

EXAMINING THE PROCESS OF HOW ONE TEACHER TEAM ENACTED TRAUMA-
INFORMED CARE IN AN ALTERNATIVE SCHOOL: A PRACTITIONER INQUIRY

By

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To my husband, Steve, and my son, Nathanael

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Abstract of the Dissertation Presented to the Graduate School
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Major: Curriculum and Instruction

Students in disciplinary alternative education programs face a disproportionate number of challenges in comparison to their peers in traditional schools. Research shows that students in alternative education have experienced higher levels of trauma than those in traditional schools. The types of behavior that lead to student expulsion and placement in alternative education may be due to the effects of trauma. Therefore, teachers should be aware of these effects and how educators should respond.

In this study, I used practitioner inquiry to explore how a team of teachers including myself responded to professional development about trauma and its effects on students. Four teachers, including myself, participated in three professional development sessions followed by discussions on how to implement an action plan in our context. I studied the development of our thinking and action through two sets of interviews with each participant, personal journals, and artifacts from our discussions.

After I coded and analyzed the data, three major themes emerged that marked our journey through professional development. First, I found that before professional development we believed in the importance of supportive relationships with students but had difficulty enacting

them. Second, I found that throughout the professional development we began to develop new mindsets about student-teacher relationships but we faced challenges individually, interpersonally, and institutionally. Finally, after having discussions as a team, we created an action plan with strategies to address most of these challenges. I discuss the specific strategies teachers planned to enact and how these plans helped teachers address their new learning regarding the effects of trauma and the impacts of student-teacher relationships. I also examine any remaining tensions at the end of the study.

CHAPTER 1 INTRODUCTION AND LITERATURE REVIEW

Every year across the United States, students attend disciplinary alternative high schools after being pushed out of their home school for violating their school's behavioral norms. Students who attend these schools face a disproportionate amount of obstacles compared to their peers. According to national and state level data, a higher percentage of students in disciplinary alternative schools experience poverty than those in traditional schools (Dycus, 2009; Hemmer, 2011). Moreover, these students are more likely to drop out of school completely and are more likely to be involved in the criminal justice system at some point in their lives than students who have never been expelled (Dycus, 2009; Hemmer, 2011). Students who attend disciplinary alternative schools also have a greater likelihood of having experienced abuse and/or neglect, living in dangerous neighborhoods, having substance abuse issues, and being transient (Hemmer, 2011). Researchers have correlated such traumatic events to behaviors that may cause students to be excluded from school. Young adults who have experienced trauma are more likely to disengage from school, experience behavior problems, perpetrate violence on themselves and others, have mental health issues, abuse drugs and alcohol, and drop out of high school (Bethell, Newacheck, Hawes, & Halfon, 2014; Dube et al., 2003; Duke, Pettingell, McMorris, & Borowsky, 2010; Porche, Fortuna, Lin, & Alegria, 2011; Schilling, Aseltine, & Gore, 2007).

Students who have experienced trauma and have exhibited behaviors that have caused them to be pushed out of school have the potential to be further marginalized in an alternative school. In comparison with traditional high schools, disciplinary alternative schools have fewer resources, fewer qualified teachers, and lower quality curricula (Hemmer, 2011; Kim & Taylor, 2008). In addition to experiencing inequitable institutional practices, students in alternative schools may have teachers who expect less of them, viewing students as deficient academically

or behaviorally (Hemmer, 2011; Kennedy & Soutullo, in press). When considering the challenges facing students in disciplinary alternative schools, it is important to recognize the potential for deficit thinking. According to Valencia (2010), deficit thinking places the blame on the student, his family, or his “culture” for educational failure. In contrast to deficit thinking, teachers should focus on the roles of the school as an institution, and themselves as its agents, by examining their own inequitable practices, building upon student strengths, and helping students overcome their challenges.

One approach that has gained momentum recently in working with individuals who have faced adverse life experiences is trauma-informed care. In the school environment, trauma-informed care means that educators seek to create a safe environment in the school, provide supportive student-teacher relationships, and implement a comprehensive system of care for students including counseling and community resources to address various needs (Cole et al., 2005). While trauma may be related to numerous risk factors for students, using trauma-informed practices to build resilience in students and to provide a supportive adult figure has been shown to mitigate these effects (O’Neill, Guenette, & Kitchenham, 2010).

