP strategies in the classroom was a teacher interview. This follow-up interview took place after the teachers had completed the teacher checklist. The qualitative instrument used was a semi-structured teacher interview. This interview allowed the teacher participants who volunteered to participate in this portion of the study, to share their experiences using the TIEP strategies. The interview was semi-structured (Creswell & Plano Clark, 2018) and included specific questions to start the flow of the interview. However, based on participant’s responses, I was able to guide the interview to delve deeper into various aspect of the TIEP strategies.

I conducted the interviews with the participants and started each interview by asking about their experiences implementing the TIEP strategies in their classroom. Then, I continued the interview by asked about the teacher’s experience with the implementation of other TIEP
strategies. The process continued until the teacher participant had time to report on each of the TIEP strategies they used or did not use. For example, if the teacher reported a significant experience for four of the TIEP strategies when answering the open-ended questions on the teacher checklist, the researcher asked about those four strategies. If the teacher reported using fewer than four strategies, the researcher asked about fewer strategies. Since it was a semi-structured interview, in response to my questions, if the teacher took a different direction with the interview, I followed the teachers lead.

**Triangulation**

For this study, I used triangulation to enhance the validity of the data. Merriam (1998) stated that the use of multiple data sources and multiple methods can validate or confirm the emerging findings of a study (p. 204). This study used surveys, interviews, and checklists s to have varied sources of data and information. Yin (2003) stated that using multiple sources of evidence and “converging lines of inquiry” allow for conclusions to be “much more accurate and convincing” (p. 98). Yin (2003) continued that using multiple sources of evidence to study the same phenomenon also enhance validity.

Merriam (1998) suggested member checking by taking data back to participants and reviewing the data (p. 204). The researcher member checked through follow-up interviews that clarify or contest the participants’ original survey answers. This follow-up interview would contain qualitative data and confirm or clarify the participants’ original survey answers which were quantitative. Woodside (2008) concurred that the use of mixed methods in case study research can contribute to improved accurateness. Research Sub-Question 3 included the quantitative teacher checklist and the qualitative follow-up teacher interview which provided both data triangulation and multiple vantage points from which I could better understand the
manifestation of the TIEP strategies. By using a mixed methods approach and collecting data from multiple data sources, using multiple methods to collect the same data, multiple methods it is possible to find that different methods can corroborate a participant’s opinion to be more valid or a different method can demonstrate a participant’s opinion to perhaps be contradictory (Woodside, 2008). If a participant takes a survey and is also interviewed for a research study, there are at least two outcomes. One outcome would be that during the follow-up interview, the participant confirms all of the answer choices they made with the survey. A second outcome could be that the participant chose a survey answer that was most closely aligned to their point of view. However, in the follow-up interview, they could explain that a different answer, not provided on the survey, would have been more accurate.

The researcher conducted a thorough review of the literature with the vast researchers and studies found in this research. This allows for a foundation of ideas and components of the study that is strong and research based. Merriam (1998) suggested that another way of ensuring that the data is valid and reliable, is to have the researcher ask a colleague to also examine the findings. This will be done by the researcher and will allow for an additional set of eyes on the data as it emerges and will help keep researcher bias in check.

**Threats to Validity and Reliability**

Validity and reliability are necessary to ensure that a research study is accurate and without bias (see Figure 3.2). The survey and checklist portions of this study asked teachers to self-report their answers. The same idea was true for the survey which examined teacher perceived usage of the TIEP strategies over the course of a week. Merriam (1998) posited that participants are more honest when they report their own answers through self-reporting. By self-
reporting their answers, teachers could have been more honest and accurate in their reported answers.

For the Zoom interview, participants were given an anonymous link to sign up. After the interview, teacher participants were given the option of viewing their transcript to check their reported answers to check for accuracy (Yazan, 2015).

When I conducted the interview, I collected the data. In other examples of the study a survey or checklist was used to collect data, so bias was not a concern. However, as I used a semi-structured approach for the interviews, it was important to use triangulation, later when transcribing the interviews. Recording the interview over Zoom was very important because it preserved the integrity of the interview because the transcript provided would be as accurate as possible. Also, by having the Zoom interviews recorded I could review the interview for to assert and confirm accuracy.

The data instruments for this study were a survey, a teacher checklist, and a teacher interview. This variety of data allowed for a further triangulation of data. By keeping the integrity of the teachers’ responses when I reported results, I was able to keep my unconscious and conscious bias from the results.
Analysis and Coding Procedures

**Analysis for Teacher Perception of the Effectiveness of the TIEP Strategies**

The teacher survey data regarding teacher perception of the effectiveness of the TIEP strategies (see Appendix C), was collected using Qualtrics. On this survey, teachers reported the effectiveness of the TIEP strategies. Teachers rated the effectiveness asked the teachers to use a 5-point Likert-scale to rate how effective they perceived the Trauma-Informed Educational Practices when maintaining a positive classroom environment. The Likert-scale rating for this question allowed teachers to rate their perception of each of the Trauma-Informed Educational Practices as being *Not Effective, Somewhat Effective, Mostly Effective or Extremely Effective*. The results from Qualtrics were exported and imported into SPSS. The database was checked for errors or missing data. I numerically coded each variable to correspond to the answer choice then used descriptive coding to analyze the results.
Analysis for Teacher Perceived Usage of the TIEP Strategies

The survey data regarding teacher perceived usage of the TIEP strategies in the classroom was collected similarly to the data regarding teachers’ perceived effectiveness. Teachers reported their perceived usage of the TIEP strategies into a Qualtrics survey (see Appendix C). The data was exported from Qualtrics and uploaded into SPSS. This data was also checked for errors or missing data, but independently of the data for perceived effectiveness.

The survey asked teachers to use a 6-point rating scale regarding how often they perceived using each of the Trauma-Informed Educational Practices in the classroom over the course of a week. The 6-point scale rating for this question will allow teachers to rate their usage of the nine Trauma-Informed Educational Practices with the options of Never, 1 Time Per Week, 2-3 Times Per Week, Daily, or Multiple Times Per Week.

Analysis for Teacher Perceived Implementation of the TIEP Strategies in the Classroom

For Research Sub-Question 3, teachers filled out a daily teacher checklist (see Appendix D). This checklist was given to teachers both electronically and on paper. On this checklist, teachers kept track of whether they did or did not use each of the nine Trauma-Informed Educational Practices in their classroom each day. The quantitative data from the teacher checklist was exported from Qualtrics and uploaded into SPSS. There were also open-ended questions at the end of the teacher checklist.

All of the electronic Qualtrics data from the checklists and the open-ended questions was uploaded into SPSS. All of the data form the paper copies was carefully and purposefully entered into Microsoft Excel and then uploaded into SPSS. My advisor worked with me as another set of eyes to check the data for missing information and accuracy. The checklist responses were sorted
and analyzed using descriptive statistics. The open-ended questions were analyzed in Dedoose using a priori coding.

**Analysis for RSQ 3 Qualitative Teacher Interview Qualitative**

The teacher interview for Research Sub-Question 3, gave teachers an opportunity to elaborate on the answers they gave on the teacher checklist. Teacher interview responses were transcribed using Zoom and then imported into Dedoose. I used descriptive coding to analyze the data. I studied the qualitative teacher results independently from any other methods or results and looked for themes using a priori coding. I also looked for new themes that emerged from the data analysis.

**Convergent Analysis**

After gathering the data and analysis that have been conducted separately, I merged the results of the quantitative and qualitative data to analyze the data together to look for emerging themes from the convergent data that could further enhance my findings. In addition, I examined where the results data analysis merged and diverged from the independent analyses.
Summary

In this convergent mixed methods case study, I aimed to understand the implementation of Trauma-Informed Educational Practices in the middle school classroom. Through surveys I looked to understand both teacher perception of the effectiveness of the TIEP strategies, and teacher perception of their usage of the TIEP strategies. With a teacher checklist, I gained insight into teacher implementation of the TIEP strategies. Finally, the follow-up teacher interviews provided a discussion of strategies from the teacher participants’ points of view and an explanation of their choices.
Chapter IV: Results

In this study, I examined teachers’ perceptions and implementation of Trauma-Informed Educational Practices in middle school classrooms. The overall research question for this study was *How do middle school teachers perceive and use Trauma-Informed Educational Practices to support their students during the COVID-19 pandemic?* I explored this question through the following three sub-questions:

1. How do teachers perceive the effectiveness of the Trauma-Informed Educational Practices?
2. How often do teachers perceive they use the Trauma-Informed Educational Practices in the classroom?
3. In what ways do Trauma-Informed Educational Practices manifest themselves in the classroom?

My initial discussion of the data in this chapter, I describe the results of the teacher participants reported demographics, teaching certifications, subjects and grades taught, and any experiences with additional trauma training. After a discussion of teacher demographics and certifications, I will address the results regarding teacher conceptualization of the Trauma-Informed Educational Practices (TIEP) in their classrooms. Figure 4.1 (below) displays the flow and parts of the study that I will describe.
This discussion of results begins with Research Sub-Question 1, which explains teacher conceptualization of the TIEP strategies by asking, “How do teachers perceive the effectiveness of the Trauma-Informed Educational Practices?” Teachers recorded their perceived effectiveness of the TIEP strategies using a Qualtrics survey. The quantitative data from this survey was exported from Qualtrics and imported into SPSS for analysis.

For Research Sub-Question 2, I collected quantitative data from teacher participants using a Qualtrics survey to explore the question, “How often do teachers perceive they use the Trauma-Informed Educational Practices in the classroom? For this second phase of the study, teachers were asked to report, “During the course of a school week, how often do you perceive you use each of the following TIEP in your classroom?” I uploaded the teacher reported data from this quantitative Qualtrics survey into SPSS to test for validity. I used descriptive statistics to find frequencies, means, standard deviations, and correlations.
In the next phase of the study (Research Sub-Question 3), I queried “In what ways do Trauma-Informed Educational Practices manifest themselves in the classroom?” To study the implementation of the TIEP strategies, teachers received a daily teacher checklist which examined how teachers perceived they implemented each of the TIEP strategies in their classroom. The teacher checklist was provided both electronically, through Qualtrics, and with a paper copy. These two options allowed teachers to choose their preferred method of data reporting.

The daily teacher checklist asked teachers, “Please use the checklist below to keep track of which TIEP strategies you used in your classroom for the date of the study you selected above.” Next to each of the nine TIEP strategies listed on the teacher checklist, teachers indicated if they did or did not use each of the nine TIEP strategies for each day of this phase of the study. Following this quantitative indication of the implementation of the TIEP strategies, the teacher checklist contained open-ended questions for teachers to explain their choices for using or not using each TIEP strategy and describe the outcome(s) of their choices. This open-ended section included the following questions: (a) “Without providing specific details (i.e., no student names), what was the behavior exhibited in your classroom that made you decide to use a TIEP strategy?”; (b) “Overall, how effective do you feel the TIEP practices were?”; (c) “Which TIEP strategy (or strategies) worked better than others?”; and (d) “Which TIEP strategy (or strategies) did not work?”

The data from the teacher checklists that teachers answered electronically was exported from Qualtrics and uploaded into SPSS. The data from teacher checklists that teachers answered on the paper copies were carefully and purposely input into Microsoft Excel. Following the data input into Microsoft Excel, my dissertation advisor reviewed the data for accuracy before I
uploaded the data into SPSS to test for validity. The quantitative data from the teacher checklists were analyzed in SPSS using descriptive statistics. The data from the open-ended questions was imported into Dedoose. In Dedoose, I analyzed the data using descriptive coding with the a priori themes from the nine TIEP strategies. I also reviewed the data for additional themes that emerged from the descriptive coding. A final component for understanding Research Sub-Question 3 included a qualitative voluntary follow-up teacher interview. These teacher interviews were held virtually using the Zoom platform for transcription purposes. During the interviews, teachers were asked to elaborate on their decisions for using specific TIEP strategies and explain the outcomes. The purposeful choice of using three data sources to answer Research Sub-Question 3: the quantitative teacher checklist, the open-ended questions on the checklist, and the qualitative follow-up teacher interview provided both data triangulation and multiple vantage points from which I could better understand the manifestation of the TIEP strategies.

The final part of this discussion is sectioned into themes representing each of the nine TIEP strategies explored in this research: (a) creating a safe and supportive classrooms environment, (b) connecting with students to create trusting and comfortable relationships, (c) promoting a predictable and consistent classroom environment, expecting unexpected responses, (d) encouraging students to think positively (e) interacting in a thoughtful manner with students, (f) staying calm and expecting unexpected responses, (g) limited exclusionary practices, (h) finding ways to use positive and supportive feedback, (i) creating islands of competence for students by using positive praise.

**Demographics and Teaching Experience**

Over 40 participants were invited to take part in this study, resulting in 22 teachers giving consent to participate. However, because of COVID-19 pandemic-related factors, only 18 of the
22 participants were able to complete the survey for demographics and certification information (see Tables 4.1 and 4.2).

One of the gatekeeper questions to participate in this study requisitioned that teachers were required to currently be teaching a core subject (ELA, History, Math, or Science). The data displays that majority of the teachers in this study (55.6%) reported teaching ELA, while the rest of the participants taught Math (18.2%), Science (16.7%), and History (5.6%).

Another gatekeeper question for this study required participants to note whether they taught their reported core subject(s) (ELA, history, math, or science) to 6th-, 7th-, or 8th-grade students, the grades housed in the middle school that was the setting for this study (see Table 4.1). Overall, 50% of the teacher participants reported teaching 6th grade, 27.8% reported teaching 7th grade, and 22.2% reported teaching 8th grade.

