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THE IMPACT OF TRAUMA ON THE LEARNING AND DEVELOPMENT OF STUDENTS
RECEIVING SPECIAL EDUCATION SERVICES

A MASTER'S THESIS
SUBMITTED TO THE FACULTY
OF BETHEL UNIVERSITY

BY

MIKAYLA BEBEAU

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FOR THE DEGREE OF
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THE IMPACT OF TRAUMA ON LEARNING AND DEVELOPMENT OF STUDENTS RECEIVING
SPECIAL EDUCATION SERVICES

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APPROVED

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Abstract

Childhood trauma is known as a health crisis in America. Trauma can be defined in multiple different ways, can be displayed in different behaviors, and can be supported within school if done so appropriately. Within this literature review thesis, trauma is defined in different ways. It also evaluates the different symptoms that students might bring into the classroom as a result of the adverse childhood experience. This literature review evaluates the different ways to support children of trauma, whether they receive general education or special education support through the different recommendations of trauma-informed education and creating supportive environments.

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Chapter I: Introduction

Introduction

Students' needs can be determined through a wide variety of assessments, interventions, and academic skills and development. When a student has experienced a source of trauma, these needs can be impacted and can impact the development and learning abilities of the student. A student's needs may be determined via an evaluation. Should the needs impact the student's ability to make academic progress, a special education evaluation may be considered. This is where it might be difficult for educators to determine if a student needs specialized instruction through special education services from the behaviors displayed as a result of an evaluation or just interventions incorporated within the general education classroom through the trauma-informed approach.

Felitti et al. (1998) performed a study about the health risks in adulthood with different exposures to childhood adverse experiences. According to Sadin (2022), two out of three students in classrooms across America have experienced a traumatic experience, emphasizing that childhood trauma is a national health crisis. Bridging these two together, it is important to evaluate and provide support for students with ACES whether it be special education services or other interventions. A study conducted in the state of Washington by Sadin (2022) discovered that those who have experienced trauma are more likely to qualify and receive special education services.

It is also important for educators to know the symptoms trauma might display in some students. This will inform educators if a student has experienced trauma or if there are other

factors that might be contributing to behaviors, whether internalized or externalized, displayed by students. This might have educators questioning if a behavior is a result of trauma or if a student might qualify for special education services under the emotional behavioral disorders (EBD) category. In the state of Minnesota, Emotional Behavioral Disorders (EBD) criteria emphasize that behaviors should occur over at least 6 months, have patterns or behaviors of withdrawn or anxiety, aggression, or disordered thoughts. Looking at the criteria will be important and beneficial for educators to evaluate if a trauma student fits the mold for an emotional behavioral disorder evaluation.

As students age, they experience a wide variety of changes to their brain and bodies biologically (Harper, 2018). When educators are aware of the brain and body's development at specific ages, they are better able to support the learning and development that is appropriate for a student's specific age (Harper, 2018). With that, it is important to dig deeper into a student's development when they have experienced trauma and how it further impacts the brain and body's development. This guides educators to know if trauma is impacting the proper development of a student and if they are reaching the recommended milestones socially, behaviorally, and academically. This will guide educators on how to support students through trauma-informed learning to support their specific learning and developmental needs.

Looking deeper into how trauma can impact a student's brain development, their ability to learn as well as the behaviors they display, can allow educators to be proactive on how to support students who have experienced trauma. Educators who are trauma informed can guide instruction, provide support, and implement interventions and Individualized Education Programs (IEPs) to help students with these traumatic adverse childhood experiences. Students

who have experienced trauma are more likely to lack a sense of belonging and safety, which further impacts their ability to engage and learn (Imad, 2022). It is valuable for educators to be informed about trauma-informed practices in order to support, both general education students and special education students, through their traumatic stress so they are able to feel safe, engaged, and able to close the achievement gap between students with and without adverse childhood experiences (Felitti et al., 1998).

Rationale

For this research, the rationale focused on the importance of trauma that students continue to face or bring into the school environment. Traumatic events are things that everyone experiences differently and show different outcomes of said trauma. It is important to evaluate how trauma impacts student cognitive development, learning abilities, and social, emotional, and/or behavioral development. This brings into question how trauma review students on special education caseload. With students who meet criteria for special education services under the emotional behavioral disorder category, it is valuable to evaluate if it is a deficit in emotional and behavioral development or a result of trauma. It is valuable for educators to evaluate if students need special education instruction in order to meet their needs or if the schools need to implement trauma-informed interventions and practices in order to support all students.

Definitions of Terms

The important terminology used throughout this thesis is defined as follows:

Adverse Childhood Experience (ACE)

Shafer and Easton (2021) defined this term as “abuse, neglect, family dysfunction, and other traumatic childhood events” (p. 1076).

Crisis Response

Hilarski (2004) defined these as the brain's reaction to stress results in fight, flight, or freeze and can be perceived as the antisocial behaviors of the student, including the lack of empathy, activating out, resistance, or even being impulsive or showing bouts of anger.

Development

Harper (2018) defined development as a wide variety of changes to their brain and bodies biologically.

Social and Emotional Learning (SEL):

The social and emotional skills embedded in schools in order to allow for students to begin to regulate their bodies without resorting to those crisis responses, build relationships, and build a sense of trust within the schools and the staff, students, and other personnel within the school (Pawlo et al., 2019).

Trauma

Ernest et al. (2022) defined trauma as “an emotional response to a terrible event like an accident, rape, or natural disaster” (p. 8).

Trauma-Informed Teaching

The “safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment, voice, and choice; and addresses cultural, historical, and gender issues” (Champine et al., 2021, p. 460) within the school setting to support students who have experienced trauma.

Statement of the Question or Topic

The guiding research question for this thesis is as follows: How does trauma impact the development and learning abilities of students, specifically of those who receive special education services? When it comes to researching these questions, it is important to dig deeper into different aspects of this question. The first is to explore what trauma is, what it can look like for students, and how it impacts students. This might relate to the symptoms of trauma or the different ways those impacted by trauma might display the impacts. The next area to research is the possible effects of trauma on students' development and their learning. Lastly, it will be beneficial to evaluate how trauma-informed teaching can benefit students who receive special education services to determine the different strategies to help support students who have experienced trauma.