When implementing a program such as trauma-informed care, teachers should be careful not to use the program to perpetuate deficit thinking about students. While traumatic events have been shown to have adverse effects in students’ lives, teachers should take care to look at the societal factors that propagate and intensify traumatic events. Moreover, teachers should focus on the strengths of students, including their abilities to be resilient and overcome trauma. Teachers also need to examine their own beliefs and assumptions about students and their behaviors. Most importantly, teachers should build supportive relationships with students.

Purpose of the Study and Research Questions

The purpose of this study was to understand how teachers on one teaching team, including myself, in a disciplinary alternative school in upstate South Carolina understood and applied trauma-informed care as individuals and as a group. I used practitioner inquiry to investigate how my team and I worked together to translate trauma-informed practices into our context. I partnered with my administrators and our district behavioral specialist to plan professional development (PD) sessions about trauma-informed care. To study our process of learning, I interviewed the other teachers on my team about their thoughts before and after the PD sessions and recorded our discussions during the sessions. At the same time I tracked my own thoughts through journaling. To find out how we understood and applied trauma-informed practices in our context, I asked the following research questions:

1. How do teachers at a disciplinary alternative school characterize their relationships with students in their classroom?
 - a) How do teachers at a disciplinary alternative school describe the importance of these relationships for themselves and for students?
2. How do teachers at a disciplinary alternative school develop an understanding of trauma and their responses to trauma while participating in PD?
 - a) How does engaging in PD on trauma further develop the teachers' thinking about their relationships with students?
3. How do teachers at a disciplinary alternative school use the new knowledge gained from PD?

Significance of Study

This study was relevant to our school context, and potentially to other contexts, because it explored how teachers' perceptions changed throughout a series of PD. While studies about alternative education have explored students' thoughts and feelings in alternative education (Kennedy-Lewis, 2012; Kim & Taylor, 2008; Lagana-Riordan et al., 2011; Morrissette, 2011) and teachers' enactments of equity and high quality practices (Dycus, 2009; Hemmer, 2011; Kim

& Taylor, 2008), few studies have examined how teachers at alternative schools work together to implement practices such as trauma-informed care that have the potential to improve outcomes for students. Since I used practitioner inquiry, findings from this study informed policies and practices in my classroom, school, and district. However, policy-makers and administrators in other schools and districts may also be able to apply my insights about the complexity of making change within a team of teachers.

In my own practice, this study was significant because I had spent most of my career working with students who had been marginalized. In this study, marginalized students are those who have been pushed to the margins of the school institution due to race, class, or sexual orientation. These same students have been disciplined and pushed out of school because of behavior due to underlying trauma or who may be misunderstood due to teachers' and administrators' deficit thinking. These students, therefore, have been denied their educational rights and in many cases have been forced to attend schools that are less academically rigorous, placing them further behind. At the time of this study, I had worked for eight years at alternative schools both with students who had been expelled and those who had been deemed at risk of dropping out of school. While we had never conducted a school-wide study about the trauma my students had experienced, I talked with many students who had faced trauma such as losing parents to death or incarceration, personally witnessing gun violence or murder, experiencing sexual, physical, and emotional abuse, being victims of trafficking and child prostitution, and being affected by parental substance abuse and neglect. I witnessed the effects of trauma on students both in their personal lives and in the classroom. Out of the fifty students enrolled at my school in the 2016-2017 school year, at least six had attempted suicide in the past two years, six had been in treatment for drug abuse, and at least three had violent altercations with family

members leading to incarceration in juvenile detention facilities. Conducting this study helped me understand my own students and their behaviors and know how I, as a teacher, could adjust my practices in the classroom to become more trauma-informed and less deficit-oriented.

For my school, this study was significant because of the population of our students and the programs our school had begun to implement. My school consisted of three alternative programs, two disciplinary alternatives (middle and high school) and one non-traditional high school. All three programs shared the same administration, and some teachers taught in more than one program. Students in all three of our programs had experienced significant difficulties with the traditional schools either behaviorally or academically, and many students in all programs had experienced trauma. During the 2015-2016 school year, teachers in the high school disciplinary program received training on Adverse Childhood Experiences (ACEs). During the 2016-2017 school year, our middle school disciplinary program became a Positive Behavior Intervention and Supports (PBIS) school, and the following school year, our high school disciplinary program also began implementing PBIS. PBIS is a multi-tiered program that focuses on creating a positive school culture and on intervening with students before they are suspended or expelled. Understanding trauma-informed care and the role student-teacher relationships play in this intervention complemented the direction that we were taking. While I only studied teachers in one of our three programs, I planned to use the information gained in this study to disseminate information to all three programs.