In addition to holding a valid teaching certificate, teachers also reported any specialized certifications or training they had prior to the study in trauma-related areas (see Table 4.1). This training varied for and included topics such as First Responder Training, Suicide Prevention Training, Social Emotional Learning (SEL), Mental Health First Aid Training, Mandated Reporter for Child Abuse Training, and Student Assistance Programs (SAP) Training for participation in school’s Multi-Tiered System of Supports (MTSS) Team.
Table 4.1

Demographics

<table>
<thead>
<tr>
<th>Gender</th>
<th>n</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male (Including Transgender Men)</td>
<td>5</td>
<td>27.8%</td>
</tr>
<tr>
<td>Female (Including Transgender Women)</td>
<td>13</td>
<td>72.2%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>14</td>
<td>77.8%</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>1</td>
<td>5.6%</td>
</tr>
<tr>
<td>Native Hawaiian/Other Pacific Islander</td>
<td>1</td>
<td>5.6%</td>
</tr>
<tr>
<td>Mixed or Multiracial</td>
<td>1</td>
<td>5.6%</td>
</tr>
<tr>
<td>Prefer not to share</td>
<td>1</td>
<td>5.6%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Core Subject(s) Taught</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>English/Language Arts (ELA)</td>
<td>10</td>
<td>55.6%</td>
</tr>
<tr>
<td>History</td>
<td>1</td>
<td>5.6%</td>
</tr>
<tr>
<td>Math</td>
<td>4</td>
<td>22.2%</td>
</tr>
<tr>
<td>Science</td>
<td>3</td>
<td>16.7%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Grade(s) Taught</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6th grade</td>
<td>9</td>
<td>50.00%</td>
</tr>
<tr>
<td>7th grade</td>
<td>5</td>
<td>27.80%</td>
</tr>
<tr>
<td>8th grade</td>
<td>4</td>
<td>22.20%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Additional Trauma Training</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Abuse Reporting</td>
<td>1</td>
<td>5.6%</td>
</tr>
<tr>
<td>First Responder</td>
<td>1</td>
<td>5.6%</td>
</tr>
<tr>
<td>Mental Health First Aid</td>
<td>2</td>
<td>11.1%</td>
</tr>
<tr>
<td>Student Assistance Program Training</td>
<td>2</td>
<td>11.1%</td>
</tr>
<tr>
<td>Social Emotional Learning (SEL) Training</td>
<td>2</td>
<td>11.1%</td>
</tr>
<tr>
<td>Suicide Prevention Training</td>
<td>2</td>
<td>11.1%</td>
</tr>
<tr>
<td>Other Trauma Training</td>
<td>1</td>
<td>5.6%</td>
</tr>
<tr>
<td>None</td>
<td>7</td>
<td>38.9%</td>
</tr>
</tbody>
</table>
Table 4.2

Demographics and Certifications: Part 2

<table>
<thead>
<tr>
<th>Areas of Certification</th>
<th>n</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communications</td>
<td>1</td>
<td>2.4%</td>
</tr>
<tr>
<td>Early Childhood Education</td>
<td>2</td>
<td>4.9%</td>
</tr>
<tr>
<td>Elementary Education</td>
<td>11</td>
<td>26.8%</td>
</tr>
<tr>
<td>ELL</td>
<td>2</td>
<td>4.9%</td>
</tr>
<tr>
<td>English</td>
<td>3</td>
<td>7.3%</td>
</tr>
<tr>
<td>History</td>
<td>1</td>
<td>2.4%</td>
</tr>
<tr>
<td>MA Educational Technology</td>
<td>1</td>
<td>2.4%</td>
</tr>
<tr>
<td>Math</td>
<td>5</td>
<td>12.2%</td>
</tr>
<tr>
<td>Principal Certification</td>
<td>1</td>
<td>2.4%</td>
</tr>
<tr>
<td>Reading Specialist</td>
<td>4</td>
<td>9.8%</td>
</tr>
<tr>
<td>Science</td>
<td>3</td>
<td>7.3%</td>
</tr>
<tr>
<td>Special Education</td>
<td>7</td>
<td>17.1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Years with Valid Teaching Certification</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3</td>
<td>16.7%</td>
</tr>
<tr>
<td>4</td>
<td>1</td>
<td>5.6%</td>
</tr>
<tr>
<td>7</td>
<td>1</td>
<td>5.6%</td>
</tr>
<tr>
<td>10</td>
<td>2</td>
<td>11.1%</td>
</tr>
<tr>
<td>More than 10 Years</td>
<td>11</td>
<td>61.1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Years Certified in Grades 6, 7, and/or 8</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3</td>
<td>16.70%</td>
</tr>
<tr>
<td>3</td>
<td>1</td>
<td>5.60%</td>
</tr>
<tr>
<td>4</td>
<td>1</td>
<td>5.60%</td>
</tr>
<tr>
<td>5</td>
<td>2</td>
<td>11.10%</td>
</tr>
<tr>
<td>6</td>
<td>1</td>
<td>5.60%</td>
</tr>
<tr>
<td>7</td>
<td>1</td>
<td>5.60%</td>
</tr>
<tr>
<td>10</td>
<td>2</td>
<td>11.10%</td>
</tr>
<tr>
<td>More Than 10 Years</td>
<td>7</td>
<td>38.90%</td>
</tr>
</tbody>
</table>

For this study, teacher participants were asked to report their areas of teaching certifications (see Table 4.2). Teaching certifications are known to change over the years, mostly in regards to the grade level bands that the certification covers. For example, teacher participants Cecelia and Anna reported holding an Elementary Education certification. Cecilia’s Elementary Education certification is for grades Kindergarten through 6th grade (K-6), and one of Anna’s
certification is for grades Pre-Kindergarten through 4th grade (PreK-4). For this study, Cecelia’s Elementary Education K-6 certification and Anna’s Elementary Education PreK-4 certification were both reported as Elementary Education certifications without the grade level band distinction.

Of the 18 participants that reported gender (see Table 4.1), the majority, 72.2%, identified as female (including transgender women), and 27.8% of teacher participants identified as male (including transgender men). Teacher participants also reported their race/ethnicity (see Table 4.1). Of the participants, 77.8% identified as white, 5.6% identified as Hispanic or Latino, 5.6% identified as Native Hawaiian or Other Pacific Islander, 5.6% identified as Mixed or Multiracial, and 5.6% chose the option of “prefer not to share”.

Each teacher reported their duration of holding valid teaching license (see Table 4.2). In total, 7.2% of teachers reported being certified to teach middle school for 10 years or more, 11.6% of teachers reported being certified to teach middle school for 4-7 years, and 16.7% reported being certified to teach middle for 1 year. To further clarify teacher usage of their certifications, participants reported how many years they have taught middle school grades 6, 7, or 8 (see Table 4.2). As this research was a case study a middle school in the mid-Atlantic region of the United States, this data was important as the specific school supports grades 6, 7, and 8, which are considered “middle school” grades. Teachers were asked to include both in-classroom teaching and virtual teaching that occurred as a result of the COVID-19 pandemic. Overall, 50% of teachers reported teaching middle school for 10 or more years, 27.9% reported teaching middle school for 4-7 years, and 22.3% reported teaching middle school for 1-3 years.
**Study Results**

The overarching research question for this study examined, “How do middle school teachers perceive and use Trauma-Informed Educational Practices to support their students during the COVID-19 pandemic?” The following sections will describe the results of the data collection and analysis for each of three research sub-questions used in this study. The discussion continues with an in-depth look at teachers’ perceptions of their implementation of the TIEP strategies.

**Data Collection and Analyzation for Research Sub-Question 1: Teacher Perception of Effectiveness of the TIEP Strategies**

Teachers rated their perceived effectiveness of each TIEP strategy to answer Research Sub-Question 1, Teacher participants were given a Qualtrics survey and rated their perception of effectiveness for each TIEP strategy using a 5-point Likert-scale rating with the options of *Not Effective, Somewhat Effective, Mostly Effective, or Extremely Effective*. The information below (see Table 4.3) displays a comprehensive look at teacher perceived effectiveness of each of the TIEP strategies.
Table 4.3

*Teacher Perceived Effectiveness of the TIEP Strategies*

<table>
<thead>
<tr>
<th>TIEP Strategy</th>
<th>Not Effective</th>
<th>Somewhat Effective</th>
<th>Mostly Effective</th>
<th>Effective</th>
<th>Extremely Effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe and Supportive Classroom</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>33.30%</td>
<td>66.70%</td>
</tr>
<tr>
<td>Connecting with Students</td>
<td>0%</td>
<td>5.60%</td>
<td>11.10%</td>
<td>27.80%</td>
<td>55.60%</td>
</tr>
<tr>
<td>Predictable/ Consistent Classroom</td>
<td>0%</td>
<td>0%</td>
<td>11.10%</td>
<td>33.30%</td>
<td>55.60%</td>
</tr>
<tr>
<td>Encouraging Positive Thinking</td>
<td>0%</td>
<td>11.10%</td>
<td>0%</td>
<td>44.40%</td>
<td>44.40%</td>
</tr>
<tr>
<td>Interacting Thoughtfully</td>
<td>0%</td>
<td>5.60%</td>
<td>5.60%</td>
<td>38.90%</td>
<td>50.00%</td>
</tr>
<tr>
<td>Staying Calm and Expecting Unexpected Responses</td>
<td>0%</td>
<td>0%</td>
<td>11.10%</td>
<td>33.30%</td>
<td>55.60%</td>
</tr>
<tr>
<td>Limiting Exclusionary Practices</td>
<td>0%</td>
<td>11.10%</td>
<td>27.80%</td>
<td>27.80%</td>
<td>33.30%</td>
</tr>
<tr>
<td>Using Positive/ Supportive Feedback</td>
<td>0%</td>
<td>0%</td>
<td>11.10%</td>
<td>38.90%</td>
<td>50.00%</td>
</tr>
<tr>
<td>Using Positive Praise</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>50.00%</td>
<td>50.00%</td>
</tr>
</tbody>
</table>

Since it is generally not advised to look at the mean of Likert scale data, it is useful to look at the distribution of the data across the five ordinal data points for each TIEP. In general, it is clear that the teachers found perceived that each of the strategies were effective or extremely effective, with limiting exclusionary practices have a somewhat different distribution that the rest of the rest of the TIEP.
Teacher Perceived Usage of the TIEP Strategies

Once teacher participants reported the perceived effectiveness of each practice, they rated how often they perceived they used each practice during a school week (see Table 4.4). The question for Research Sub-Question 2 that was examined for this phase of the study was “During the course of a school week, how often do you use each of the following TIEP strategies in your classroom?” The answer options for this question were given in the form of a 6-point rating scale with the options of Never, 1 Time Per Week, 2-3 Times Per Week, 4-5 Times per Week, Daily, or Multiple Times Per Week. The average school week is 5 days long, and because of this overlap, I made a purposeful decision to combine the results for 4-5 Times per Week and Daily in the analysis. Below are detailed results of teachers’ perceived usage of each of the TIEP strategies (see Table 4.4).
Table 4.4

Teacher Perceived Usage of the TIEP Strategies

<table>
<thead>
<tr>
<th>TIEP Strategy</th>
<th>Never</th>
<th>1 Time per Week</th>
<th>2-3 Times per Week</th>
<th>4-5 Times per Week</th>
<th>Multiple Times Each Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe and Supportive Classroom</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>0%</td>
<td>33.3%</td>
</tr>
<tr>
<td>Connecting with Students</td>
<td>0%</td>
<td>0%</td>
<td>38.9%</td>
<td>5.6%</td>
<td>16.7%</td>
</tr>
<tr>
<td>Predictable/Consistent Classroom</td>
<td>0%</td>
<td>0%</td>
<td>11.1%</td>
<td>0%</td>
<td>33.3%</td>
</tr>
<tr>
<td>Encouraging Positive Thinking</td>
<td>0%</td>
<td>0%</td>
<td>22.2%</td>
<td>11.1%</td>
<td>38.9%</td>
</tr>
<tr>
<td>Interacting Thoughtfully</td>
<td>0%</td>
<td>0%</td>
<td>16.7%</td>
<td>16.7%</td>
<td>27.8%</td>
</tr>
<tr>
<td>Staying Calm and Expecting Unexpected Responses</td>
<td>0%</td>
<td>11.1%</td>
<td>11.1%</td>
<td>5.6%</td>
<td>44.4%</td>
</tr>
<tr>
<td>Limiting Exclusionary Practices</td>
<td>5.6%</td>
<td>5.6%</td>
<td>5.6%</td>
<td>11.1%</td>
<td>22.2%</td>
</tr>
<tr>
<td>Using Positive/Supportive Feedback</td>
<td>0%</td>
<td>5.6%</td>
<td>27.8%</td>
<td>11.1%</td>
<td>27.8%</td>
</tr>
<tr>
<td>Using Positive Praise</td>
<td>0%</td>
<td>0%</td>
<td>16.7%</td>
<td>22.2%</td>
<td>27.8%</td>
</tr>
</tbody>
</table>

Overall, teachers participating in this study reported frequently using all TIEP strategies, with most teachers using the majority of strategies at least once per day.
**Teacher Perceived Implementation of the TIEP Strategies**

With Research Sub-Question 3, I explored the question, “In what ways do Trauma-Informed Educational Practices manifest themselves in the classroom?” For this phase of the study, teachers received a daily teacher checklist to report which of the nine TIEP strategies teachers actually used in their classroom each day and how or why they used them. Next to each of the nine TIEP strategies listed on the survey was the option to select *I Used this Strategy Today* or *I Did Not use this Strategy Today*. After teachers reported using or not using each of the TIEP strategies for that day of the study, they answered the open-ended questions to further explain their choices and the outcomes of their decisions. All 22 participants that gave consent for the study participated in the case study phase of the study. I purposefully chose to include the data from all 22 participants that reported information using the teacher checklist and interview. This purposeful decision was made to provide the most comprehensive understanding of implementation of the strategies. The results are reported below (see Table 4.5) as percentages representing the number of days teachers reported using the strategy compared to the total days they completed the checklist.
Table 4.5

Average Percentage of Perceived Implementation of the TIEP Strategies

<table>
<thead>
<tr>
<th>TIEP Strategy</th>
<th>Perceived Implementation (% of Days Implemented)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe and Supportive Classroom</td>
<td>97.31%</td>
</tr>
<tr>
<td>Connecting with Students</td>
<td>66.99%</td>
</tr>
<tr>
<td>Predictable/ Consistent Classroom</td>
<td>93.90%</td>
</tr>
<tr>
<td>Encouraging Positive Thinking</td>
<td>57.33%</td>
</tr>
<tr>
<td>Interacting Thoughtfully</td>
<td>89.95%</td>
</tr>
<tr>
<td>Staying Calm and Expecting Unexpected Responses</td>
<td>54.38%</td>
</tr>
<tr>
<td>Limiting Exclusionary Practices</td>
<td>55.70%</td>
</tr>
<tr>
<td>Using Positive/ Supportive Feedback</td>
<td>60.83%</td>
</tr>
<tr>
<td>Using Positive Praise</td>
<td>78.39%</td>
</tr>
</tbody>
</table>

Overall, teacher participants relied most often on the TIEP strategies of creating a safe and supportive environment (utilized 97.31% of days teachers completed the checklists) and creating a predictable and consistent classroom (utilized 93.90% of days teachers completed the checklists). Teachers employed the TIEP strategies of limiting exclusionary practices (55.70% of days), staying calm and expecting unexpected responses (54.38% of days), and encouraging positive thinking (57.33% of days) less often in their classrooms. In the following sections, I will share the qualitative data that helps to explain the initial patterns seen in the quantitative data.
Creating a Safe and Supportive Classroom Environment

There are many aspects to creating a safe and supportive classroom environment, and teacher participants in this study reported this in the open-ended questions from the teacher checklist and in their teacher interviews. These facets for Creating a Safe and Supportive Classroom also overlapped with several of the other TIEP strategies outlined in this chapter. Teacher participants revealed that Creating a Safe and Supportive Classroom Environment was of utmost priority and should happen at the start of each school year. Teachers also reported that their perceived successful implementation of a safe and supportive classroom environment was a catalyst for the successful implementation of other TIEP strategies. In the following sub-sections, I will explain how teachers perceived the effectiveness of a safe and supportive classroom and then describe how teachers implemented the strategy of creating a safe and supportive classroom environment.