CHAPTER II: LITERATURE REVIEW

Students' needs can be determined through a wide variety of assessments, interventions, and academic skills and development. When a student has experienced a source of trauma, these needs can be impacted and can impact the development and learning abilities of the student. Ernest et al. (2022) defined trauma as “an emotional response to a terrible event like an accident, rape, or natural disaster” (p. 8), emphasizing that trauma truly looks different for a wide variety of students. It can depend on their age, their experience, and have a wide variety of impacts.

This literature review chapter looks into what trauma is or the different ways it can be defined. It evaluates what trauma looks like, such as symptoms or outcomes that can arise from these adverse childhood experiences (Fetilli et al., 1998). It evaluates how these outcomes can impact the health of the victim and different behaviors that might arise, whether those behaviors be displayed internally or externally for the trauma victims. Traumatic experiences can impact the development of the individual and the learning and learning experiences of the individual. Between the cognitive development, social impact, and learning experiences of these students, it is valuable for educators to promote a learning environment through a trauma lens to create a sense of safety and promotion of learning that these students are able to have a sense of success. This literature review also evaluates the aspects of students receiving special education services, what their trauma may look like, and how to be trauma-informed with students on the special education caseload.

Adverse Childhood Experiences

Shafer and Easton (2021) conducted a qualitative study examining the impact of adverse childhood experiences. Within this study, trauma was described by the authors as “abuse, neglect, family dysfunction, and other traumatic childhood events” (Shafer & Easton, 2021, p. 1076). Shafer and Easton emphasized how when adverse childhood experiences are increased, the more psychological distress, poor physical health, low educational attainment, and other problems become significant to the child.

Davies et al. (2021) studied how childhood experiences that are deemed adverse can impact the quality of one's life, as well as have a greater impact of developing anxiety or anxiety-like symptoms. The research surveyed students at the college level and discovered that of those surveyed, 37% met criteria for generalized anxiety disorder (Davies et al., 2021). When children experience adverse childhood experiences like abuse or neglect, they display characteristics of anxiety or depression. This demonstrates some of the internalization behaviors that might occur within students who have adverse childhood experiences. For students within this study, some experienced more than one adverse childhood experience. These experiences truly look different for everyone, can impact those in different ways, and can impact one's social, emotional, and academic learning experiences.

Trauma Symptoms

Zashchirinskaia and Isagulova (2023) recognized that childhood trauma can have an impact on a child's development, more specifically their emotional well-being/functioning and psychological functioning. Within this study, traumatic examples included: physical and psychological (emotional) abuse, harassment, emotional neglect, or physical neglect. The results of these interpersonal childhood traumatic experiences resulted in “a higher risk of anxiety, depression, posttraumatic stress symptoms, dissociation, substance abuse, aggression, risky sexual behavior, borderline traits, antisocial, avoidant, schizotypal, and schizoid personality disorders” (p. 66).

Symptoms of trauma can truly look different for every victim who has experienced an adverse childhood experience. Internal impacts can be noted with mental health related correlations or abilities to learn and external factors included such as social aspects or aggressive tendencies. Trauma symptoms can truly look different for every person impacted. Based on the traumatic event that occurred for the victim, some people might also develop harmful health behavior or poor health outcomes. These can be things such as increased likelihood of smoking cigarettes, use of substances or alcohol, sexual risk taking, poor mental health, obesity, and greater risk of heart disease or cancer (Marks et al., 2022).

In Zashchirinskaia and Isagulova's (2023) qualitative study, the goal was to look at how different psychotraumatic situations during childhood brought forth high risk behaviors in

adolescents with borderline personality disorder (BPD). The sample of students were ages 12-18 and included a total of 120 selected pupils. Sixty of these students were already diagnosed with borderline personality disorder. The other 60 pupils had other issues psychologically, but displayed no risky behaviors. These pupils had no prior experience with a psychiatric clinic or the use of psychological treatment or psychiatric medications. Data was collected through different questionnaires and screenings in the areas of demographics, childhood trauma, sexual addiction screening, eating attitudes, and suicidal behavior. The results of the questionnaires and additional research showed that “health risk behaviors are prevalent in adolescents with BPD and that these adolescents report considerably larger levels of childhood traumas in comparison to controls” (p. 68). Another finding was that those with BPD were more likely to have those adverse childhood experiences than those pupils not attending a clinical psychotherapy center. This study suggested that those with adverse childhood experiences can lead to BPD, BPD symptoms, or are at a higher risk for developing other psychiatric disorders (i.e anxiety).

Development

As students age, they experience different stages of development through the body and the brain (Harper, 2018). When educators are aware of the brain and body’s development at specific ages, they are better able to support the learning and development that is appropriate for a student's specific age (Harper, 2018). Puberty is a time of development where the body and brain develop. Harper (2018) explained that during adolescence, puberty is a critical time of brain development that manages involuntary brain responses. Puberty can also be impacted by

trauma. It is noted by Harper (2018) that those who are raised in homes of different structures, such as homes of divorce, living with foster families, or an unhealthy home life tend to mature faster and at an earlier age than those from stereotypical homes. Those who experience trauma in the sense of lack of food, not receiving proper nutrition, and food insecurity also struggle with the puberty stage. When puberty occurs, the brain develops plasticity, which is the brain's ability to adapt and change to environments and experiences. If puberty is delayed, this brain development might also be delayed. With that, it is important to dig deeper into a student's development when they have experienced trauma and how it further impacts the brain and body's development. This will guide educators on how to support students through trauma-informed learning to support their specific learning and developmental needs.

Trauma and Early Adolescent Development

Frydman and Mayor (2017) discussed how the impacts of trauma can impact adolescent development for students. Trauma symptoms can look like behaviors such as aggression, excessive movement, inattention, isolation, and other difficulties documented within school. Within this study, the researchers emphasized trauma's impact on development and the importance of trauma-informed teaching within schools. The study focused on qualitative research with the emphasis on looking deeper into what the impacts of trauma are on early childhood development. The researchers focused on social development, cognitive development, and the emotional regulation of students who have experienced traumatic experiences. Next, the researchers performed two case studies in which they implemented the trauma-informed

approach Animating Learning by Integrating and Validating Experience (ALIVE) program (Frydman & Mayor, 2017).