For my district, this study was important because our district had been implementing programs to change how our teachers viewed student misbehavior. In my district, many schools in the past few years became PBIS schools. PBIS is a positive first step toward addressing students' challenging behaviors because it focuses on reinforcing positive behaviors rather than

simply giving punitive consequences. Since PBIS focuses on changing the external behavior of students, it is limited because it does not seek to understand the reasons for those behaviors. Adding a trauma-informed understanding of students in our district was important because it could help us understand and address the source of the perceived behavior problems, including trauma, lack of access to health care, inequitable school practices, and teacher behaviors. Recent doctoral candidates in my district studied the effects of PBIS on student behavior and student resilience. This study added to that knowledge base in our district and provided a better understanding of how teachers, schools, and the district could progress toward a trauma-informed understanding of students.

Since this study was a practitioner inquiry, it focused on change within my local context. However, it provided insight into the process a team of teachers used to interpret a trauma-informed approach and may inform other alternative school educators who want to enact trauma-informed care in their own contexts. Furthermore, this study can inform administrators who would like to understand how teachers work together to translate and adopt new practices. Finally, local and state decision-makers can use this study's findings to understand the importance of using practitioner inquiry to analyze team dynamics within different educational contexts and to address challenges educators face in classrooms and schools.

Relevant Literature

Before examining teachers' perceptions about trauma and its impact on students, it is important to understand how alternative education research, the research on trauma, and research about trauma-informed care inform my study. Before considering this body of research, I frame the literature with Valencia's theory of deficit thinking and Mezirow's theory of transformative learning. Next, I describe teacher and school practices in alternative education. I focus on the practices of successful alternative schools, describing how schools and teachers enact each of

these practices. Then, I examine inequitable practices common in alternative education at the district, school, and classroom levels.

I then examine studies about Adverse Childhood Experiences (ACEs), which has the potential to explain the causes for the types of behavior that generally cause expulsions. The original ACEs study examined the effects of complex trauma on physical, mental, and emotional outcomes in individuals, which inspired a series of research studies about both short- and long-term effects of traumatic events in childhood. I chronicle the major findings of the original studies and then pay special attention to more recent studies that focused on young adults and effects of trauma on school outcomes. Next, I examine recent criticism of the original ACEs study, namely expanding the list of adverse experiences and studying the effects of ACEs with a more diverse group of participants.

After exploring trauma, I examine trauma-informed care, an approach to working with students who have experienced trauma that focuses on the need for teachers to form supportive relationships with students. As a response to the effects of complex trauma, trauma-informed systems seek to mitigate the effects of trauma through changing institutional responses to trauma. I review the Substance Abuse and Mental Health Services Association's (SAMHSA) general guidelines for trauma-informed care, follow up with guidelines for schools from the Trauma and Learning Policy Initiative (TLPI), and present themes from studies done in schools regarding the implementation and effects of trauma-informed care. Then, I use trauma-informed care as a basis to examine student-teacher relationships, one of the major components of trauma-informed care in schools.

Theoretical Framework

Deficit thinking

Before examining trauma-informed care, particularly in disciplinary alternative schools with marginalized student populations, it is important to recognize deficit thinking that can occur in both theory and practice. According to Valencia (2002, 2010), deficit thinking focuses the blame for educational failure on the individual (the parents or the students) rather than societal inequities. According to Valencia and Black (2002), this theory “asserts that poor schooling performance of students of color is rooted in the students’ (alleged) cognitive and motivational deficits, while institutional structures and inequitable schooling arrangements that exclude students from learning are held blameless” (p. 83). Characteristics of deficit thinking include blaming the students or families for their failure, believing that the students’ environments are at fault for their failures, and believing that students lack the ability to do well in school. In contrast, the opposite of deficit thinking, or heterodoxy, challenges these views by pointing to the ways in which society perpetuates deficit thinking (Valencia, 2010).