Teachers’ Perceptions of Practices to Create a Safe and Supportive Classroom Environment. A teacher’s role is to create a safe and comfortable learning environment for their students (Venet, 2019) which can occur from using the trauma-informed practices outlined in this study. In this study, teacher participants rated how effective they perceived each of the Trauma-Informed Educational Practices would be when maintaining a positive classroom environment. Teachers shared their perceptions about using these practices to create a safe and supportive classroom environment prior to completing the checklist to report on their daily use of these specific practices in their classroom. For the practice of Creating a Safe and Supportive Classroom Environment for Students (see Table 4.5), 100% of teachers perceived this would be an effective or very effective practice to support students that have experienced trauma, including those that have experienced trauma from the COVID-19 pandemic.
Implementation of Strategies to Create a Safe and Supportive Classroom Environment. Creating a safe and supportive classroom environment is a foundation for many of the TIEP strategies in this study. Teacher participants in this study reported implementing the strategy of *Creating a Safe and Supportive Classroom Environment* (see Table 4.5) on an average of 97.31% percent of the days they completed the teacher checklist. After recording their implementation of the practice on the checklist, teachers were asked to elaborate on their implementation of the practice. John, one of the teacher participants, explained his choices, “Creating a safe and supportive classroom environment for … students is very effective and something that I practice every day” (Interview, John). Erik echoed John’s experience and described a time when he had a student fall asleep in class. He shared that instead of expressing his frustration with the student and embarrassing them by waking them up in front of the class, Erik chose to speak to the student privately after class. Erik reported that during this conversation he did not reprimand the student for sleeping in class, and instead, he calmly expressed his concern for the student’s health and overall well-being (Interview, Erik). By addressing the student in a space where they felt safe and supported, Erik and the student were able to have a calm and productive discussion. Erik perceived that this calm and productive discussion also allowed the student to process what Erik was saying and understand that Erik was not upset, but only trying to offer support. Erik posited that creating a safe and supportive classroom environment was “very effective” in this situation (Interview, Erik). Erik took the time to show a student that he cared about their overall health and well-being, which fostered the safe and supportive nature of the classroom environment.

Mary and Catherine reiterated in their joint interview that they perceived that creating a safe classroom space allowed them to meet the needs of their students. Specifically, they
perceived that students would not be ready or able to learn without a safe and supportive classroom. Mary assesses student learning through class discussion. Mary explained the protocol she uses for discussing books in her classes. Once Mary has created a safe and supportive classroom environment, the discussion protocol requires all students to speak and participate in the class discussion to demonstrate their knowledge. Mary revealed that by the end of the discussion, she knew some students had not spoken. She posited that “instead of pointing fingers,” she later calmly asked each of the students who had not spoken, “What was going on?” (Interview, Mary). In response, the students did not share their opinions of the book, but rather what was happening in their lives at the time. Mary revealed that by supporting her students and not getting frustrated at them for not speaking in the discussion, the students remained calm. The importance of the safe and supportive environment that Mary fostered appeared more evident when the students came up with the solution of emailing Mary their responses when they were unable to participate in the discussion.

Mary found that supporting her students also encourages them to participate in whatever way is best for them. Teacher participant, Rosa, concurred, “When students feel supported, and they feel comfortable…that’s when they’re really going to open up” (Interview, Rosa). Rosa also necessitated that creating a safe and supportive classroom environment must begin on “the very first day of school…as soon as [the students] step into the classroom…until you get to know [the students], you can’t do any academic learning” (Interview, Rosa). By prioritizing the TIEP strategy of making her classroom a safe and supportive environment, Rosa found ways that her students could learn more effectively.

Given that Rosa teaches in different classrooms around the school, she said she must create safe spaces in at least four different classrooms a day. When describing the complexity of
her traveling teacher role, Rosa explained that she puts great effort into creating safe and supportive environments so that no matter where her classes are held, her students feel comfortable (Interview, Rosa). Instead of just one safe space, Rosa’s students have at least four. Rosa found this practice to be “productive and effective” as she is a teacher that brings the safe space with her and shares it with her students (Interview, Rosa). Regardless of the classroom she is using, Rosa’s ability to create four safe and supportive classrooms at the start of the year provides secure places for her students to learn.

Teacher Grace also described the importance of creating a safe and supportive classroom. At the beginning of each school year, Grace spends three and a half weeks setting up her safe and supportive classroom environment. Grace reported that creating a safe and supportive environment in the beginning of the year allows her implementation of other TIEP strategies to be more effective (Interview, Grace). In the space of the supportive environment, Grace spends a significant amount of time working with her students on positive affirmations. The affirmations that Grace shares with her students are part of their routine for the beginning of class and started at the very beginning of the school year.

By leveraging the safe and supportive classroom she created, Grace perceives that her students are comfortable expressing their self-worth even when school is hard and they are struggling with content or social interactions of middle school. In spending time at the beginning of the year creating a safe and supportive classroom, including affirmation and breathing techniques, Grace provides her students with what she perceives is a positive environment to learn.
Connecting with Students to Create Trusting and Comfortable Relationships

The experience or perceived experience of trauma may leave students feeling isolated and unable to create sustainable relationships at school (Minahan, 2019b). A student’s inability to construct sustainable relationships provides an opportunity for educators to create meaningful connections with students. Connections between a child and a caregiver, or educator, play a significant role in combatting the effects of childhood trauma (Rishel et al. (2019). These connections can create a sense of safety and belonging for students when at school (Blodgett & Dorado, 2016). In the subsequent sections, I will explain how teachers perceived the effectiveness of Connecting with Students to Create Trusting and Comfortable Relationships and then describe how teachers implemented the strategy of Connecting with Students to Create Trusting and Comfortable Relationships.

**Teachers’ Perceptions of Practices to Connect with Students to Create Trusting and Comfortable Relationships.** The process of creating a safe and supportive classroom environment can also provide teachers with moments to connect and build trust with their students. These moments of trust lead to creating trusting and supportive relationships with students. These relationships are a necessary foundation for the success of trauma-informed approaches (Brooks, 1998; O’Connor et al., 2007; Blodgett & Dorado, 2016; Jennings & Siegel, 2019), including the TIEP strategies discussed in this paper.

Creating a relationship through trauma-informed approaches can allow the teacher to become a system of comfort and support for their students (Bell et al., 2013). For the practice of Connecting with Students to Create Trusting and Comfortable Relationships (see Table 4.3), 16.7% of teachers perceived this strategy to be somewhat effective or mostly effective and
83.4% perceived this strategy to be effective or extremely effective. No teachers reported that they perceived this practice to be ineffective.

When teachers reported their perceived usage of *Connecting with Students to Create Trusting and Comfortable Relationships* (see Table 4.4) in the classroom, all 100% of teachers reported that they perceived using this strategy during a school week. Teachers that perceived they used this practice 2-3 times per week made up 38.9% of the total. Teachers who perceived they used this 4-5 times per week/daily made up 44.5% of the total and 16.7% of teachers perceived using this strategy multiple times each day.

**Implementation of Strategies to Connect with Students to Create Trusting and Comfortable Relationships.** Teacher participants in this study used the strategy of *Connecting with Students to Create Trusting and Comfortable Relationships* (see Table 4.5), on an average of 67.0% of days they completed the teacher checklist. After they recorded their TIEP strategy implementation on the checklist, teachers had space to elaborate on their implementation.

For John, the connection comes from learning about students and their interests. John finds ways to talk to the student about their interests and weave it into the conversation. John recognized that knowing students’ interests “is good background knowledge that contributes to the class” (Interview, John). He continued that *Connecting with Students to Create Trusting and Comfortable Relationships* “worked really well” for his classes (Interview, John).

Similarly, Catherine gave an example of how she has a student who “repeatedly comes into class and puts their head down” (Checklist, Catherine). During this study, Catherine used the practices of *Connecting with Students to Create Trusting and Comfortable Relationships* and made time to ask the student if there was any way Catherine could better support them. Catherine then asked the student what they liked to do and what they looked forward to doing after school.
Catherine reported that in answer to her question, “The student smiled and started to talk to [Catherine] about random things” (Checklist, Catherine). Catherine conveyed that even though she “never identified the actual issue… [the student] seemed more interactive and engaged” because Catherine showed an interest in connecting with the student (Checklist, Catherine). Catherine revealed that the practice of *Connecting with Students to Create Trusting and Comfortable Relationships* was “very effective” and that she “could have just ignored [the student] and went about her business” (Checklist, Catherine). With the use of *Connecting with Students to Create Trusting and Comfortable Relationships*, Catherine was able to show a student that had not been interacting in class that she cared about the student and their ideas. As described in Catherine’s example, the connection allowed the student to smile, share, and feel a part of things.

Some teachers voiced that by using the teacher checklist, they became more cognizant of using the TIEP in their classroom. By being aware that one of the practices was about *Connecting with Students to Create Trusting and Comfortable Relationships*, teacher participants reported that they thought more about the need to find ways to connect with students during the school day. In one instance, Virginia was covering a class of students that she did not know well. She reported that she found ways to connect with one of the students in the class, and after they spoke, the student let Virginia know that “she was very happy and…enjoyed meeting Virginia” (Checklist, Virginia). A simple conversation connected a teacher and student that had not worked together before. This connection is possibly different from a regular student/teacher connection. In this situation, Virginia does not have a previous invested interest in the student’s grades and does not see the student regularly. Thus, Virginia connected with the student because she wanted
to get to know them and this student now knows that Virginia authentically wanted to take time
to create a connection with them.

Teachers Mary and Catherine further discussed *Connecting with Students to Create Trusting and Comfortable Relationships* in their joint interview. Mary, Catherine and one other teacher teach English to the same grade. Mary is certain that the “camaraderie of the three [teachers] gives [them] more ways to connect” (Interview, Mary). Mary elaborated on this with the example of a student who asked Mary how a book ended. Mary was unsure, but she knew that Catherine had read the book. Mary shared this with the student, and the student went to Catherine’s classroom to ask about the book. Mary related that she “can still connect with the students by connecting them to other teachers” and this connection allows the students and teachers to “all become this bigger community of people” (Interview, Mary & Catherine). Mary and Catherine continued to stress the importance of connecting with their students across classes and that anytime the above situation occurs and one of the other two teachers knows more about a topic, they encourage the student to talk with that teacher. This idea also allows the students to connect with different teachers and personalities. Mary and Catherine are drawn to working with students that may be quieter. They still work very well with all their students, but by connecting the students with more teachers, the students have a myriad of personalities with whom to work.

Mary and Catherine also discussed that it *is* difficult to connect with all students, as they each teach about 150 students in total (28-30 students in each of their 5 classes). They described that connecting with each student daily is difficult in a class period of 45 minutes, but they both agreed that they make sure to connect with at least one student in a meaningful way every class period.
Georgia shared a possible solution for teachers who have many students in their classes. When Georgia wants to connect with her students by giving the positive feedback, she chooses “five kids that I'm really going to look for today [and] then these five kids I’m really going to look for the next day” (Interview, Georgia). This strategy could also work well with Connecting with Students to Create Trusting and Comfortable Relationships. Teacher’s days are often busy and filled with executing curriculum, using TIEP strategies, and keeping everything together. Instead of worrying that they were not able to connect with all students every day, this idea creates a manageable plan to assist in the successful execution of the TIEP.

Promoting a Predictable and Consistent Classroom Environment for Students

The effect of trauma can leave students feeling uneasy and uncertain. For many students, most of their week takes place in a school. Once they are on school property, sometimes once they step foot on the bus, students have an additional set of “school” rules and expectations put on them, along with expectations from home. From my experience as a middle school educator, I know that these rules are in place to keep our students safe. As educators, we have an insider perspective to know the incidents and details behind the rules. In other words, we know the “why” behind the existence of each rule. In this section, I will explain how teachers perceived the effectiveness of promoting a predictable and consistent classroom for students and then describe how teachers perceived using this strategy in their classrooms.

A student that experiences trauma outside of the school may leave school each day and worry about what is going to happen next and when it will happen. This feeling of uncertainty may be a result of the student being unable to control or stop the trauma in their life. SAMHSA (2014b) posited that students that have experienced trauma and are already overwhelmed and
lacking factors like relationships and cognitive ability that are needed to not only succeed in school but to just get through each school day.