Based on these two case studies and an intensive literature review, the findings suggested the importance of social workers or other professionals within schools to truly understand and examine the impact trauma can have as an adolescent develops (Frydman & Mayor, 2017). It is also valuable to have “primary implication for school social workers is not to wait for explicit problems related to known traumatic experiences to emerge before addressing trauma in the school, but, rather, to follow a model of prevention assessment-intervention” (Frydman & Mayor, 2017, p. 245). Lastly, it will be beneficial for school staff to be able to provide trauma-informed interventions at an individual level, as well as the ability to assess trauma at a widespread level (Frydman & Mayor, 2017).

Cognitive Development and Trauma

Anderson-Ketchmark and Alvarez (2009) mentioned that there is known information on the different effects trauma has on children and adolescents in the areas of behavior, self-identity, and cognition. The researchers furthered this by showing that there are limitations on the amount of information there is with trauma and brain development with the learning process with the addition of social and emotional difficulties (Anderson-Ketchmark & Alvarez, 2009). The researchers evaluated the impacts trauma has on learning, the role school has in supporting students, and providing a framework for trauma-informed practices.

It is apparent that trauma and trauma outcomes can look different for every victim. Psychological research showed that adolescent trauma can decline a victim's ability to concentrate, memorize things, their ability to organize, and different aspects of language components. All of the things stated above are skills that a student needs in order to function in school (Anderson-Ketchmark & Alvarez, 2009). For some students, it impacts their ability to display appropriate behaviors and might lead to learning difficulties. It might also lead to anxiety, depression, and perfectionism. Anderson-Ketchmark and Alvarez mentioned that it is shown that students who have experienced trauma have many more academic difficulties than those without adverse childhood experiences.

Blanchette and Caparos (2016) conducted a study to see how trauma and traumatic experiences impact the working memory of the individual. Based on the study, it was noted that women who experienced sexual abuse had generally lower working memory than those who had other traumatic life experiences. It was still noted that the working memory of a trauma victim is generally negatively working systematically (Blanchette & Caparos, 2016).

Development Through the Trauma Lense

Shalka (2022) evaluated what student development should look like through the lens of one who has experienced trauma. Shalka emphasized that those who have experienced trauma can be viewed in society as damaged or held at a disadvantage. Shalka's main research study areas were to first examine what trauma is and to evaluate how it impacts college aged students

in their development. Shalka also evaluated how trauma, when at the college level, may impact the students' mental distress or systemic privilege to truly show the complexity of trauma and the ways in which it impacts development of a student.

It is apparent that trauma or an adverse childhood experience can cause a variety of health issues in the future, such as eating disorders, anxiety, heart disease, or cancer. Shalka questioned how trauma can impact early adulthood development, specifically identity development. Shalka mentioned how trauma victims are impacted by how those around them responded to the distress they experienced. Shalka looked at race and gender and broad social conversations with the meaning of trauma. This could be victims feeling like they are in the wrong with being told phrases like 'you are trying to get attention' or 'get over it'. These factors can truly impact how the victim analyzes and experiences the trauma they encounter, specifically with the fear of appearing frail (Shalka, 2022). Shalka concluded with further questions to be considered in the future with development and early adulthood.

Trauma and Learning

Teaching students with past traumatic experiences is not uncommon in today's world. It is important for educators to be aware of the effects trauma has on learners and their learning experiences. Sitler (2009) evaluated two student experiences at different levels with how educators learn to meet the needs of students with both learning and trauma backgrounds. One of the students, a female (fifth grade) discussed in Sitler's essay, rarely had her homework completed and had trouble reading. The other student (college level) would hide in his

sweatshirt, slump in his seat, and appear tired. Teachers' perceptions of these students were not positive perceptions. Some thought they were just lazy, not putting forth effort, against authority, and not ready for their current level, but in reality, their outside of school trauma or recovering from trauma is overwhelming and more of a priority in their lives.

Sitler (2009) emphasized that an individual's basic needs are physiological, security, and emotional. For the fifth grade female student, these basic needs were not being met. She often did not know which bus to take home (divorced home), was unsure of her relationship with her mother, and felt unwanted. For this student, her main priority was food, a sense of security, and emotional well-being (feeling loved). Her energy was spent on other worries such as what she will eat and where she will sleep. Her energy was not spent on the cognitive concerns school requires, such as what homework is due, learning new vocabulary, or even thinking about the future, as just getting through the day was the main priority.

According to Sitler (2009), an educator should first reframe their mindset when it comes to these students. Instead of pointing them out as lazy or disengaged, an educator can dig deeper on what needs (physical or emotional) need to be met. These students cannot control their circumstances, so educators should hold them accountable to feel safe independently at school. It is also important for educators to develop the relationship. Trauma victims often feel alone, abandoned, or ignored (Sitler, 2009). These relationships can create a safe learning environment to allow for academic connections to be made. By creating the connection, building the safe

relationship, changing the mindset of the victims, and meeting a student's needs, educators can develop and foster better growth for learning opportunities.

Fear of Learning

Christou and Wearing (2015) mentioned that learning can be fearful as the control of the environment is not in the hands of the learner. There is the social interaction, fitting in, and feeling safe that can all cause a sense of anxiety for learners. With learning and school and being in that environment, there can be so much unknown, lack of control, and a lack of comfort for the student. For those who have past trauma, this can impact the fear of learning as well.

Those who experience trauma are all living with experiences that continue to haunt them. These traumatic experiences trap them with fear, reliving the experience, or running from the experience. With those experiences, learning is not a priority for these students and they often have a fear of learning. Wright (2014) mentioned how learning requires the ability to produce work, engage within the learning, have a sense of trust, and be able to organize and comprehend. When a student experiences an adverse childhood experience, this student lags with these skills. Students often cannot understand the cause and effect relationships of their trauma, the ability to make predictions for their future, and the ability to meet expectations within the classroom. The stress response of these students truly takes over for the student and becomes their normal modes of functioning (Wright, 2014). When their brains are in that survival mode, the student views the classroom environment as threatening, which in return makes the student viewed as less engaged and not ready to learn in school.