Several variations of deficit thinking can be found in literature about school failure, particularly school failure for Black and Brown students living in poverty. The cultural deprivation model attempts to blame the poor school performance of Black and Brown students living in poverty on the culture in which students live. Proponents of the “culture of poverty” theory postulate that the value system and attitudes of persons living in poverty produce poor schooling outcomes (Valencia, 2010). Such values attributed to those living in poverty include having dysfunctional families, not valuing education, not being future minded, and not valuing hard work. This model has been criticized for its racist and classist views that tend to generalize and stereotype the poor while not taking into account the social and economic factors that shape school failure.

Another potential for deficit thinking lies in the term “at-risk student.” Promoters of this variation of deficit thinking analyze characteristics of students including their family structure, history of school success, and motivation level in order to predict their risk for school failure. Such a view “overlook[s] any strengths and promise of the student so labeled, while drawing attention to the presumed shortcomings of the individual” (Valencia & Black, 2002, p. 87). Proponents of this view also seek to change the student with different types of compensatory education programs that seek to improve the perceived deficiencies of the students, rather than changing the school system to better support them. Instead of subscribing to deficit thinking, teachers should examine institutional practices within the schools that set students up for failure such as poor teacher quality and inequitable distribution of school funding (Valencia, 2010).

In order to combat deficit thinking, teachers should not blame the students, their parents, or their “culture” for school failure. In addition, student behavior should not be seen as simply the result of a deficiency in the character of the student. While teachers should help students learn social norms including how to respond to authority and interact within society, they also should adopt a strengths-based view of their students. That is, teachers need to recognize students’ strengths yet challenge their own thoughts about the causes of students’ academic failure and challenging behaviors.

In addition to using a strengths-based approach, teachers should learn to recognize and challenge deficit thinking in their practice and in their schools. Gorski (2010) suggests four strategies for teachers to confront deficit thinking. First, teachers should learn to recognize deficit thinking. Three ways of recognizing deficit thinking are looking for stereotyping of individuals and groups of individuals, spotting language about the culture of poverty, and identifying a lack of discussion of social context. Second, teachers should critically reflect on

their socialization, recognizing their own assumptions about their students. Third, teachers must not “locate any problem in the ‘cultures’ of disenfranchised communities” (Gorski, 2010, p. 22), which redirects problems from the society at large to individual families. Finally, teachers should teach about injustice and deficit thinking.

Transformative learning

For adults, changing entrenched patterns of thinking, such as deficit thinking, may prove difficult. To understand how change was possible, I examined Mezirow’s theory of transformative learning in adults. Mezirow (1978) originally based his theory on his work with adult women who had returned to college. In order to transform their own thinking, these women had to become aware of the cultural belief system that had defined their role in society as subservient. These women had unconsciously assimilated this cultural belief system, and through becoming aware of, and critically reflecting upon, these beliefs they were able to challenge their roles in society. The change in the women’s perceptions about their roles led them to take action—in this case, returning to college. In sum, these women transformed their beliefs through awareness of hidden patterns of thinking, critical reflection on those patterns, and an action-producing redefinition of belief systems.

Similar to the women in Mezirow’s (1978) early studies, educators assimilate cultural and societal beliefs unconsciously. Transformative learning presents a theoretical foundation describing how adults evaluate and change their own patterns of thinking. Mezirow (2001) defines transformative learning as “becoming critically aware of one’s own tacit assumptions and expectations and those of others and assessing their relevance for making an interpretation” (p. 4). All individuals have a frame of reference, which Mezirow defines as the assumptions that guide the way individuals think, feel, and react to the world around them. Informing these frames of reference are the cultural or societal beliefs that individuals unconsciously learn.

Adults change their frames of references through critical self-reflection and by engaging in challenging discourse with others. First, critical self-reflection occurs when one becomes aware of the hidden assumptions underlying one's frames of reference. Using this awareness, one can begin to reflect upon "the validity of their assumptions or premises" (Mezirow, 2001, p. 7). Changing frames of references is not simply an individual process; it also involves the interaction of individuals with others who challenge and refine their beliefs. Challenging discourse with others helps individuals "use the experience of others to assess reasons justifying these assumptions, and making an action decision based on the resulting insight" (Mezirow, 2001, p. 8). Critical reflection and challenging discourse are not enough to transform entrenched ways of thinking; action is necessary (Mezirow, 1997). The end goal of transformative learning is for individuals to make decisions and take actions based on a more reflective, critically examined, and inclusive system of beliefs.