If educators prepare students with agendas and conversations about *what* is going to happen that day, and sometimes, more importantly, *why* is it going to happen, students can start to feel more in control of their day. If students aren’t bombarded by a set of classroom rules made by the teacher and can help create the rules, they will understand why the rules are in place and take ownership of them. By *Promoting a Predictable and Consistent Classroom Environment for Students*, teachers can create a feeling of security for students (Minahan, 2019b). Knowing what to expect and what is expected of them helps students that have experienced trauma, and all students, prepare themselves for the day ahead. This awareness builds trust and understanding and allows students to navigate their day more confidently.

**Teachers’ Perceptions of Practices to Promote a Predictable and Consistent Classroom Environment for Students.** The practice for *Promoting a Predictable and Consistent Classroom Environment for Students* (see Table 4.3) had 100% of teachers reporting some level of effectiveness. The breakdown of perceived effectiveness was 11.1% of the teacher participants rating this strategy as mostly effective and 88.9% of the teacher participants rating this strategy to be effective or extremely effective.

When teachers reported their perceived usage for *Promoting a Predictable and Consistent Classroom Environment for Students* (see Table 4.4), 100% of teachers perceived using this strategy during a school week. 11.1% of teachers perceived using the strategy 2-3 times per week, 55.6% of teachers perceived using the strategy 4-5 times per week, and 33.3% of teachers perceived that they used this practice multiple times per day.

**Implementation of Strategies to Promote a Predictable and Consistent Classroom**
Environment for Students. Teacher participants in this study used the strategy of Promoting a Predictable and Consistent Classroom Environment for Students 93.9% on an average of days they completed the teacher checklist (see Table 4.5). One way to promote a predictable and consistent classroom environment for students is by having an agenda and routine that students know to follow every day. Teacher participant Georgia, elaborated on the success of these agendas and routines in her classroom, “When the students come in, they know exactly which materials that they need to retrieve from their backpacks. They take the materials out and they have them ready to go. We then start our class instruction” (Interview, Georgia).

After they took out their materials, Georgia’s reading classes follow their trusted routines and located their vocabulary flashcards. After reviewing the flashcards, they put them away and accessed their workbooks on phonics or decoding. Finally, the class takes out the novel they are reading and the last part of class is spent either reading or discussing their novel. The actions stay the same every day, but the materials change, as the class for example starts to read a new novel. Georgia asserts that she [thinks] “that predictability really relieves any stress or anxiety in terms of preparation for class. [The students] just know the routine and what's expected of them” (Interview, Georgia).

When asked in her interview to explain what happens if she does not start the class in the usually routine, Georgia responded, “When I don't start the class the way that they’re use to [the students] actually try to lead class and get our routine back to what they know. They will ask, “Wait, what are we doing?” or “What’s going on? (Interview, Georgia).” During parent-teacher conferences, one of Georgia’s students was able to confidently share information about Georgia’s reading class with the other teachers and the students’ parents.
Georgia shared an example about the success one of her students experienced during a parent-teacher conference that fell under the TIEP of *Promoting a Predictable and Consistent Classroom Environment for Students*. Georgia elaborated that this student struggles academically and has a difficult life at home. Georgia relayed in her interview, that during the conference teacher took turns speaking to the parent about the struggles the student had in their classes. When it was Georgia’s time to speak, she “had the student themselves share what they do in [Georgia’s] class every day. (Interview, Georgia)” Georgia’s decision to use a TIEP strategy to *Promote a Predictable and Consistent Classroom Environment for Students* allowed this particular student to accurately describe to their teachers and parents exactly what happens every day in Reading class. Watching this interaction, Georgia reported seeing “that the student was really proud of themselves for being able to know exactly what was expected of them, and also happy that they can perform all of the class expectations” for each day. (Interview, Georgia)” In her interview, Georgia restated that *Promoting a Predictable and Consistent Classroom Environment for Students* builds student competence and ability. This competence and ability is necessary for students to grow as they change to different classes, possibly at higher levels, and can still feel calm as a result of routines and structure.

The teacher often creates routines and structures to support a predictable and consistent classroom environment. However, putting a student-centered view on the practice and allowing students to create the classroom rules may increase student connection the classroom and the teacher. The routines and structures that help to create a predictable and consistent classroom environment are often created by the teacher. Grace discussed the importance of routines and structure of doing things together in a student-centered classroom without teacher hierarchy. At the beginning of the year, she *and* her students come up with the classroom rules. Grace first
asks her class “how [they] want to be treated in a class by [their] classmates” (Interview, Grace). Grace emphasized, “We are doing this together. I’m not posting rules [I made] as the rules for my class. I won’t do that, because I make it very clear it’s our classroom [and] we share it together” (Interview, Grace). Classroom rules are created to foster a sense of safety and set expectations. By allowing students to participate in creating the classroom rules, Grace’s class buys in to their classroom rules, and they are empowered when following them.

When Grace explained her process for building a safe and supportive classroom environment, she included many components of other TIEP strategies. Grace spends time at the beginning of the year teaching the students about “respect…trust…classroom routine…how [they] are all working in a classroom together and how [their] behaviors can affect [others]” (Interview, Grace). Grace asserted that one of the most essential ideas she shares with her students is that as individuals they “do not know what other people are going through before they get into class” (Interview, Grace). Respect, trust, routines, student-created classroom rules, and empathy are all necessary to create a safe and supportive classroom so that all student feel comfortable and can learn at their best.

**Encouraging Students to Think Positively**

Students that have experienced trauma bravely face many struggles during a school day. For some of these students, the after-effects of their traumatic experiences create anxiety disorders which can leave students with negative, worried, and anxious thoughts (Blodgett & Dorado, 2016). Students may not have the coping skills to stop these negative thoughts, and they begin to spiral. From my own experience with a diagnosed anxiety disorder, even years of cognitive therapy that have taught me how to control the anxiety do not help on the most challenging days. Some days, the more you tell the negative thoughts to stop, the stronger they
get. This cycle can lead to an overwhelming feeling of helplessness and possible depression and anxiety. Even if you have the cognitive therapy techniques in your toolbelt to stop this negative thought spiral – some days it can feel impossible to do so. In the following section, I will explain how teachers perceived the effectiveness of Encouraging Students to Think Positively and then describe how teachers implemented the strategy in order to support positive thinking.

Teachers’ Perceptions of Practices to Encourage Students to Think Positively. There are many elements of the school day that can be positive or negative, depending on student perception and their likes and dislikes. For example, during a class discussion, a teacher may ask for student volunteers to share information with the class. Some students will be excitedly and eagerly waving their hands in the air to be called on. Some students will start inching down in their seats, hoping to become invisible, so they are not called on. In this example neither the excited student nor the avoidant student has experienced trauma. The student who has experienced trauma could be the student just sitting and staring around the room. The student may look distracted and unable to focus. However, if the student has experienced trauma, they could be dealing with the many adverse effects of their trauma, including spiraling negative thoughts that can creep into their everyday thoughts (Minahan, 2019b). Trauma-informed teachers can recognize this and help the student pause or change the direction of the negative thought pattern. Teachers can help pause the negative thoughts and ask the student to deliver ‘a special top secret note’ to a colleague. In my experience, any middle school task that includes the words special and top-secret intrigue students. On a Post-It note, you can write a message to a colleague telling them to have a nice day, and then make sure you staple the Post-It closed before having the student deliver it to maintain the integrity of the top-secret mission.
A teacher could even try to change the students negative thinking pattern by asking the student to recall or write down anything that makes them happy. Helping the student control and change their thought pattern into positive thoughts, is a necessary cognitive distraction (Minahan, 2019b) that can be very empowering for the student. For the practice of Encouraging Students to Think Positively (see Table 4.3), 11.1% perceived this strategy to be somewhat effective, 44.4% perceived this strategy to be effective, and 44.4% perceived this strategy to be extremely effective. No teachers reported this practice to be ineffective.

When teachers recorded their perceived usage of Encouraging Students to Think Positively (see Table 4.4), 100% of teachers reported that they perceived using this strategy during a school week. Teachers that perceived they used this practice 2-3 times per week made up 22.2% of the total. Teachers that perceived they used this 4-5 times per week made up 38.9% of the total, and 38.9% of teachers perceived that they used this strategy multiple times each day. No teachers reported using this strategy less than 2 times per week.

Implementation of Strategies to Encourage Students to Think Positively. Teacher participants in this study implemented the TIEP strategy to encourage students to think positively (see Table 4.5), an average of 57.3% when implementing the teacher checklist. Margaret found that Encouraging Students to Think Positively was an extremely effective strategy, but not always something that came naturally to her. She continued in her interview, “It is more natural to encourage a student to complete a task, but then [the teacher] is not really mindful about the process the students are going through” (Interview, Margaret). Margaret elaborated that the students in her class often seem to get upset or nervous during classroom tasks. She explained that her “students are usually nervous for a specific reason” that has little to do with the assignment (Interview, Margaret). In her interview, Margaret reflected that by looking at what
makes her students upset or nervous, she can encourage them to think positively in ways specific to their struggles.

Teacher participant Georgia also reported using the strategy of *Encouraging Students to Think Positively*, and in her teacher interview, she discussed the importance of reflective listening. To practice reflective listening, Georgia shared that she sits with her students when they are upset or nervous and listens to why they feel that way. As the student explains how they are feeling, Georgia restates and clarifies what she hears from the student instead of jumping in with a solution. This strategy allows the student to feel validated and valued. The process of using reflective listening is an important tool for TIEP and can be helpful for students’ validation and creating connections.

Similarly, Grace promotes positive thinking in her classes by using positive affirmations. These affirmations are also part of how Grace promotes a predictable classroom environment. From the daily agenda, the students know that they start each class with Grace leading them in a breathing exercise followed by positive affirmations. She starts this by telling the students, “Let’s take a deep breath in…we hold our breath for a minute or two and then let it out” (Interview, Grace). While they do their breathing exercises, Grace encourages the students to try “tapping.” In her interview, Grace demonstrated the strategy of tapping by touching her index fingers together, then her middle fingers together, and continuing. When she reached her index fingers again, she continued the exercise. Grace also showed how rubbing her palms together in a circular motion is an alternative option where “the touch is not so rough and the kids can take deep breaths while doing this” (Interview, Grace). If some students do not feel comfortable with the tapping exercises, Grace lets them know they can always fold their hands or keep their hands
on the desk. Grace can use these techniques as a result of her safe and supportive classroom environment.

Grace reported that the deep breathing and tapping techniques help calm the students to focus on the positive affirmation. Grace asserted that the positive affirmations she uses are the same every day. “I say it and they repeat it. I say ‘I am strong’ and they repeat it. Then then I say ‘I’m smart’ and then ‘I’m a leader’ and then ‘I am me.’ It’s creating that classroom [sense] in the beginning” (Interview, Grace). Grace also reported that when the students first practice the positive affirmations, she also leads a discussion about the meaning of the affirmations. Grace modeled this discussion in her interview. “What does that mean [to say] ‘I’m smart?’… ‘What does it mean that I’m a leader?’ or [to say] ‘I am me.’ We talk through those and…they remember the conversations” (Interview, Grace).

Grace has introduced these affirmations to her students for the past two years at the very beginning of the school year. She reported that halfway through the year, specifically in the third marking period, students express that they are frustrated or discouraged, and they start to say that they are ‘stupid’ (Interview, Grace). When this happens, Grace explained that she asks them, “What’s number three [of our affirmations]?” (Interview, Grace). She recounted that students will often sigh and say, that they are smart or a leader. In expressing the affirmation learned in the beginning of the year, students demonstrate that they retain the content of these activities beyond the lesson itself. Grace reported that the use of the affirmations increases her students overall positively.

On her teacher checklist, Virginia also shared an example that helped her students think positively. During a vocabulary lesson, her class struggled with a part of the lesson that required them to visualize the vocabulary words. As a result, the students started to worry and state that
they would “never understand” the assignment. However, Virginia kept encouraging the
students, and every time they said something negative, she combatted it with a positive statement
about their strengths and abilities of the students. Eventually, the students were able to complete
the lesson. Even though most students had been ready to give up, Virginia’s constant
encouragement and emphasis on positive thinking helped the student persevere.

In another example, Catherine reported that she had a student that was very nervous
about the Covid-19 virus. On her teacher checklist for that day, Catherine reported that she used
the TIEP strategy of Encouraging Students to Think Positively. Catherine followed up on her
teacher checklist that she found this to be very effective and was able to use positive thinking
and a positive classroom environment to encourage the students.

**Interacting in a Thoughtful Manner with Students**

Teachers must use a *trauma lens* when interacting with students that have experienced
trauma. Understanding students through a *trauma lens* creates a new perspective for teachers.
Instead of thinking that students that have experienced trauma have something wrong with them
teachers can begin to understand that something happened to the student and that the trauma is
not the student’s fault (Jennings & Siegel, 2019; Thomas et al., 2019). In the following section, I
will explain how teachers perceived the effectiveness of *Interacting in a Thoughtful Manner with
Students* and then I will describe how teachers implemented this TIEP strategy in their
classroom.

**Teachers’ Perceptions of Practices to Interact in a Thoughtful Manner with
Students.** For the practice of *Interacting in a Thoughtful Manner with Students* (see Table 4.3),
5.6% of the teacher participants perceived this strategy to be somewhat effective, 5.6% perceived
this strategy to be mostly effective, 38.9% perceived this strategy to be effective and 50.0%
perceived this strategy to be extremely effective. No teachers reported that they perceived this practice to be ineffective.

Next, teachers reported their perception of how often they used the TIEP strategy of *Interacting in a Thoughtful Manner with Students* (see Table 4.4). The results showed that 100% of teachers reported that they used this strategy at some point during a school week, 16.7% of teachers perceived that they used this strategy 2-3 times per week, 55.6% of the teachers perceived that they used this 4-5 times per week, and 27.8% of the teacher participants perceived that they used this strategy multiple times each day.