Trauma Exposure and Behavioral Well-Being

Connell et al. (2018) discovered that when youth are exposed to trauma, they have a greater chance of developing a psychiatric disorder than a youth not exposed to trauma. The more trauma a student is exposed to can be correlated with behavioral health and academic functioning (Connell et al., 2018). Connell et al. (2018) gathered qualitative research into two different areas. The first was to gather reports of different and accurate experiences. The next was to identify the damages of a child functioning when they have potential traumatic experience (PTE).

The sample for this study included 701 children ages 7-17 who were attending a children's outpatient behavioral health clinic. Within these 701 youths, 436 were females and 265 were males. Youths were all from various ethnic backgrounds, as well as home demographics. Some resided with both parents, some with only mother, some with only father, as well as some living in foster care, adoptive homes, or other settings. Income was also a factor within this study, mainly those within low-income households were subjects within this study (Connell et al., 2018). From 2012 to 2014, trained trauma-focused cognitive behavioral therapists worked with the youth and their caregivers to measure data. The following topics were investigated with the use of a Trauma History Screen (THS): lifetime trauma exposure, Post Traumatic Stress Disorder (PTSD) symptom severity, depression symptoms, and problem severity and daily functioning (Connell et al., 2018). Based on the results of this study, youths "experienced multiple potential traumatic exposures and exhibited poorer behavioral health as

exposure increased, based on both youth and caregiver report” (Connell et al., 2018, p.525). The results from the study demonstrated a need for clinicians to explain to the child’s caregiver, the school/treatment center, and the youth of the trauma exposure and the trauma related symptoms to truly be involved and aware of the treatment process.

Social Impacts of Trauma

Steenkamp et al. (2023) noticed that few studies are associated with childhood trauma and the aspects of social relationships. The researchers hypothesized that childhood trauma would have negative social perceptions, low social interactions, and avoidance behaviors. From the researchers' study, the findings were that social motivation was low, there were desires for social avoidance, and many participants in the study displayed a low sense of belonging. These findings were mainly linked to those who experienced emotional trauma rather than physical or sexual trauma (Steenkamp et al., 2023).

According to the study conducted by Pawlo et al. (2019), it was determined that those with adverse childhood experiences have deteriorated social skills, such as shutting down, not having relationship boundaries or becoming too dependent on others, or even being defiant. When social interactions take place, those with adverse experiences send the brain's system into the fight, flight, or freeze crisis response. Hilarski (2004) mentioned that these crises or stress responses of fight, flight, or freeze can be perceived as the antisocial behaviors of the student, including the lack of empathy, activating out, resistance, or even being impulsive or showing bouts of anger. When schools promote social and emotional learning, it helps create a culture

that allows for students to begin to regulate their bodies without resorting to those crisis responses, build relationships, and build a sense of trust within the schools and the staff, students, and other personnel within the school (Pawlo et al., 2019).

Trauma and Triggers: Students' Perspectives on Enhancing the Classroom Experiences

Day et al. (2017) examined how a history of trauma might impact how students engage or disengage in the school setting. They conducted a qualitative study examining 45 female students who were placed in out-of-home care at a residential treatment center. In this treatment center, these students had backgrounds of trauma exposure and these histories impacted their abilities of functioning and development trajectory (Day et al., 2017). According to Day et al., (2017) trauma can come from multiple different adverse events, such as physical, emotional, or sexual abuse, neglect, exposure to violence in the community or at home, or events of natural disasters. The earlier the traumatic event, the higher probability of future difficulties in areas of mental health, aggressive behaviors, or even low education attainment without the proper intervention and support. This study had a research question of what are the impacts that trigger both school engagement and disengagement for the youth enrolled or previously enrolled in a residential facility (RT), as well as how these students look at the RT staff or teacher respond to the behaviors that are displaced within the academic settings (Day et al., 2017).

The females who were examined in the study were either currently enrolled (86%) or previously enrolled (14%) in the treatment center. This study took place between September of 2013 and June of 2014, and students ranged in age from 13 to 19 years of age. In order to

conduct the qualitative study, six focus groups were created at the school building and were conducted by individual researchers. When in focus groups, each individual claim or concern was documented in order to find the common themes of experience. Students were asked the following five different opened-ended questions:

(1) If your mood changes throughout the day, what makes it change? (2) When I am having a bad moment at school, what helps is . . . ; (3) When I am having a bad moment at school, what makes it worse is . . . ; (4) How do your teachers and the school staff react to you when you are having a bad moment at school? and (5) If you were principal for a day, what advice would you give to teachers to work with students like yourself? (Day et al., 2017, p. 230)

After collecting data on these open-ended questions in focus groups over multiple months, the researchers identified seven themes. The first was classroom dynamics such as different dynamics that impede learning progress: boredom, not being challenged, or not getting questions answered. The next theme was family issues external to the school environment that affect learning, such as family learning environments and personal family issues. The third theme was interpersonal behaviors and challenges, such as peer conflicts or avoidance. Theme four was recommendations for improving school climate, such as the access to activities, access to traditions, and tutoring. Theme five was peer dynamics, such as gossip, disrespect, or the want for friends and positive relationships. Theme six was the dynamics involving RT care staff, such as overly restrictive rules or how the RT staff have provided help in treatment. The last theme

was dynamics with school faculty and other school staff, such as the act of staff removing disruptive students, or how teacher turnover impacts learning. From these seven themes, the researchers discussed how the students within the RT setting might not have the skills in the area of socioemotional to be successful within the classroom.

It is also noted by Day et al. (2017) that there was ongoing training about adverse childhood experiences, how trauma impacts development within the brain, and how children function behaviorally and academically. It is important to be culturally sensitive when it comes to trauma and how to best address and support the student based on their traumatic experiences and their current development.