Transformation of frames of references in individuals may be the result of a sudden, dramatic event, but more often transformative learning occurs over time as a series of smaller transformations. Changing deficit thinking in teachers, for instance, may take time due to the entrenched nature of deficit thinking in society. Transforming a teacher's frame of reference to challenge deficit thinking requires recognizing the assumptions society makes about marginalized individuals. Teachers should challenge their own assumptions through critical self-reflections and through discourse with others who can help them recognize deficit thinking. Finally, teachers should take action, as Gorski suggested, through teaching other educators and students about deficit thinking.

Alternative Schools

Since the context of this study is a disciplinary alternative high school, it is helpful to understand alternative programs and how teaching practices in alternative education differ from

traditional high schools. First, I describe broad categories of alternative education highlighting the goals of each type. Next, I synthesize studies depicting the practices of successful alternative schools. Then, I examine the inequitable practices of many alternative schools, especially with regard to deficit thinking and institutional practices that promote inequity. Finally, I survey the literature on alternative education in South Carolina, noting South Carolina's definition of alternative education, the demographics of students in their alternative schools, and inequitable practices in South Carolina alternative education.

Classification of alternative schools

Contemporary alternative education in the United States began in the sixties, offering students an alternative to the traditional high schools. Originally, urban alternative schools served ethnic minority students who did not succeed in the traditional school setting while suburban alternative schools introduced progressive, innovative practices such as student-centered learning, blended learning, project-based learning, and service learning (Aron, 2003, 2006; Raywid, 1998). Today, the broad classification of alternative education includes charter schools, GED programs, virtual schools, innovative magnet programs, disciplinary schools, and academic remediation schools (Aron, 2006; Porowski, O'Conner, & Luo, 2014). However, the trend of suburban White students attending innovative schools and non-White students attending disciplinary and academic remediation alternative schools persists (Dycus, 2009; Hemmer, 2011). Currently, the US Department of Education defines alternative education as "educational activities that fall outside the traditional K-12 curriculum" (Porowski et al., 2014, p. 1), yet each state has the freedom to define alternative education. Since each state defines alternative education differently, it is difficult to know how many schools of each type exist nationwide and how many students attend each type of school.

Given the diversity of alternative schools, Raywid (1994) classified them into three types. Type I schools, or popular innovations, are schools of choice that generally use innovative practices. Type II schools, or last-chance programs, are often punitive in nature, are not a choice for students, and serve students who have been expelled from their home schools for behavioral reasons. Type III schools, or those with a remedial focus, serve students who need either academic or social remediation and focus on therapeutic services (Raywid, 1994). Generally, Type II and Type III schools include mandatory student placements while Type I schools are voluntary schools of choice. According to Raywid (1994), despite the punitive intent of Type II schools, students found them to be more appealing than the traditional school, and students had difficulty returning to their home schools from these settings. When students returned to their home schools, they returned to a school that had not changed the practices that marginalized the student in the first place (Raywid, 1998). Type III schools had positive short-term results, but since students lost therapeutic services once they returned to their home schools, the results did not persist. Type I schools, however, showed potential in helping students re-engage with school (Aron, 2003, 2006; Raywid, 1994).

Another way of classifying alternative schools is according to the underlying philosophy of the school. Raywid's Type II and Type III schools focus on "changing the student" (Aron, 2003, 2006; Raywid, 1998). This perspective reflects deficit thinking with regard to the student, focusing on deficiencies within the student, rather than the system, as the problem. A second focus is to "change the school" which assumes that "difficulties [can] be explained by the school-student match—and that by altering a school's program and environment, one can alter student response, performance, and achievement" (Raywid, 1994, pp. 27-28). Finally, some alternative schools focus on "changing the system" or using the school to introduce change

throughout a district or school system (Aron, 2003, 2006; Kennedy, 2009; Raywid, 1998). In contrast to the deficit-based, “change the student” focus, these last two perspectives focus on changing the institutions that perpetuate student failure.