**Implementation of Strategies to Interact in a Thoughtful Manner with Students.**

Teacher participants in this study reported on the teacher checklist that they implemented the strategy of *Interacting in a Thoughtful Matter with Students* (see Table 4.5) an average of 89.9% of the time. In their open-ended checklist responses and interviews, teachers further explained their TIEP strategy implementation. Teachers reported many different scenarios where they demonstrated the importance of this practice. For example, Ada was showing the class new vocabulary words but had time restraints because it was during a half day of school. She reported that the students had a lot of questions and comments about the vocabulary work. With the time constraints of a half-day, Ada said she was considering asking the students to save their questions for the next day. However, she chose to use *Interacting in a Thoughtful Manner with Students* and took the time to answer the questions and discuss the comments. As a result of this choice, “More kids in the class opened up and discussed their examples…of the vocabulary words” (Checklist, Ada).

In addition, Catherine stated that teacher modeling is very important for the TIEP practices, “When you model [these practices] the kids mirror them back to you” (Interview,
Catherine). Catherine explained that there is a student that she checks in with and interacts with thoughtfully because she knows things are not always going well for the student. When one of Catherine’s close colleagues went to teach at a different school, one of Catherine’s students reciprocated the kind and caring behavior that Catherine previously modeled. This student knew that the colleague’s move impacted Catherine, and the student stopped to ask Catherine how she was doing. Instead of simply asking Catherine how she was and then leaving the classroom, the student continued to recite a quote from a speaker they had watched a few days prior. The speaker’s quote was about when the speaker had to switch schools. Catherine reiterated that the student told her to remember how the speaker “switched schools in her career because the kids [at the other school] needed her more” (Interview, Catherine). Catherine shared that the student said Catherine’s colleague had left because the students as his new school needed him more. This student that Catherine checks in with and thoughtfully interacts with modeled Catherine’s behavior by coming to comfort and thoughtfully interact with Catherine in her time of need. Modeling the TIEP strategies is important to show students how to act calmly and kind.

**Staying Calm and Expecting Unexpected Responses**

An educator needs to stay calm regardless of what is happening in the classroom. Many events during a school day that can be unexpected to students. Whenever one of these unsettling events occurs (e.g., a power outage or an unannounced intruder drill), I always tell my students, “If I am calm, you are calm.” Students look to their teachers for advice, guidance and modeling. If the principal announces that we have an intruder in the building, whether planned or not, my job, first and foremost, is to stay calm. I will get my students to the designated safety area or blockade the classroom door with tables and chairs. However, if I escort my student to the designated safety area while screaming and crying, or I hide them under the desks and panic, my
students will do the same thing. Students watch teachers regularly for our “teacher face” and subtle cues. They watch how teachers model calm behavior, and they emulate how teachers act. This modeling often dictates how students will act or react to situations.

Staying calm in an unexpected situation to maintain the safety and well-being of students, is extremely important. The same is valid for teacher and student interactions, especially when the student’s response is not what the teacher was expecting. Staying calm during an unexpected school-wide situation or during a one-on-one student interaction can prevent an escalation of emotions for students. Staying calm can also validate that even during an unexpected event, the classroom is still a safe environment for students. In the following section, I will explain how teachers perceived the effectiveness and implemented the strategy of *Staying Calm and Expecting Unexpected Responses*.

**Teachers’ Perceptions of Practices to Stay Calm and Expect Unexpected Responses.**

A student that has experienced trauma may lack the necessary coping skills for everyday interactions (Minahan, 2019a). What a teacher might perceive as a simple request about a student’s missing homework or reminding a student to exhibit appropriate classroom behavior may result in an angry or defensive outburst from the student. Without a trauma-informed lens, teachers may not understand the weight their requests can carry for students. Thus, the outburst from the student seems displaced and highly inappropriate – as if it came from nowhere. In my experience, when discussing behavior plans for students that have been deemed as having behavior problems, the phrases, “It just came out of nowhere” or “I have no idea how it escalated from 0 to 100 so fast” are used by teachers that have not found a trauma-informed lens. For example, students that have experienced trauma do not enter school at what teachers often
describe as the calm level of a ‘0’. These students have most likely experienced things outside of school that morning that already have them feeling on edge.

As a result of the trauma the student has experienced, the teacher’s request about homework or behavior can signal danger to the student. To combat the perceived danger and stay safe, the student uses a “fight, flight, [or] freeze” response (Thomas et al. 2019). The responses can manifest into the student arguing with the teacher, leaving the classroom without permission, or shutting down and avoiding questions and further contact with the teacher.

For teachers’ perceived usage of the TIEP strategy of Stay Calm and Expecting Unexpected Responses (see Table 4.3), 11.1% of teachers perceived this strategy to be mostly effective and 88.9% of teachers perceived this strategy to be effective or extremely effective. No teachers reported that they perceived this practice to be ineffective. For teachers’ perceived usage of Stay Calm and Expecting Unexpected Responses (see Table 4.4), 100% of teachers reported that they perceived using this strategy at least once per week in their classroom. No teacher participants reported that they did not use this strategy during the course of the week.
Implementation of Strategies to Stay Calm and Expect Unexpected Responses. The TIEP strategy of *Staying Calm and Expecting Unexpected Responses* (see Table 4.5) was used on an average of 54.3% of days teachers implemented the teacher checklist. Staying calm is essential to maintaining a trauma-informed classroom as Jane explained. “When people are agitated, no one is going to figure out a problem or a solution to a problem…especially when a middle school student may not have the appropriate skills to calm themselves down” (Interview, Jane). Jane continued her explanation by sharing that her ability to stay calm during a student’s outburst helped the student to deescalate sooner.

In her interview, Margaret explained the importance of modeling calming techniques for her students, “It can be very frustrating when a negative outburst occurs in class…and negative outbursts with loud volume and yelling [can] promote [frustration] in other people” (Interview, Margaret). Margaret explained, “As humans, staying calm is not always the most natural approach to take…it really does take work and effort and mindfulness to remain calm (Interview, Margaret). Margaret described a situation when a student had a negative outburst and started yelling. Margaret remained calm by reminding herself that the student was not mad at her and by not responding to the outburst negatively. Margaret attributed that her student sensed her “calm presence” and it allowed the student to realize that even though they were mad and yelling, Margaret was not yelling back at them. Margaret reported that the student seemed comforted by her calm presence and the incident soon dissipated. As demonstrated by Margaret, *Staying Calm and Expecting Unexpected Responses* can help a teacher gain control in a positive way over negative outbursts and situations in the classroom.

**Limiting Exclusionary Practices**

When students do not follow school rules, disciplinary measures and consequences for are
usually taken for their actions. A student that has experienced trauma may struggle with cognitive function (Phelps & Sperry, 2020) which plays an important role in a student’s behavior. I have already discussed that the effects of trauma can leave students frustrated and exhibiting negative outbursts. Without a trauma lens, teachers could perceive that a student is disruptive because they want to annoy the teacher or other students. For instance, the teacher could decide to remove the student from the class as a consequence of their behavior. Punishing a student that has experienced trauma with an exclusionary practice only reinforces feelings of “another rejection,” which can create a “pattern of emotional insecurity and behavioral issues” (Day, 2015). In the following section, I will explain how teachers perceived the effectiveness of limited exclusionary practices and then describe how teachers implemented the strategy of limited exclusionary practices.

**Teachers’ Perceptions of Practices to Limit Exclusionary Practices.** Teacher perception for *Limiting Exclusionary Practices* (see Table 4.3) revealed that 38.9% of the teacher participants perceived that this practice would be somewhat effective or mostly effective and that 61.1% of teachers perceived that this practice would be effective or extremely effective. Teachers were then asked how often they perceived they used the TIEP strategy of limited exclusionary practices (see Table 4.4), and 50% of teachers perceived using this strategy 4-5 times per week, while 27.8% of teachers perceived using this strategy multiple times per day.

**Implementation of Strategies to Limit Exclusionary Practices.** The data from the Teacher Checklists show that 55.7% of teachers used the TIEP strategy of *Limiting Exclusionary Practices* (see Table 4.5) when implementing the teacher checklist. Data gathered from the open-ended question on the teacher checklist and teacher interviews showed that the teacher participants had many different viewpoints about this practice. Mary stated that she has never
used exclusionary practices and they should never be used (Interview, Mary). Teacher John reported that teachers should not use exclusionary practices unless there is a fight in the classroom and child safety was at risk (Interview, John). He continued that he will use any technique possible to keep the student involved. Even if a student is misbehaving or inappropriately using the computer to play games, he would prefer to walk up to them and politely let them know they need to switch what they are doing back to the lesson before removing them from class (Interview, John).

Some teachers also explained that there are ways that exclusionary practices could be helpful. For example, teacher Rosa reported that she “always tries [her] best to keep [students] in the classroom as long as [she] possibly can, as long as they are not disruptive [because] other students are learning in the environment too” (Interview, Rosa). Other teachers shared that to limit exclusionary practices, it was key to do everything they could to keep the student involved.

Teacher Charlotte discussed in her interview that while participating in the phase of the study regarding implementation and the teacher checklist, using the teacher checklist, had a student cry as a result of an issue with a peer. Charlotte said that she did not want to force the upset student to sit in front of everyone crying, so Charlotte took the student in the hallway and asked the student if they wanted to take a moment to gather themselves before returning to class. This method worked for the student, and they were able to come back into the classroom and finish the lesson.

Teacher Margaret discussed that some of her students have a flash pass, which allows them to leave class and go to the counselor or the emotional support room when they feel they need a break. Both the counselor and the teacher in the emotional support room have many techniques and tools that these students can use to help themselves calm down. Mary stressed the
importance of teachers understanding that it can be positive when a student asks to use their flash pass. Using the flash pass shows that the student, on their own, is recognizing that they need a moment to cool down. The intent for the TIEP strategy of *Limiting Exclusionary Practices* was that the teachers would decide when they did or did not need to limit exclusionary practices. However, in her interview Margaret pointed out that if a student uses their flash pass, the student chooses to exclude themselves from the classroom. A student’s choice to remove themselves from the classroom should not be viewed as negative, but viewed as method of healing and what was best for the student (Interview, Margaret).

Teacher Catherine discussed in her interview that there could have been a third option on the teacher checklist along with “I used this practice” or “I did not use his practice.” This third option would be “Not Applicable (N/A).” Mary deliberated that this third option would allow her to show that she did not limit exclusionary practices that day because she had not needed to use any. She was concerned that if she chose not use the practice that would demonstrate or indicate that she had to remove a child from the classroom (Interview, Mary). For the purpose of this study, I only analyzed data to find the number of times teacher reported that they did or did not implement used of each TIEP strategy in their classroom. Teacher reported implantation was not used to judge or assess the participants’ teaching practice. However, I agree that adding an “N/A” option could allow teachers to report their strategy implementation more accurately.
Finding Ways to Use Positive and Supportive Feedback with Students

Students that have experienced trauma may perceive a teacher’s feedback as negative; even though the intent was to help the student. For example, a teacher could simply ask a student to recheck a certain math problem, and the student could perceive that the teacher said that the student was stupid or insinuated that the student is incapable of completing the assignment (Minahan, 2019). It is important for teachers to use a trauma lens and rephrase student feedback so that the student views it as positive. Feedback that a student views as can allow the student to feel supported (Brooks, 1998; Jennings & Siegel, 2019; Minahan, 2019b and increases the connection between student and teacher. In the following section, I will explain how teachers perceived the effectiveness of Finding Ways to Use Positive and Supportive Feedback with students and then describe how teachers implemented the strategy of using positive and supportive feedback in their classrooms.

Teacher Perceptions of Practices to Find Ways to Use Positive and Supportive Feedback with Students. Teacher perception of the effectiveness of the practice of Finding Ways to Use Positive and Supportive Feedback with Students (see Table 4.3) showed that 11.1% of teachers perceived this strategy to be mostly effective and 88.9% of teachers perceived this strategy to be effective or extremely effective. No teachers reported that they perceived this practice to be ineffective. When teachers reported how many times they perceived using the practice of Finding Ways to Use Positive and Supportive Feedback with Students (see Table 4.4), 100% of teachers reported using this strategy during a school week.

Implementation of Strategies to Find Ways to Use Positive and Supportive Feedback with Students. Teachers reported implementing the TIEP strategy for Finding Ways to Use Positive and Supportive Feedback with Students (see Table 4.5) an average of 60.8%
while completing the daily teacher checklist. Teachers discussed their implementation of this practice in their responses to the open-ended questions on the teacher checklist and their teacher interviews.

Teacher Maya reported on her teacher checklist that during a particularly challenging day, she took the time to give positive feedback to the students that “were cooperative and stayed on task” (Checklist, Maya). By staying calm and not showing frustration to the students that were off task, Mary was more effective with her class and able to support the students that were following directions with positive feedback.

Teacher Mary reported in her interview that by using the teacher checklist, she became more conscious of giving her students positive feedback. She discussed that this year more students are coming up to desk and asking for feedback on their writing. She stated that students seem to want “positive, supportive and kind feedback on every word they write” and attributed this increased need for positive feedback to the effects of the COVID-19 pandemic (Interview, Mary). In their joint interview Mary also discussed that she and Catherine each have a way to keep track of good things students do during the week. Then at weekly meetings, they take time to find ways to acknowledge those students. If teachers are conscientious about using positive feedback with students, students can feel increased connection and support from their teachers.

*Creating Islands of Competence for Students by Using Positive Praise*

Teachers have a unique vantage point from which they view their students. Teachers can often see qualities and character traits in students that students do not recognize. By creating islands of competence where students can appreciate themselves for their unique skills and abilities (Brooks, 2007), students can build confidence and resilience. In the following section, I will explain how teachers perceived the effectiveness of *Creating Islands of Competence for*
Students by Using Positive Praise and then describe how teachers implemented the strategy of Creating Islands of Competence for Students by Using Positive Praise.