Trauma and Special Education Students

Yoon (2019) examined the trauma narratives of inclusion, race, and disability in a specific school community. Within Yoon's qualitative research, she discovered that "an abundance of school districts label traumatized students with [emotional behavioral disorders] EBDs and segregate them in separate institutions and classrooms" (p.421) and that this "dislabeling [can be] because they have disciplinary aims that limit the scope of what constitutes normal behavior and expression of emotion for traumatized children" (p.421). Yoon's main argument for this study was that inclusion falls back onto the school and their structure, the beliefs and methods of the teacher, interaction with the student and their families, and looking at the aspects of the student in relation to the student's trauma and identity (Yoon, 2019). These

narratives first looked at the individual, then the trauma and that may return in a given state, and that this history may not be erased for the individual (Yoon, 2019).

It is valuable to evaluate the personhood component of disabled pupils who are, especially, people of color, have questions of sexuality, or are living in poverty. When individuals with disabilities, specifically those with emotional behavioral disorders (EBD), experience trauma through either themselves or passed down “epigenetically and through socialization” (Yoon, 2019, p. 426), their school experience can be impacted. Yoon explained how when a student with Emotional Behavioral Disorders (EBD) is stereotyped, it can contribute to their trauma and “haunted” narratives. When inclusion was less likely to occur in schools, EBD students, especially those of color were viewed as unessential to the classroom, would have a dangerous future (end up in jail), or be mindless or lazy. It is valuable for educators when interacting with students to acknowledge their trauma and student narratives and change their language to say things like ‘you are a great member of our classroom’, ‘you belong here’, or ‘you are being a great friend and classmate’. Yoon’s (2019) conclusion through evaluating these narratives at this school is to value the importance of understanding a student's haunted trauma narratives and the importance of inclusion.

Emotional Behavioral Disorders

Offerman et al. (2022) mentioned that students who have had adverse childhood experiences are at a greater risk of developing emotional and behavioral issues. Specifically, adverse childhood experiences are currently already impacting those with emotional behavioral

disorders. Whitlow et al. (2019) looked into how female students are less likely to be identified with emotional behavioral disorders (EBD) than male students. Usually, female students are mislabeled and their behaviors are often dismissed. It is often that the qualitative research done only shows inclusive practices of males with EBD in general education classrooms, while in most female EBD studies it is often in the juvenile justice system instead of with general education peers. The research Whitlow et al. (2019) evaluated provided insight into the inclusion of females with EBD.

The study performed by Whitlow et al. (2019) was a qualitative study to focus on the inclusion of females with emotional behavioral disorders. The females had an Individualized Education Program (IEP) with a functional behavioral assessment (FBA) at the middle school age level. The sample consisted of three female students, three parents, and three teacher participants. Paraprofessionals who worked with the female students also contributed with additional information for data collection. The first student was Rachel (age 16), who attended 85% of her day within the general education classroom. Rachel was an adopted student and has had behaviors from a young age that included tantrums and rages (Whitlow et al., 2019). Chelsie (15) was another student involved in the study. Chelsie spent 58% of her day within the general education classroom (Whitlow et al., 2019). Chelsie has received support for emotional and behavioral behaviors noted since birth and has received special education services since Kindergarten. Elizabeth (age 12) was the final student involved within the study. She spent 93% of her day in the general education classroom. She struggled with work refusal and frustration

tolerance and was argumentative (Whitlow et al., 2019). Data was collected during interviews that lasted anywhere from an hour to an hour and a half. Interviews were held with the three females, their parent/guardian, and their teacher, and with some of the participants, their paraprofessional. Researchers also conducted observations of the student in the general education classroom. File reviews, such as looking at their IEPs, FBAs, behavior intervention plans (BIPs), and other school records of the students were also conducted (Whitlow et al., 2019).

The interviews had multiple patterns found: trauma/childhood impact, struggles with friendship, identifying boundaries, connection with an adult at school, and special education services. Throughout the interviews with each student and their families, trauma was prevalent for all the females. All three females had struggled with relationships with their biological mothers and each female had biological fathers who were absent from their lives. All three females also struggled with inclusion and friendships. Each had conflicts with peers or reported being bullied or having issues with boundaries. All of these students were able to identify at least one adult at school who they felt close to and able to connect with. With special education services, all wanted to be in the general education classroom, but had concerns with the lack of engagement or support from those teachers and had fears of them not receiving enough support (Whitlow et al., 2019).

As noted by Whitlow et al., “The psychological issues that surround the girls’ early childhood and in some cases dysfunctional families continue to play out in the general education” (Whitlow et. al, 2019, p.52). When staff and support staff truly collaborate, the

inclusion practices can benefit a student who has had these adverse childhood experiences, whether identified with emotional behavioral disorder or just having struggles with social, emotional, and behavioral development due to an adverse childhood experience.

Trauma Informed

Champine et al. (2021) discussed how common traumatic experiences truly are. More than two thirds of students report having experienced a traumatic event by the age of 16. Although these experiences cannot be erased or cease to exist, the support and services that come after can be implemented. Implementing trauma informed practices can help eliminate the process of retraumatization. Being trauma-informed focuses on “safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment, voice, and choice; and addresses cultural, historical, and gender issues” (Champine et al., 2021, p. 460).

Champine et al. conducted this study to supply more research with trauma-informed practices. The researchers researched a community for a three years initiative and studied whether the Posttown, Pennsylvania community could look into trauma, traumatic symptoms, and prevent further trauma and foster growth. Through this qualitative study, it was determined that looking into experiences within the community allows for more receptive thoughts about being trauma-informed. Results by the researchers determined that “being ‘trauma-informed’ meant reframing one’s perspective, becoming more self-reflective, and acquiring skills to respond more effectively to those who have experienced trauma” (Champine et al., 2021, p. 468). This provides a sense of hope for the future when trauma-informed practices are implemented

within communities and schools. This can benefit a child's developmental change, providing a supportive environment, and fostering positive relationships (Champine et al., 2021).

Ernest et al. (2022) mentioned that teachers are just as responsible for a student's social-emotional development as educators are for their academic development. This could be adding trauma-informed practices and instruction within classroom and teaching opportunities. Finding ways to incorporate lessons or stories into already implemented curriculum can enhance a student's experience and allow them to have those relatable experiences in academics. Ernest et al. (2022) also emphasized the importance of incorporating community to school collaborations in order to support a student who has those traumatic experiences. A school's social worker can be a resource for students, families, and connections with the community. This can help look at the explicit needs of the student and find collaborations that are tailored to the specific needs of the student.