Practices of successful disciplinary alternative schools

During the 2007-2008 school year, the National Center for Educational Statistics (NCES) surveyed school districts across the United States to determine the prevalence of disciplinary alternative programs (Carver, Lewis, & Tice, 2010). Out of the 1698 school districts surveyed, 64% of districts reported having a disciplinary alternative school. Students in these schools were typically placed there due to behaviors such as fighting, truancy, disruptive behavior, academic failure, or possession of drugs, alcohol, or weapons (Carver et al., 2010). While many disciplinary alternative programs exist, each one serves a different purpose. Some alternative programs house misbehaving students to prevent them from distracting other students in their home schools from learning; some aim to teach students acceptable social skills and send them back to the home school; and some operate as drop-out prevention programs to remediate students academically and to help them graduate (Dycus, 2009; Porowski, O’Conner, & Luo, 2014). Programs serving each purpose measure success differently. For some, success means that students return to their home high schools and receive fewer disciplinary referrals while some measure success by how many credits a student obtains. Regardless of their goals and measures of success, quality alternative programs have caring student-teacher relationships, a positive school environment, and support systems for both teachers and students (Aron, 2003, 2006; Raywid, 1994).

To describe each of these qualities, I synthesized findings from three studies of alternative schools in which researchers asked students why they had succeeded at the alternative school. Lagana-Riordan et al. (2011) conducted a case study to examine student perspectives at a

Solutions-Focused High School (SFAS) in Austin, Texas. Kim and Taylor (2008) conducted a case study at a small, midwestern alternative high school (Prairie), interviewing four teachers, nine students, and an administrator. Morrissette (2011) conducted a phenomenological study with twenty students who graduated from an alternative high school in Canada.

Caring student-teacher relationships. According to all three studies, student-teacher relationships were key to the success of at-risk students at the alternative school. On a personal level, students in the studies perceived teachers at the alternative schools as less judgmental but more caring. Lagana-Riordan et al. (2011) found that students described their relationships with teachers at the traditional school as impersonal, which they attributed to the large class sizes. Since teachers did not have time for each student individually, students felt as if teachers labeled and judged them. In contrast, students described teachers at the alternative schools as having a “genuine caring nature . . . [and] compassion for the students” (Lagana-Riordan et al., 2011, p. 110). Similarly, Kim and Taylor (2008) found that students felt labeled at their traditional schools but valued as individuals at the alternative school. Student participants in Morrissette’s (2011) study described the student-teacher relationships as mentorships in which teachers demonstrated their compassionate attitudes for students by being willing to shift from conversations about academics to personal issues.

Students stated that in addition to being personally supportive, alternative school teachers were more willing to help them succeed academically than traditional school teachers. Lagana-Riordan et al. (2011) found that students described their alternative school teachers as having high expectations for the students, which translated to increased maturity and responsibility in the students. These high expectations combined with teacher flexibility and one-on-one support provided students in the study with a greater sense of self-efficacy. Similarly, Kim and Taylor

(2008) found that students attributed their academic success to strategies such as “individual attention, teachers’ willingness to help, and adjusting the pace of instruction for the students, ensuring their understanding” (p. 213). On an academic level, students perceived teachers at the alternative school as more willing to work with students at their own pace while maintaining high expectations (Kim & Taylor, 2008; Lagana-Riordan et al, 2011; Morrissette, 2011).

Positive school climate. In addition to having positive student-teacher relationships, the alternative high school had an overall school climate that the students described as emotionally safe. The flexibility that teachers and administrators offered in academics and behavior contributed to the students’ feelings of emotional safety at the alternative high schools. In one study, students pointed out that their teachers and administrators understood the social situations impacting their behavior and grades and adjusted their practices accordingly (Lagana-Riordan et al., 2011). To know students and their backgrounds better, both teachers and administrators fostered a strong home-school relationship. They also demonstrated respect through engaging in constructive disciplinary practices such as offering choices when students needed a consequence for their actions. Since they did not have to constantly worry about what they viewed as unfair rules, one participant from the Canadian school noted that students “were able to relax and ... actually began to enjoy learning within an environment wherein they felt respected and supported” (Morrissette, 2011, pp. 177-178). Safe environments not only shaped the culture of the schools in the studies but also positively affected student behavior and academics.

In one study, the researchers found that this positive school climate spread to peer relationships as well. Students felt as if their peers were friendlier and more accepting than those at the traditional high school (Lagana-Riordan et al., 2011). Students in another study expressed their appreciation for a school in which everyone knew each other (Kim & Taylor, 2008).

Similarly, other students felt a “sense of community” and viewed the school as a family (Morrisette, 2011, p. 179).