Teachers’ Perceptions of Practices to Create Islands of Competence for Students by Using Positive Praise. The effects of trauma can leave students with a low self-image and low self-esteem (Jennings & Siegel, 2019; Minahan, 2019b). Teachers can create islands of competence by praising students for their strengths, talents, and interests and students will start to appreciate themselves. Teachers may have to work to find these positive interests and talents in students because students that have experienced trauma often do not believe they have any positive qualities (Brooks, 2007).

It is important to explain the difference between positive feedback and positive praise. For the purpose of this study positive feedback is used with the TIEP strategy for Finding Ways to Use Positive and Supportive Feedback with Students. Positive feedback is a positive response from teachers that is used when they notice a student doing something well, such as helping a friend, staying on task, or trying their best. The purpose of the positive feedback is used to reinforce good behavior and hard work. Positive praise is used with the TIEP strategy of Creating Islands of Competence for Students by Using Positive Praise. Positive praise is a positive comment from teachers acknowledging a student’s talent or interest that a student might not realize they have. With the purpose of encouraging students to appreciate the good things that they represent.

Teacher perception of the effectiveness of Creating Islands of Competence for Students by Using Positive Praise (see Table 4.3) showed that 100% of teachers perceived this practice to be effective or extremely effective. No teachers reported that they perceived this practice to be ineffective. Teacher perceived usage of Creating Islands of Competence for Students by Using
Positive Praise (see Table 4.4), showed that 16.7% of teachers perceived that they used this practice 2-3 times per week. 55.5% of teachers perceived they used this 4-5 times per week and 27.8% of teachers perceived that they used this strategy multiple times each day.

**Implementation of Strategies to Create Islands of Competency for Students Using Positive Praise.** Teachers reported using the TIEP strategy for Creating Islands of Competency for Students Using Positive Praise (see Table 4.5) an average of 60.8% while completing the daily teacher checklist. Teacher Benjamin explained on this teacher checklist that he had a student who had been out sick for a few days, and when the student returned, they shared with Benjamin they were nervous about being back at school. Benjamin chose to spend some time with the student, and “[they] talked about positive things.” Benjamin reported that during this conversation he made it a point to praise the student for their positive attributes that he had noticed throughout the year (Checklist, Benjamin).

Teacher Anna had a student in her class “who typically has low motivation” (Checklist, Anna). She reported that she used positive praise when talking to the student about his interests and shared with him that the class would start a project that would showcase one of his interests. Anna reported that this conversation and the use of positive praise. Anna also shared with the student that the class was going to start a project that was about one of his interests. The student This conversation not only helped build a connection between Anna and the student, but it helped the student appreciate his interests and possibly feel more appreciative of himself.

**Summary**

The overarching research question for this study, *How do middle school teachers perceive and use Trauma-Informed Educational Practices to support their students during the COVID-19 pandemic?* was explored in this chapter with data from my three research sub-
questions. I analyzed the data from the instruments for each sub-question separately to maintain the integrity of a convergent mixed-methods study. To answer Research Sub-Question 1, the teacher participants provided quantitative survey data about their perceived effectiveness of the nine TIEP strategies used in this study. Teacher participants also provided quantitative survey data about their perceived usage of the nine TIEP strategies for Research Question 2. Finally, teachers provided quantitative checklist data and qualitative interview data regarding their implementation of the nine TIEP strategies in their classroom.

Overall teachers reported that the nine TIEP strategies were effective and helped create connections with their students. Teachers also discussed that the TIEP strategy of creating a safe and supportive classroom environment should start at the beginning of the school year, as it was perceived to be a foundation for the other TIEP strategies in the study. By analyzing the themes using a priori coding, new concepts about the TIEP strategies emerged. One of these concepts was that most of the TIEP strategies overlap each other in some way. This overlap shows the importance of teachers using a trauma lens to promote all nine of the TIEP strategies mentioned in this study, to support students that have experienced trauma fully. If this can happen in schools, students that have experienced trauma can have a chance to thrive and find the confidence to build resilience.
Chapter V: Discussion

The COVID-19 pandemic was a “mass trauma” which added experiences of fear, uncertainty, isolation from family and friends, school and work closures, financial instability, illness, and even death to our lives (WHO, 2021). In early studies, researchers have examined the effects of COVID-19, one of which includes the increased stress that the COVID-19 pandemic inflicted on families and communities (Phelps & Sperry, 2020). Children can experience a heightened state of stress from ongoing trauma (Perry, 2009), such as the trauma from the COVID-19 pandemic. Researchers have explained the importance of trauma-sensitive and trauma-informed practices and thoroughly explained why these practices should work (Blodgett & Dorado, 2016; Brooks et al., 1998, 2007; Chafouleas et al., 2019; Jennings & Siegel, 2019; Minahan, 2019b; SAMSHA, 2014; Thomas et al., 2019; Venet, 2019). Yet, what is lacking in the research is an actual study on the implementation of trauma-informed practices and how they affect children (Chafouleas et al., 2021). This research study was guided by the aforementioned researchers to create the Trauma-Informed Educational Practices (TIEP) that were examined in this study. Specifically, this study was designed to explore teacher perception and implementation of the Trauma-Informed Educational Practices outlined in this paper.

Summary of the Study

The purpose of this convergent mixed methods case study was to measure teachers’ perceived use and implementation of the Trauma-Informed Educational Practices. Using a convergent mixed methods design, the quantitative and qualitative data was collected, analyzed separately, and then combined for a deeper understanding. The data from this study responds to the overall research question for this study and the and three sub-questions that allow for further elaboration:
How do middle school teachers perceive and use Trauma-Informed Educational Practices to support their students during the COVID-19 pandemic? The following sub-questions allowed for a deeper understanding of the main question:

1. How do teachers perceive the effectiveness of the Trauma-Informed Educational Practices?
2. How often do teachers perceive they use the Trauma-Informed Educational Practices in the classroom?
3. In what ways do Trauma-Informed Educational Practices manifest themselves in the classroom?

This convergent mixed methods study contained both a quantitative survey design and a qualitative case study design. For this study, each research sub question had a corresponding instrument used for data collection. All three of the research questions for this study had a quantitative component. The survey for Research Sub-Question 1, regarding teacher perceived effectiveness of the TIEP strategies and the survey for Research Sub-Question 2, regarding teacher perceived usage of the TIEP strategies, followed a similar process. The data for each survey was collected in Qualtrics and then exported into SPSS and analyzed using descriptive statistics. While the process of data collection and analysis was similar for each of the quantitative instruments, this study follows a convergent mixed method design and each of the above-mentioned surveys was analyzed independently from the others.

The data teacher checklist for Research Sub-Question 3 was also collected in Qualtrics, exported and then uploaded into SPSS. The quantitative part of the teacher checklist, where teachers indicated daily if they did or did not use each of the TIEP strategies, was also collected in Qualtrics and uploaded into SPSS and analyzed using descriptive statistics. The teacher
checklist also had open-ended questions for teachers to provide explanations of their usage and outcome of the practices. The data from these questions was collected in Qualtrics and imported to SPSS, and copied into Dedoose so that a priori coding could be used for analysis. Following the design of a convergent mixed methods study, the data for each sub-question was collect and analyzed separately. The analyzed results from each instrument were then merged. This allowed me to analyze the all results simultaneously which created a more in-depth representation and allowed for a deeper understanding of the study (Creswell & Plano Clark, 2018).

After teachers met the gateway requirements and decided to participate in the study, they answered demographic questions and questions about tenure, teaching certifications, subjects taught, grade level taught, and additional certifications or learning experiences regarding trauma. In all, 22 teachers gave consent to take part in this study. The data collection for Research Sub-Question 1 and 2, showed that only 18 of the 22 teacher participants completed these surveys. The data for Research Sub-Question 3 showed that all 22 of the teachers entered data for the Teacher Checklist, and 11 of those teachers took part in the voluntary follow-up interview to further explain their usage of the practices.

In regards to Research Sub-Question 1, all 18 teachers who participated in this part of the study perceived some extent of effectiveness for each of the TIEP strategies (see Table 4.3). The TIEP strategy of Creating a Safe and Supportive Classroom was perceived by the most teacher participants (66.67%) as being extremely effective, while the TIEP strategies of Connecting with Students to Create Trusting and Comfortable Relationships, Promoting a Predictable and Consistent Classroom Environment, and Interacting in a Thoughtful Manner with Students followed closely behind with 55.56% teachers perceiving each of these to be extremely effective.
To address Research Sub-Question 2, I asked teachers to report their perceived usage of each of the TIEP strategies during a school week (see Table 4.4). Most teachers reported that they perceived they used each of the practices during the week, with most percentages of perceived usage higher when reporting perceived usage of the practice *daily* or *multiple times each day*. The data revealed that 5.6% of teachers reported that they perceived that they *never* used the TIEP strategy of *Limiting Exclusionary Practices when a Student Exhibits Negative Behaviors*.

To address Research Sub-Question 3, I asked teachers to report daily on their usage of the TIEP practices for a period of 10 days (Table 4.5), revealing that the strategies teachers used most during the study were *Creating a Safe and Supportive Classroom* (97.31%), *Promoting a Predicable and Consistent Classroom Environment* (93.90%) and *Interacting in a Thoughtful Manner with Students* (89.95%). During the voluntary follow-up interviews used to address Research Sub-Question 3, teachers reported that their choices to use the TIEP strategies were situational and dependent on both the individual student and the circumstances surrounding the event that required the TIEP.

Through the merging of the quantitative and qualitative data reported for this study, four additional themes emerged. These additional themes were that teachers perceived: (a) their awareness of personal trauma and bias informed their implementation of the TIEP, (b) creating a safe and supportive classroom environment provided a foundation for successful implementation of the TIEP strategies, and (c) using the TIEP strategies helped teachers create connections with students.
**Application of Conceptual Framework to Findings**

Sigmund Freud’s Trauma Studies (see Figure 5.1) from the late 1800s, examined the effects of traumatic injuries on patients and the traumatic effects experienced by women that suffered from hysteria (Anderson, 2012). Researchers built on Freud’s foundation of trauma studies (see Figure 5.1) and expanded the investigation to study the cultural effects of trauma. In 1990, Cary Caruth and other researchers connect Freud’s Trauma Studies to Trauma Theory (see Figure 5.1) to explain their findings of the cultural effects of trauma. Trauma Theory is rooted in Freud’s medical work and is commonly used in the medical field. The role of a teacher is not that of a mental health professional (Venet, 2019). Educational researchers found a need to adapt the more medical Trauma Theory for educational settings. From the Trauma Studies and Trauma Theory a new Trauma-Informed approach (see Figure 5.1) was created (Chafouleas et al., 2021).
Connecting “trauma theory” to “trauma-informed” was imperative for this study (see Figure 5.1). While the teacher participants in this study were asked to report on their perceptions and use of the TIEP strategies manifested in the classroom, the teacher participants were not reporting on or studying the student’s actual trauma. The Trauma-Informed approach was a catalyst for the adaptation and creation of the nine Trauma-Informed Educational Practices used in this study.

When analyzing the implementation of the TIEP in the classroom, the theme of attachment and connection emerged. Attachment Theory is also rooted in the work of Freud and his ideas regarding infant attachment (Waters et al., 1985). Jennings and Siegel (2019) reported that Attachment Theory evolved from infant attachment to the idea of a person’s behaviors toward their caregiver. In this research, the teachers represent an alternative attachment figure for
the students (Blodgett & Dorado, 2016). This study includes ideas from Attachment Theory through studying behavior between teachers (caregivers) and students when teachers implement the TIEP practices in the classroom.

I referred to my theoretical framework (see Table 5.1). When I used a priori coding to analyze the teacher checklists and interviews, I used the word “connection” from the TIEP strategy *Connecting with Student to Create Trusting and Comfortable Relationships*. When coding for connection, the word showed up as a theme in implementation of many of the TIEP strategies. Teachers also readily discussed the importance of having a trusting connection with their students, when using the TIEP strategies. When analyzed together, a clear theme emerged between Attachment Theory and the foundation of trusting connections in the TIEP strategies.

**Discussion of Results**

The COVID-19 pandemic added trauma and traumatic experiences to the lives of students. These students may have already had traumatic experiences in their lives, and the effects of the COVID-19 pandemic compounded this. To combat the effects of trauma, educators can use TIEP strategies to create environments where student feel connected, safe, and supported to foster growth. After studying the implementation and manifestation of the TIEP strategies used in the classroom, three major takeaways emerged: (a) teacher awareness of personal trauma and bias is necessary for implementation of the TIEP strategies, (b) a safe and supportive classroom environment must be created as a foundation for the TIEP strategies, and (c) successful student-teacher connection is necessary for the implementation of the TIEP strategies to be effective.
**Teacher Awareness of Personal Trauma and Bias**

The experience of a traumatic event can be extremely damaging, regardless of whether the event was real or perceived (Blodgett & Dorado, 2016; Cavanaugh, 2016). Traumatic experiences can make it difficult for students to regulate their emotions and behaviors, leading to struggles with their cognitive ability (Perry & Hambrick, 2008). These cognitive deficits can negatively affect a student’s experience and ability in a school setting. Students are not the only individuals who have experienced trauma, as teachers may have experienced trauma and can bring the effects of their traumatic experiences and their personal bias, unconscious or explicit, into the classroom.

A gateway requirement for this study was that teachers participated in an online district training regarding integrating trauma-sensitive practices in the school setting which focused on educating teachers about the overall effect of trauma in students. Specifically, this training included information about the ACEs as a tool for understanding levels of trauma in our students. One of the implications of a school district making this training mandatory is the recognition that teachers do need to be trained on and about trauma. The results of this study offer evidence that supports need for trauma training for educators. However, there are more aspects of understanding trauma that need to be included in the training. *Before* teachers are trained on understanding trauma in our students, teachers need to explore their own trauma. Teachers’ perceptions and experiences of trauma, can create unintentional or explicit bias. During the interviews, teachers reported that they had not heard of the ACEs. Some teacher reported that they had experienced trauma, or that they know they have experienced trauma, but that they had never really talked about it. In addition, some teachers’ definitions of trauma only included physical and sexual abuse while this study uses a much broader understanding of traumatic
experience as a framework for this study. How can teachers use a *trauma lens* and be *trauma-informed* when working with students, if they may have never experienced their teachers using a *trauma-lens* and a *trauma-informed* frame of reference when they were in school? As educators, or humans in general, we are all shaped by our past experiences. The instructional practices teachers use often “depend on what they bring into the classroom” (OECD, 2009). The teacher participants in this study had various experiences when they were students that they attributed to shaping their current approaches to teaching. Some participants reported that their own educators were strict rule followers and instilled significant consequences for negative behavior (Interviews, Grace & Mary). Thus, in their view, their experiences with strict rules and lack of personal connection when they were in school has led them to a teaching practice that is more empathic and understanding.