Culture of Safety

Souers and Hall (2020) emphasized the impact that trauma can have on one's health and well-being. Reactions to trauma and the stress it brings is truly different for everyone. Trauma can impact anyone and can be a wide variety of events, which can bring unpredictability, feelings of being unsafe, or even scary situations. These situations will often send the brain to fight, flight, or freeze the situation. When those safety-seeking behaviors arise at school, learning cannot take place (Souers & Hall, 2020).

Since trauma cannot be ceased, creating a safe environment for students and staff to fall back on is important to truly learn within. Implementing the culture of safety (safety, predictability, and consistency) are all factors that contribute to the environment being successful for students and staff. Safety can be creating relationships, establishing baseline expectations for the building (i.e bully free zone), providing routines and rituals, or having clear communication (Souers & Hall, 2020). Predictability demonstrates that things will not be out of the norm for students. Once students know their routine they can know what their days will look like, what to expect when they come to school, and how things will run. Predictability includes having clear communication plans, being proactive, and eliminating the unknown. The last step to create a culture of safety is to be consistent. Having staff agree to practices, support and implement expectations, and using common language are all important aspects of being consistent. By creating this culture of safety, it allows for dysregulation for staff and students to be decreased (Souers & Hall, 2020).

Raufelder et al. (2021) evaluated how internally, humans have the desire to belong. Students spend so much time in school, so having the relationship with peers and teachers is vital to have that sense of belonging to benefit their academics and health. When a student does not have that sense of belonging, their academics and well-being are negatively affected (Raufelder et al., 2021). The study conducted by Raufelder et al. (2021) evaluated how the feelings of social belonging and exclusion in adolescence impact the students brain development. Based on the results of their study, it showed that social exclusion affects the structural development of

students. This is beneficial for staff to know that if a student does not feel safe or that they belong can impact the students development.

Supportive Environments

Cummings et al. (2017) evaluated the traumatic experiences students faced, the emotional and behavioral well-being of these students, and ways to support these students in the classroom setting. It was found in the study that the school environment, specifically the classroom, might be the only safe space that a child experiences throughout their day (Cummings et al., 2017). With that being said, it is important to keep interactions with the student positive, respectful, and show the students love. Educators do not always know the home environment for students. Showing them the love they deserve within the classroom can promote a sense of belonging and safety and help minimize “potential triggers of trauma in the classroom setting” (Cummings et al., 2017, p. 2738). This further leads to the ability to create a sense of trust for these victimized students to foster a sense of safety in order to learn.

Cummings et al. also discovered the importance of the social environment within the school classroom. This relates to the student picking up on the demeanor of adults and interaction with other students as well. It is important for educators to be aware of touches and physical contact that occur with students as well, as they too can be triggers. It is also important to look deeper into the physical and sensory aspects of the environment. Things like darkness, loud noises, chaotic/unstructured times, and lots of movement can be triggering to these students (Cummings et al., 2017). This can be even looking into the consistency and predictability of the

classroom and the teacher for the student and being aware of the changes, whether that being an assembly coming up, a new schedule, or just being made aware of any changes that are occurring soon.

Students of trauma can be some of the most vulnerable students. When asking a vulnerable student to learn, they need to feel safe and calm. Students with adverse childhood experiences need to know that they have the support of the teacher, a sense of belonging, and safety. It can come down to how educators develop the relationship with students, but also how the physical environment is presented within the classroom.

According to Ervin (2022), the five strategies in creating this classroom environment are: student centered and effective ways to create rules, explicitly teaching routines for building relationships and sharing control, strategic noticing to reinforce positive behaviors, consequences, and more time to plan engaging lessons. The first strategy of student centered and effective ways to create rules in creating a calm and safe environment involves working as a class team to create rules and make the rules more student-centered, rather than having rules only laid out day one by the teacher. The second strategy is explicitly teaching routines for building relationships and sharing control, noting that “every single moment of the school day can take place in accordance with specific procedures designed to make sure students are the ones managing their classrooms and that teachers are building relationships and giving students ownership of their rooms” (Ervin, 2022, p. 4). The third strategy is strategic noticing to reinforce positive behaviors, which are implemented by reinforcing the positive through phrases like ‘I

notice...' instead of saying things like 'this work is great' (Ervin, 2022). Consequences is the fourth strategy in creating a calm and safe environment. This includes creating a consequence that teaches positive behaviors instead of more negative behaviors. The final strategy is for teachers to spend more time planning engaging lessons, which includes lessons that are engaging, relatable, and delivered to students in a meaningful way (Ervin, 2022).

Between these five strategies, Ervin (2022) explained, it can help develop relationships, create positive behaviors, and share control with students with adverse childhood experiences. This can help allow the students who are vulnerable to start to have that sense of safety and develop relationships where learning is able to take place.

Trauma Informed Strategies

Imad (2022) emphasized the importance of trauma-informed instruction and its ability to bring equity into the classroom. When one experiences trauma, they lack that sense of safety, well-being, the ability to regulate the stress response, and it impacts their ability to learn and engage within school. When a trauma-informed education is in place, the safety of the environment is promoted to enhance connectedness and relationships within the educational setting. Imad emphasized the importance of being trauma sensitive in schools is allowing students to have the space where they can truly engage and feel safe within their learning. It allows students to feel empowered and when they are challenged academically they are able to accept those challenges and not have performance failure. Being trauma informed within schools looks at the student on an individual and personal level, while showing students that educators

are on their side and are there to support them. It allows students to feel the validation of their struggles and of them as an individual (Imad, 2022).

Imad's (2022) framework for trauma-informed practices is divided into four parts. The first is safety and safe learning environments. Imad mentioned the importance of building the relationship with students and to build that trust between teacher and student. Building the relationship can look like building the connection, finding common interests, and spending that one on one time with them when time allows. The second is empowering students. It is important to have students use their voices, while also providing them with choices (Imad, 2022,) and to remind them of their unique experiences to help enhance their learning opportunities. The third section of Imad's framework is classroom community. Allowing students to work with others, create, and express their knowledge helps them bring their experiences to their learning environment, while also building the connection socially with peers in the classroom. It will be beneficial for students to have the opportunity to have a voice in creating the environment with community agreements and rules. The last section of the framework is to construct meaning. It is important to emphasize to students that the experience they have lived through truly helps them make sense of their relationships, while also understanding and processing their life events.

Childhood trauma impacts the brain's development, cognitive functioning, and academic performance. Rahimi et al. (2021) emphasized the importance educators need to evaluate the ways trauma looks and the way behaviors associated with trauma look in order to plan instruction and an environment that is appropriate with those who have experienced adverse

childhood experiences with a trauma informed practice model. It is important for educators to know the wide variety of experiences that trauma can be as well as the different ways trauma can look for students. Some might be internalizers, such as showing withdrawn behaviors, sulking, or putting head down, with traumatic backgrounds, while some students might be externalizers, such as showing destruction of property, yelling, or displaying big behaviors. As an educator, it is important for them to know how to handle those trauma reactions, as well as the behaviors that may arise. When it comes to trauma-informed practice, it can be helpful for educators to have a background in a de-escalation process, promotion of mindfulness, social-emotional learning, self-care, or regulation.

According to Venet (2017), trauma-informed practice creates a safe environment that is going to allow the students to have a sense of safety and support no matter what their history may look like. Venet mentioned the importance of what an educator's role looks like in a student's life. Role clarity, according to Venet, “is the process of defining the scope and goals of our relationships with students, and then maintaining boundaries that allow us to focus on that scope” (Venet, 2017, p. 1). This is especially important when it comes to the mental wellness of a student. With the trauma-informed approach, it is important to be the connector. Students of trauma need the support to connect with peers, role models, family members, and mental health supports. An educator means so much more than teaching academics, but teachers also supply these students with knowledge on boundaries, social-emotional supports, and teach them about different services and supports to help them foster growth. According to Gorski (2020), one

example of being trauma informed is conducting a response that makes sure students and staff feel safe, judgment is limited, and that the concern of the situation is validated. This interaction will be important for students to know that they are feeling valued, not judged with words or facial expressions, and can still have a sense of belonging and safety after the interaction with the staff member.

Trauma Informed Practice-Ecological Approach

Being trauma informed can benefit a student who has experienced adverse childhood experiences. Trauma can impact a student's development and learning, so it is beneficial for educators to be trauma informed within the classroom. Crosby (2017) evaluated a trauma-informed practice of an ecological approach. Within this evaluation, Crosby first addressed the impact that trauma plays on school and school experiences, as well as identifying who is at risk of trauma and what trauma looks like. The guiding question is as follows: how can the school play a role in improving the educational outcomes for traumatized students, specifically with the implementation of the ecological approach of trauma informed practices? (Crosby, 2017).

Crosby (2017) conducted a qualitative study that examined a literature review of the different implementations of ecological approaches to trauma informed instruction, such as microsystem practices, mesosystem practices, exosystem practices, and macrosystem practices. Since school represents one of the environments that students interact with, it is important to evaluate the entire ecological settings of students to grasp and be trauma-informed and

supportive within. Staff interactions with students in the school environment can impact the other systems of students' lives. The ecological approach emphasizes that addressing small issues as being trauma sensitive with students can have a positive impact on the interactions (Crosby, 2017). School being an ecological setting for a student truly shows the value of safety and security school needs in order for students to feel comfortable within their environment in order to succeed socially, emotionally, and academically within the school environment.

Trauma-Informed Care to Special Education Students

Chudzik et al. (2022) recognized the rise of traumatic events for children at young ages. With that, the researchers believed that implementing a trauma-informed approach as young as early childhood within special education programs to be appropriate. Teachers play an important role in creating the environment that allows students with trauma to have better outcomes and opportunities (Chudzik et al., 2022). This environment that is trauma informed will allow for students to have a sense of safety, control, and have the ability for learning to take place for a child with trauma. Chudzik et al.'s research was to evaluate the teacher's attitudes and experience with trauma at the early childhood level, specifically in the special education level. A lot of the educators interviewed understood aspects of behaviors noted were children's form of communication and clarified what the child is going through (Chudzik et al., 2022). The teachers at this age level recognized the need for trauma-informed care in order to support and foster the appropriate development of these special education students.

Addressing trauma can create an environment where learning is more secure for children. Maddox et al. (2022) evaluated this environment being especially important for those who receive special education services. Those with adverse childhood experiences can impact the development, social skills, cognition, and self-control, which might even be lagging skills for these students. It is important for special education teachers to be trauma-informed in order to help students address both internal and external behaviors that are displayed (Maddox et al., 2022). According to Maddox et al. there are multiple different ways to support those with trauma and receiving special education services. This could be having common and universal language throughout the school to help a child process. Keep language and support consistent with the student between all adults and staff within the school. Maddox et al. also examined the use of trauma teams. This evaluates the students needs, providing care, and having collaboration for all members of the students team. Looking at the needs of the students, creating a supportive team, and creating a common language might allow for students to feel safe within the school environment.

When it comes to being trauma-informed with special education students, there are multiple things to consider from an educator's perspective. It is important to create a positive environment, allowing students with adverse childhood experiences to feel safe, comfortable, and have the ability to learn socially, academically, and emotionally. It will also be beneficial to use common language for staff to discuss with students who receive special education services with trauma history in order to support them during times of crisis when the brains of the student

are in fight, flight, or freeze situations. Educators who are trauma informed can guide instruction, provide support, and implement interventions and Individualized Education Plans to help students with these traumatic adverse childhood experiences. Students who have experienced trauma are more likely to lack a sense of belonging and safety, which further impacts their ability to engage and learn (Imad, 2022).

It is valuable for educators to be informed about trauma-informed practices in order to support both general education students and special education students through their traumatic stress so they are able to feel safe, engaged, and able to close the achievement gap between students with and without adverse childhood experiences.

CHAPTER III: CONCLUSION

Summary of Literature

The literature reviewed in chapter two discusses what adverse childhood experiences are, what trauma looks like, how trauma impacts development and learning, and lastly how educators can implement a trauma-informed lens to education. Special education is also discussed within this literature review with how trauma impacts these students and ways educators can support them through a trauma-informed lens.