When discussing trauma, each teacher brought their own experiences and perceptions of trauma with them to the interview. However, when creating a trauma-informed approach for teachers to use to help our students, we should consider providing opportunities which allow teachers to explore how their own experiences shape their practice. In this study, there was an indication that the TIEP strategies implemented in this study manifested into calming or positive moments with the students (Interview, Margaret). An analysis of data from the teacher checklist and teacher interviews suggested that the TIEP strategies were more perceived as being more effective once teachers had practiced them, fully understood them, or used them multiple times. This usage provided teachers a clearer picture of the TIEP strategy implementation and the ways it could manifest in the classroom. Training the teachers with examples, discussion, self-exploration, and modeling prior to using the TIEP strategies could allow for more effective implementation in the classroom.
Creating a Safe and Supportive Classroom as a Necessary Foundation

Teachers reportedly used the TIEP strategy of Creating a Safe and Supportive Classroom 97.31% of the time during the implementation part of this study. When coding and analyzing teacher checklists and teacher interviews, many teachers reported that Creating a Safe and Supportive Classroom was more than a just a practice to use periodically throughout the year. Teacher-reported data showed that Creating a Safe and Supportive Classroom interwove its self into many of the TIEP strategies. Venet (2019) posited that when working with students that have experienced trauma, it is the educator’s role to provide a safe and supportive classroom environment. In this study, many teachers such as Grace, Margaret, Mary, John, Rosa and Benjamin, discussed in their interviews the importance of a safe and supportive classroom environment. The teachers also expressed that the creation of a safe and supportive classroom should start at the very beginning of the school year and from the moment students walk in the door (Interviews, Grace, John, Margaret, & Rosa). Teachers reported devoting anywhere between a few days to a few weeks at the beginning of the school year to making sure that students felt safe and supported, so that they were ready to learn. These teachers also affirmed that without the foundation of a safe and supportive classroom, they perceived that students would be unable to effectively learn. In addition, teachers perceived that it was this safe and supportive classroom that allowed for the other TIEP to be effective, as it provided the necessary foundation to implement the other strategies.

Successful Student-Teacher Connection

One of the TIEP strategies that was the focus for this study was Connecting with Students to Create Trusting and Comfortable Relationships. Teachers reported on the teacher checklist that they used the TIEP strategy of Connecting with Students to Create Trusting and
Comfortable Relationships 66.99% of the time. During teacher interviews, teachers eagerly discussed this practice, because the theme of connection often overlapped into other practices. In teacher examples of successful TIEP strategies, even if the strategy did not contain “connecting” or “connection” in the wording, teachers would reference connection when describing positive student and teacher interaction. In his teacher interview, Benjamin addressed when he used the TIEP strategy of Interacting Thoughtfully with Students that thoughtful interaction also includes finding ways to connect with students to let them know you care about them (Interview, Benjamin). Another example of connection came through in Rosa’s description of Promoting a Predictable and Consistent Classroom Environment. Rosa reported that at the beginning of every class, she devotes 5-10 minutes welcoming and checking in with students and then allows the students to check in with each other. This connection is a consistent part of Rosa’s classroom agenda and student know to expect it and understand its importance. The emergence of connection as an important theme in the study ties the research back to the theoretical framework of Attachment Theory, which highlighted the importance of students having a caregiver or teacher to which they can attach or connect.

Limitations of the Study

In this section I will discuss the limitations of this study. These limitations include: (a) the impact of the COVID-19 pandemic, especially in regards to data collection, (b) the small sample population as a result the choice of a case study design, and (c) the setting of a singular middle school.

Limitations in Methodology

This study was conducted during the COVID-19 pandemic. The instructions for teachers when completing the Teacher Checklist was to fill it out daily for 10 days. However, several
teachers were out of school because of pandemic-related illness. At the time of this study, restrictions for returning to work after an illness were very strict and teachers had to wait a specific amount of time before returning in an effort to not have COVID-19 brought back to the school or expose more people. Once schools had reopened and classes were no longer delivered virtually, a teacher had to physically be in the building to teach his/her classes. In addition, teachers that were sick were no longer allowed by the district to virtually teach their classes. Therefore, the range of teacher checklists varies from 3 to all 10 being completed. In addition, while some teachers did not complete the surveys for COVID-19 pandemic-adjacent reasons, I decided to still include their data for the checklists and interviews given that participants’ voices were important for this study.

**Limitations in Analysis**

This research was a case of one middle school. One of the gatekeeping questions for teacher participants was they had to teach a core subject. This requirement limited teacher participants to a total of 46 eligible teachers. While I was fortunate to have a sample size of 22 teacher participants, this limitation provides an opportunity to scale up this study to the district level for a larger study.

The open-ended answers on the teacher checklists and the teacher interviews for the TIEP strategy of *Limiting Exclusionary Practices when a Student Exhibits Negative Behaviors* revealed that teachers had varied ideas about this practice. Some teachers reported that they did not always “limit” exclusionary practices, because some exclusionary practices are beneficial when students need to take a break or go in the hall to allow themselves to deescalate (Interview, Rosa). Other teachers specified they intentionally did not report *Limiting Exclusionary Practices* on their teacher checklist, because there were no incidents where an exclusionary practice would
have been necessary. Teachers also shared that they were concerned that by not reporting that they limited exclusionary practices on the teacher checklist, it would be inferred that they did use exclusionary practices. As within the scope of this study, I analyzed this data solely looking at if the practice was used or not used each day and did not evaluate the teachers or their usage of the practices.

**Limitations in Generalizability**

Every middle school has its own principal and administrative team and each middle school has a slightly different culture, rules, and way of carrying out the student day. The teacher participants for this study were all from the same middle school which limits the generalizability of these results. However, this study of this specific school provides insight as to the perceptions and implementation of trauma-informed practices in this specific school. However, the findings from this research can be examined in relation to findings from studies in other settings to look for similarities and differences in practice.
Implications for Educational Practice

In this study, I examined perceptions and implementation of trauma-informed educational practices in one middle school. Replicating this study across multiple middle school settings could provide further information about perception and usage of the TIEP strategies.

This study focused on teacher perception and usage of TIEP strategies. After completing this study, it is evident that before school districts implement these TIEP strategies, there is a need for a pre-training for educators. In my opinion, a quality pre-training of TIEP strategies for teachers would include modeling of the strategies. Teacher modeling of the practices allows for better understanding of usage and intent of the strategy and will be included in this training.

The training will first create a safe and comfortable space for the participating educators, demonstrating the importance of both learning and teacher in a safe space. This modeling can demonstrate the importance of this strategy for the teachers, so instead of telling the teachers about this strategy, they are living it and understanding it through their interaction. Part of the training will be instructor-led facilitated discussions that are selected with the purpose of creating connections and understanding among the teachers. There can be discrepancies among teachers, when understanding each of the TIEP strategies. If facilitators can model the strategies with role play of their own actions and discussion, educations will have a better understanding of the practices. After the establishment of a safe and comfortable environment for the training, and teachers start to feel connected, discussions can begin. Important discussion for this training includes information about the ACEs and the updated version of the instrument. There also needs to be resources shared. This training would allow teachers to relate the ACEs and the TIEP strategies to themselves, instead of to their students, and hopefully provide teachers with their own trauma lens.
Implications for Future Educational Research

Future educational research related to this study would be student perception of the effectiveness of the TIEP strategies. This research will have to be conducted carefully and with the help of counselors to make sure that there is no trauma added to students. The TIEP strategies are created for all students and have shown from this study, to be beneficial to students. However, as with any study, researchers must be aware of and protect all participants. Understanding how students perceive the effectiveness of the TIEP and respond when their teachers use these strategies will contribute to a more comprehensive view of how educators employ a trauma-informed lens in our schools.

Summary

In this chapter I discussed my research and findings on the implementation of TIEP in the middle school classroom during the COVID-19 pandemic. Overall, teachers reported the TIEP strategies in this study were effective when implemented in a middle school classroom. Teachers conveyed the necessity of creating a safe and supportive classroom as a foundation for the TIEP strategies. Teachers also confirmed the importance of connection as an overarching theme within each strategy. This study illustrates the importance of the TIEP strategies and continued trauma-informed training for successful implementation of the TIEP addressed in this study.
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Appendices

Appendix A

Recruitment Email

TO: [redacted] Middle School Teachers who have participated in a West Chester Area School District Trauma-Informed Educational Practices Training and Teach a Core Subject (English/Language Arts (ELA), History, Math, or Science) in 6th-, 7th-, or 8th-grade.

FROM: Loralynne Yost, Doctoral Candidate, West Chester University

RE: Participation in Dissertation Research Study

Hello [Teacher First Name],

I hope this email finds you well! I am currently a doctoral student in the EdD Program at West Chester University. I am reaching out to ask for your participation in a research study for my dissertation. My dissertation study seeks to understand teacher conception and teacher use of Trauma-Informed Educational Practices in the classroom.

I am writing to ask for your participation in two surveys and an interview. The initial survey will provide a better understanding of how you conceptualize Trauma-Informed Educational Practices in the classroom. This survey should take around 5-10 minutes. Then I will ask you to participate in a two to three-week study, where you will use the Trauma-Informed Educational Practices in your classes. Each day that you use the Trauma-Informed Educational Practices in your classroom, you will fill out a checklist of what practices you used (approximately 3-5 minutes per day). At the completion of the use of the Trauma-Informed Educational Practices in the classroom, you will be asked to participate in a follow up interview. This interview will be recorded on zoom and will take approximately 30 minutes. All of your information or this study will be anonymous and you will either be referred to as “Teacher A, B, C . . . “ or a pseudonym of your choice. The first survey will take place in late December and the second survey and follow-up interviews will take place mid-January. Participants for the study must meet the criteria outlined below:

To be considered for this study, you must meet the following criteria:
1. You are 18 years of age or older.
2. You teach a core (English/Language Arts (ELA), History, Math, or Science) subject at [redacted] for 6th-, 7th-, or 8th-grade.
4. You complete the Informed Consent form through Qualtrics.

If you have any questions regarding the study, participation, the consent form, or anything that is unclear, please email me at LYost@wcupa.edu. This study has been approved by the WCU IRB, protocol: IRB00005030.

Thank you in advance for your time and consideration regarding my research! I greatly look forward to working with you!
Appendix B

Consent

Eligibility Requirement
In order to participate for this research, you must meet the following criteria. If you can answer YES to ALL questions below, please complete this Consent Form and Questionnaire:
1. You are 18 years of age or older.
2. You teach a core (English/Language Arts (ELA), History, Math, or Science) subject at E.N. Peirce Middle School in 6th-, 7th-, or 8th-grade.
3. You participated in a District hour long training for Trauma-Informed Educational Practices.
4. You are willing to complete Survey 1 (5-10 minutes), Survey 2 (3-5 minutes a day for 10-15 days).
The above requirements could take a maximum of 1 hour and 25 minutes of your time.

Eligibility Please indicate your eligibility for this study below.

○ I meet all of the criteria above and am eligible to participate in this study.

○ I do not meet all of the criteria above and am not eligible to participate in this study.

Skip To: End of Survey If Please indicate your eligibility for this study below. = I do not meet all of the criteria above and am not eligible to participate in this study.

Consent Form
Project Information
Project Title: A Mixed Methods Study on Trauma Informed Educational Practices in the Classroom During the COVID-19 Pandemic

Investigator(s): Loralynne Yost; Dr. Heather Schugar

Project Overview: Participation in this research project is voluntary and is being done by Loralynne Yost as part of her Doctoral Dissertation. The purpose of this study is to examine how teachers are supporting their middle school students during the COVID-19 pandemic. Many students have experienced difficulties as a result of the COVID-19 pandemic. This study will enhance the understanding of how teachers have implemented various practices to support their students during a pandemic. This study has been approved by the WCU IRB protocol: IRB00005030.

1. What is the purpose of this study?
The purpose of this study is to examine how teachers are supporting their middle school students during the COVID-19 pandemic. Many students have experienced difficulties as a result of the COVID-19 pandemic. This study will enhance the understanding of how teachers have implemented various practices to support their students during a pandemic.

2. If you decide to be a part of this study, you will be asked to do the following:
-Complete Survey 1 (5-10 minutes)
-Complete a Teacher Checklist - (3-5 minutes per day for 10-15 days, for a minimum of 30
minutes and a maximum of 75 minutes.)

3. If you decide to be a part of this study, you will also be asked if you would be willing to do the following: Participate in a follow up Zoom interview that will be audio and video recorded, with the researcher. (30 minutes)

Total maximum amount of your time that could be used to participate in this study is 1 hour and 55 minutes.

4. Are there any experimental medical treatments?
   No

5. Is there any risk to me?
   There is minimal risk for participating in this study. You may experience discomfort when reflecting on your teaching practices. If this happens, the researcher and school counselor will be on hand if you would like to speak to someone. There is also a risk of the loss of up to 1 hour and 55 minutes of your time (either professional time or personal time) by completing this study.
   If you experience discomfort, you have the right to withdraw at any time.

6. Is there any benefit to me?
   There is no direct benefit to you. You will be able to give meaningful feedback to the researcher to help create a framework for how different educational practices work in the classroom to support students during difficult life events.