Adverse childhood experiences can be things that impact one's quality of life, which have a greater impact of developing anxiety-like symptoms (Davies et al., 2021). Trauma symptoms can truly look different for every victim. It can impact their emotional well-being, functioning, development, and psychological functioning. Trauma can impact one's ability to learn, develop socially with others, and result in other poor health outcomes, such as substance use.

Development of the brain and body are also discussed in the literature review. Development of these areas can be impacted by adverse childhood experiences. It can impact the self-identity, cognition, and areas of behavior (internal or external). It can impact the ability to memorize, concentrate, and components of language.

Learning is also impacted by histories of traumatic experiences of students. Students with traumatic experiences might appear disengaged, not ready for the academics, or school

might be the least of their priorities. The basic needs of the students are not being met, therefore learning and having the safety to learn is not a priority for the student. Building the relationship between staff, creating the environment, and creating relationships between peers can help foster a growth for learning to take place. A student must feel safe in order for any learning to take place.

Special education students are also students who might experience trauma. According to Yoon (2019), students who have experienced trauma are more likely to be labeled with Emotional Behavioral Disorders (EBD). These students have behaviors and emotions similar to those of traumatized students. Students with an Individualized Education Plan, especially those with external behaviors, can spend a lot of time away from general education peers, which can further impact their ability to build connections and have that sense of belonging.

Lastly, the literature review focuses on education bringing trauma-informed practices into classrooms. This process can help with eliminating retraumatization specifically within the school setting or bringing up triggers that might appear. Being trauma-informed brings in a sense of trust, safety, and predictability. Creating a sense of belonging and safety allows the student to have opportunities to learn, feel comfortable, and eliminate the crisis response at school.

Professional Application

It will be very valuable for educators to be aware of the various signs that a student might have a traumatic or adverse childhood experience. It will be beneficial for educators and

school staff to be aware of what the signs of trauma are for students. This could be signs such as different behaviors, such as withdrawn, anxiety-like symptoms, or external behaviors. It will also be beneficial for educators to know what can result for students with trauma histories if they do not receive support, guidance, or help with different things they might be battling.

Knowing these symptoms of trauma and knowing how to support them, it is also beneficial for educators to prepare the classroom that can promote a supportive environment. This could be setting up expectations and rules from day one, have the students help create a positive environment, and have educators attend staff development on creating an environment that allows students to feel safe and comfortable for learning to take place.

Trauma-informed implementation within schools can greatly benefit students who have or have not had adverse childhood experiences. Trauma-informed implementation can come from a district level to a teacher's own personal research in order to respond appropriately to students with this history. It is important to know the demographics of students within the school, past experiences, and finding connections within the school to help benefit families and promote a healthy school to home relationship, such as using the school social worker as a resource. It is critical for those to be trauma-informed in the classroom regardless of the student or simply because triggers may arise based on certain language, environmental set up, or relationships building within the classroom.

After a district or teacher has researched and started to become aware of trauma, it will be beneficial to attend professional developments to be effective in being trauma aware within the classroom and how to enhance or set up the classroom environment to be at its full

potential. This allows for students to feel safe, engage with their peers and be safe, and for learning to begin to happen. Having trained trauma aware teachers can be beneficial for schools to have a common language to support students, build that consistency within the school, and place predictability within the school.

Limitations of the Research

Within this literature review, limitations of research involved the broadness of age level and traumatic experiences. This literature review showed how so many different experiences can be defined as trauma. It also showed trauma at a wide variety of ages, different institutions, or different approaches to being trauma-informed. Some literature that was reviewed looked at early childhood education settings, college level, grade level, or even treatment centers. This displayed the broadness of this research and does not narrow down the specific age, traumatic experience, or specific developmental period.

Another limitation that was noted within this literature review was the limitation of research involving ways to evaluate the students who receive special education services and if their trauma impacts them developmentally and behaviorally. There was not much research on if students with emotional behavioral disorders qualified for special education services based on their trauma history or because they have a discrepancy within areas of emotional and behavioral development.

Implications for Future Research

There is detailed research on adverse childhood experiences, but limited amounts of research with the aspects of all trauma histories and a need for specialized special education

services. Traumatized students show similar patterns of behaviors and emotions as those with emotional behavioral disorders (Yoon, 2019). These behaviors or emotions can be internalized, cause aggression, and truly impede on optimal learning for students or students that surround them within the classroom. Future research is needed to better understand if students with trauma backgrounds need special education services under the category of emotional behavioral disorders.

Additionally, future research in the area might demonstrate that traumatized students could be able to meet criteria for emotional behavior disorders, but do they show a need for special education services? Or do these students with adverse childhood experiences need different support and resources such as behavior groups run by counselors or school social workers instead of having a need for special education services for all traumatized students? Further research is needed to see how environmental changes, relationships, and tier 3 groups in the multi-tiered systems of support model can benefit or support the students in a positive way or whether the trauma support shows a need for special education services.

Conclusion

What impact does trauma have on the learning and development of students, particularly students who receive special education services? When looking at trauma and adverse childhood experiences as any experience that causes an emotional response and might leave a lasting impact that can further impact development and learning in students, it is important to look at how to evaluate the best way to support these students. These students can struggle socially, academically, behaviorally, emotionally, and developmentally due to the traumatic experiences.

It is important to evaluate what the best ways are to support these students through being trauma aware within the education system.

Being trauma aware, such as building the relationship with students, fostering student to student connections, and providing an environment that is predictable and safe allows the students to build trust and then learning can begin to happen. By fostering a trauma-informed classroom educators “remind [students] that when they come to classes, they bring with them a wealth of experiences which enhance the learning experience of everyone” (Imad, 2022, p. 43). Without implementing these strategies, students will receive negative connotations attached to them, such as being seen as lazy or defiant, which does not foster the environment for a student to feel safe for academic success to begin to happen. When teachers are trauma informed, it allows for the growth of students and the safety to overtake the vulnerability of these students. It can start with one teacher to change the ways traumatized students view school and can make a lasting impact on their safety, success, and self-images.

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