7. How will you protect my privacy?
   • Your records, including survey responses and interview, will be private. Only Loralynne Yost, Dr. Heather Schugar, and the IRB will have access to your name and responses. Your name will not be used in any reports; you will have a chance to select a pseudonym for yourself.
   • Your interview will be audio and video recorded and transcribed using Zoom.
   • Records will be stored:
     ✓ On a Password Protected File/Computer
     ✓ In a Locked Filing Cabinet in the Researcher’s Classroom
     ✓ If there are any paper copies they will be kept in a locked filing cabinet in the teacher’s classroom - Room [ ], at [ ], [ ], at [ ].
   • All records will be anonymized. All identifiable data will be removed and given identifiers known only to Loralynne Yost and Dr. Heather Schugar.
   • Records will be destroyed three years after study completion.

8. Do I get paid to take part in this study?
   No

9. Who do I contact in case of research related injury?
   For any questions with this study, contact:
   - Primary Investigator: Loralynne Yost at [ ] or LY780020@ [ ] or LYost@ [ ]
     - Faculty Sponsor: Dr. Heather Schugar [ ] or HSchugar@ [ ]

10. What will you do with my Identifiable Information/Biospecimens?
    Not applicable.

To participate in this study, [ ] University requires that you agree and sign this consent form. You may ask Loralynne Yost any questions to help you understand this study.
If you take part in this study, your responses will remain confidential and will not be used in any way to evaluate your performance, as related to the West Chester Area School District (WCASD). If you choose not to be a part of this study, your decision will not be used in any way to evaluate you, as related to the West Chester Area School District.

If you take part in this study, your responses will remain confidential and will not be used in any way to evaluate your performance, as related to West Chester University (WCU). If you choose not to be a part of this study, your decision will not be used in any way to evaluate you, as related to West Chester University.

If you choose to be a part of this study, you have the right to change your mind and stop being a part of the study at any time.

For any questions about your rights in this research study, contact the ORSP at 610-436-3557.

My consent is being sought for a research study. I understand my participation is voluntary and I am under no obligation to participate. The time expected for my participation is approximately one to two hours over the course of two months. The researcher is asking me to complete Eligibility/Criteria requirement, a survey, a teacher checklist, and an audio and recorded interview via Zoom.

I, _________________________________ (your name), have read this form and I understand the statements in this form. I know that if I am uncomfortable with this study, I can stop at any time. I know that it is not possible to know all possible risks in a study, and I think that reasonable safety measures have been taken to decrease any risk.

Please indicate your consent below.

- [ ] I consent to be part of this study.
- [ ] I do not consent to be part of this study.
Appendix C
Demographics and Survey

Q1 What is your race/ethnicity? Please check all that apply.

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander
- White
- Mixed or Multiracial
- Prefer not to share

Q2 What is your gender?

- Male (including transgender men)
- Female (including transgender women)
- Non-binary
- Gender Identity Not Listed
- Prefer Not to Share

Q3 Please select ALL core subjects that you are teaching for the 2021-2022 school year? Please check all that apply.

- English/Language Arts (ELA)
- History
- Math
- Science
Q4 Please list ALL of your teaching certification areas, including subjects and grades certified. Example: English/Reading (ELA) Grades 4-8, Special Education Grades K-12

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Q5 What grade do you teach for the 2021-2022 school year? Please check all that apply.

○ 6th grade

○ 7th grade

○ 8th grade

Q6 How many years have you been certified to teach middle school (grades 6, 7, 8) in Pennsylvania?

○ 1

○ 2

○ 3

○ 4

○ 5

○ 6

○ 7

○ 8

○ 9

○ 10

○ More than 10 years
Q7 How many years have you taught (in the classroom or virtually) middle school (grades 6, 7, 8) in Pennsylvania? (Teaching years do not have to be consecutive.)

- [ ] 1
- [ ] 2
- [ ] 3
- [ ] 4
- [ ] 5
- [ ] 6
- [ ] 7
- [ ] 8
- [ ] 9
- [ ] 10
- [ ] More than 10 years

Q8 Please list any additional training you have had in trauma related areas. Examples could be a class or training session that included trauma-informed care, trauma-informed practices. Please briefly describe the type of training and its focus. (You do not need to include the district trauma training.)

__________________________________________________________________
__________________________________________________________________

Q9 Please rate how effective you find the following TIEP are/will be when maintaining a positive classroom environment?

<table>
<thead>
<tr>
<th>Not Effective</th>
<th>Somewhat Effective</th>
<th>Mostly Effective</th>
<th>Effective</th>
<th>Extremely Effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creating a safe and supportive classroom environment for your students.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>
Staying calm when a student has a negative outburst in class.

Interacting thoughtfully with your students, instead of quickly responding and moving on.

Finding a way to connect with each student that is specific to their interests and talents.

Using daily routines/agendas to promote consistency and predictability.

Encouraging your students to think positively when they are upset or nervous.

Giving supportive feedback to students when they are thinking negatively about a mistake they made on an assignment.

Finding moments to praise/support
students who don't often receive positive praise.

Limiting exclusionary practices when a student exhibits negative behavior.

Q10 During the course of a school week, how often do you use each of the following TIEP in your classroom?

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>1 Time Per Week</th>
<th>2-3 Times Per Week</th>
<th>4-5 Times Per Week</th>
<th>Daily</th>
<th>Multiple Times Each Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creating a safe and supportive classroom environment for students.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staying calm when a student has a negative outburst in class.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interacting thoughtfully with your students, instead of quickly responding and moving on.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Finding a way to connect with each student that is specific to their interests and talents.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Using daily routines/agendas to promote</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
consistency and predictability.

Encouraging your students to think positively when they are upset or nervous.

Giving supportive feedback to students when they are thinking negatively about a mistake they made on an assignment.

Finding moments to praise/support students who don't often receive positive praise.

Limiting exclusionary practices when a student exhibits negative behavior.

Q11 Please click this link to sign up for the Zoom Follow-up Teacher Interview. Thank you in advance for your time!

Click Here to Sign Up for the Teacher Interview
Appendix D

Checklist

Thank you for your participation in this study! An individualized link to this part of the study has also been sent to your email. You may also use your phone or computer to record your daily results. If you are not using the hard copy, please contact me at LYost@wcasd.net, and I will collect it.

- Please complete Question 1 and Question 2 for EVERY day of the study.
- Please complete Question 3 and Question 4 any days you have notes you want to share.
- The dates for the study are listed below. Please check the appropriate date for each of the 10 days that you participate. There are “Other” spaces listed after the dates if you are out and need to make up days when you return.
- If you need anything, please contact me at LYost@wcasd.net.

Q1 Please select today's date.

- [ ] January 13
- [ ] January 14
- [ ] January 18
- [ ] January 19
- [ ] January 20
- [ ] January 21
- [ ] January 24
- [ ] January 25
- [ ] January 26
- [ ] January 27
- [ ] Other __________________________________________
- [ ] Other __________________________________________
- [ ] Other __________________________________________
- [ ] Other __________________________________________
Q2 Please use the checklist below to keep track of what TIEP you used in your classroom for the date of the study you selected above.

<table>
<thead>
<tr>
<th>I used this strategy today</th>
<th>I did not use this strategy today.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Creating a safe and supportive classroom environment for your students.</td>
<td>〇</td>
</tr>
<tr>
<td>Staying calm when a student has a negative outburst in class.</td>
<td>〇</td>
</tr>
<tr>
<td>Interacting thoughtfully with your students, instead of quickly responding and moving on.</td>
<td>〇</td>
</tr>
<tr>
<td>Finding a way to connect with each student that is specific to their interests and talents.</td>
<td>〇</td>
</tr>
<tr>
<td>Using daily routines/agendas to promote consistency and predictability.</td>
<td>〇</td>
</tr>
<tr>
<td>Encouraging your students to think positively when they are upset or nervous.</td>
<td>〇</td>
</tr>
<tr>
<td>Giving supportive feedback to students when they are thinking negatively about a mistake they made on an assignment.</td>
<td>〇</td>
</tr>
<tr>
<td>Finding moments to praise/support students who don't often receive positive praise.</td>
<td>〇</td>
</tr>
<tr>
<td>Limiting exclusionary practices when a student exhibits negative behavior.</td>
<td>〇</td>
</tr>
</tbody>
</table>
Q3 Without providing specific details (i.e. no student names), what was the behavior exhibited in your classroom that made you decide to use a TIEP strategy?

__________________________________________________________________________
__________________________________________________________________________

Q4 Without providing specific details (i.e. no student names), what was the outcome of using this TIEP strategy?

__________________________________________________________________________
__________________________________________________________________________

Q5 Overall, how effective do you feel the TIEP practice were? Which TIEP strategy (or strategies) worked better than others? Which TIEP strategy (or strategies) did not work?

__________________________________________________________________________
__________________________________________________________________________

Q6 If you have not yet done so, please click this link to sign up for the Zoom Follow-up Teacher Interview. Thank you in advance for your time!

Click Here to Sign Up for the Teacher Interview
Appendix E

Interview

Interview Notes These questions will be asked over zoom. This script is providing a description of the questions the researcher/interviewer will use. Questions 1-4 will be used depending on the responses of the teacher checklist. If the teacher used more Trauma-Informed Educational Practices, the researcher may ask more about them, and if the teacher used less than four, the researcher will not need all four questions. This is a semi-structured interview. As the researcher is asking questions, if the teacher takes a different direction with the interview, the researcher will follow the teachers lead.

Participant Consent Review Script for Participant -
Hello! Thank you for allowing me to interview you today. Thank you for previously giving consent for this interview with the Teacher Consent form you filled out in the beginning of this study.
I would just like to review some things with you.
- This interview is taking place over zoom and the audio and video will be recorded for transcription purposes.
- This interview should take approximately 30 minutes of your time.
- During this interview you will be asked questions about your experience using Trauma-Informed Educational Practices in the classroom.
- The risks associated with participation are minimal. Risks include time spent on the interview and any discomfort with a question. The researcher respects your right to not answer any questions that make you feel uncomfortable.
- There are no direct benefits to for your participation. However, your willingness to participate will contribute to important information for the researcher’s study.
- You may refuse to participate or stop your participation in the exercise at any point.
- Your name will be kept confidential and the information collected will be used only for this exercise. The interview will be audio and video recorded. Information from this exercise will only be used for the purpose of this study. Do I have your consent to continue with the interview? Participant states Yes/No If participant states Yes, interview continues. If participant states No, interview stops.

Q1 For this study, you used a Trauma-Informed Educational Practices checklist. You indicated that you used (Insert description of Trauma-Informed Educational Practices from checklist). What do you feel went well with this? What do you feel did not go well with this?

Q2 For this study, you used a Trauma-Informed Educational Practices checklist. You indicated that you used (Insert description of Trauma-Informed Educational Practices from checklist). What do you feel went well with this? What do you feel did not go well with this?

Q3 For this study, you used a Trauma-Informed Educational Practices checklist. You indicated that you used (Insert description of Trauma-Informed Educational Practices from checklist). What do you feel went well with this? What do you feel did not go well with this?

Q4 For this study, you used a Trauma-Informed Educational Practices checklist. You indicated
that you used (Insert description of Trauma-Informed Educational Practices from checklist). What do you feel went well with this? What do you feel did not go well with this?

Q5 Without providing specific details (i.e. no student names), what was the behavior exhibited in your classroom that made you decide to use a TIEP strategy? What strategy did you use? What prompted you to use this strategy?

Q7 How did you perceive the effectiveness of your use of Trauma-Informed Educational Practices?

Q8 Which Trauma-Informed Educational Practice(s) worked better than others?

Q9 Which Trauma-Informed Educational Practice(s) do you feel did not work? How would you change this Trauma-Informed Educational Practice to be more useful?

Q10 What Trauma-Informed Educational Practice would you remove from the nine used in this study? Why?

Q11 What strategies would you add to these Trauma-Informed Educational Practices? Why?
Appendix F
Letter of Consent from District Superintendent

November 3, 2021

West Chester University
Graduate Studies
Institutional Review Board
West Chester PA 19383

Dear Members of the Institutional Review Board,

I, [Redacted], Superintendent of the [Redacted] District, grant Loralynne Yost permission to conduct her research on *A Collective Case Study on the Effects of Trauma-Informed Educational Practices During the COVID-19 Pandemic* at the middle school level in [Redacted] District. I have been advised of the scope of the research and how data will be collected. I also understand that all information to be gathered will be collected in a confidential and appropriate manner. I understand permission is contingent upon approval from West Chester University’s Institutional Review Board.

As educators, we promote life-long learning for our students and staff alike. The [Redacted] District plans to give Ms. Yost their support through the research phase and overall completion of her doctoral studies. We look forward to reviewing and learning from her completed work.

Sincerely,
Appendix G
Letter of Consent from Middle School Principal

Loralynne Yost

October 27, 2021

Dear Members of the Institutional Review Board,

Loralynne Yost has permission to conduct his/her research on *A Collective Case Study on the Effects of Trauma-Informed Educational Practices During the COVID-19 Pandemic* at the middle school level at [redacted] Middle School. I have been advised of the scope of the research and how data will be collected. I also understand that all information to be gathered will be collected in a confidential and appropriate manner. I understand permission is contingent upon approval from West Chester University’s Institutional Review Board.

Sincerely,

[Redacted]

Sincerely,
Appendix H
IRB Approval Letter

Jan 3, 2022 12:03:44 PM EST

To: Loralyne Yost
Col of Education & Social Work, Literacy]

Re: Expedited Review - Initial - IRB-FY2022-12 A Convergent Mixed Methods Study on Trauma-Informed Educational Practices During the COVID-19 Pandemic

Dear Loralyne Yost:

Thank you for your submitted application to the WCUPA Institutional Review Board. Since it was deemed expedited, it was required that two reviewers evaluated the submission. We have had the opportunity to review your application and have rendered the decision below for A Convergent Mixed Methods Study on Trauma-Informed Educational Practices During the COVID-19 Pandemic.

Decision: Approved

Selected Category: 7. Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies.

Sincerely,
WCUPA Institutional Review Board

IORG#: IORG0004242
IRB#: IRB00005030
FWA#: FWA00014155