Support systems for both students and teachers. While student-teacher relationships and a positive school climate were important, these relationships were often insufficient in helping students overcome trauma and re-engage in school. Both students and teachers needed extra support to overcome these difficulties. At one school, extra services provided for students by community-based organizations included “career counseling, community service clubs, parenting classes, on-site daycare, and the technology center” (Riordan et al., 2011, p. 110), which the school could not offer alone. Additionally teachers in the same school attended in-service opportunities directly related to issues that students had. In the other studies, these extra support systems did not exist, which according to literature on alternative schools, is the norm (Dycus, 2009; Hemmer, 2011; Kim & Taylor, 2008).

Inequitable practices in alternative education

In contrast to the positive elements that contribute to student success, students and teachers at alternative schools have reported inequitable practices in policies at the school and district levels as well as in the practices of individual teachers. Kim and Taylor (2008) found that students and teachers expressed frustration with the lack of resources at their school. Students did not have access to counseling for college or higher-level classes, and teachers had little access to PD offered to teachers from traditional schools. For Kim and Taylor (2008), this lack of resources was an issue of equity: “For this alternative program to provide equal and equitable educational opportunities that would help break this cycle [of educational inequality], the school needs to reconsider its program and provide more integral, systemic support” (p. 216).

Institutional roadblocks to equity in alternative education such as lack of funding and resources can prevent schools from offering the support systems that have been shown to make alternative

schools more successful. While an alternative school can offer a better school environment for the students, without additional support outside of school, students have difficulty staying engaged once they leave the alternative school.

In addition to the structural support system, teacher practices might also be inequitable. In a study of teachers' perceptions of equity, Hemmer (2011) performed a cross-case qualitative study at five alternative schools in both Texas and California in which she interviewed 15 teachers about their perceptions of equitable practices within their schools. She found that teachers believed that equity meant that all students were given the opportunity to an education, meaning that students had the opportunity to attend the alternative school. However, in reality, teachers were "gatekeepers" to their own classrooms, and their classroom practices tended to alienate and exclude certain students. According to Hemmer (2011), teachers "used their beliefs, attitudes, and knowledge of student history to grant or deny access to their classroom and their instruction" (p. 14). For instance, teachers tended to be more accepting of students with whom they had good relationships. Additionally, Hemmer (2011) found that this group of teachers set expectations for success for each student based upon their own perceptions of the student's abilities and their own perceptions of the students' "at-risk behaviors." Since these expectations were based on teacher perceptions, they were based on the values of individual teachers, not necessarily on what a student needed academically or socially.

Alternative education in South Carolina

In the state of South Carolina, alternative education serves the purpose of educating students at risk of educational failure. According to the South Carolina Code of Laws, alternative programs are "designed to provide appropriate services to students who for behavioral or academic reasons are not benefiting from the regular school program or may be interfering with the learning of others" (§59-63-1300). Most disciplinary alternative schools are punitive

programs serving students who have been expelled from their home schools and often focus solely on changing student behavior. Students may be placed in alternative schools due to disruptive behavior, fighting, truancy, or bringing weapons or substances on campus (§59-63-210). Additionally, students may be referred to an alternative school through the court system due to criminal charges for crimes committed outside the school. While the state requires that students have due process, individual school boards define this process and decide how much choice a student may have in attending the district alternative schools. Most of the programs in the state, however, are not voluntary schools of choice for the student. School administrators and the expulsion team (a team of teachers, administrators, counselors, and parents who make decisions about whether or not to expel a student or where to place the student after he is expelled) often compel a student to attend alternative schools or face complete exclusion from the educational system.

According to the South Carolina Department of Education, Office of Student Intervention Services, the state of South Carolina operates 72 alternative schools serving approximately 7800 students per year (Coleman & Smith, 2016). Students attending disciplinary alternative programs in South Carolina have been denied access to a mainstream education due to students violating behavioral expectations, and these students have been placed into disciplinary programs. Furthermore, the demographics of students in disciplinary schools in South Carolina reflect inequitable practices in school expulsion since Black students are twice as likely to be expelled as their White peers (Coleman & Smith, 2016). While only 30% of the population of South Carolina is African-American, approximately 62% of the students attending South Carolina alternative schools are African-American (Coleman & Smith, 2016). Similarly, males make up

approximately 70% of the total population in South Carolina alternative schools (Coleman & Smith, 2016).

In a study conducted by the SERVECenter, an education research center at the University of North Carolina at Greensboro, Turner and Muñoz-Miller (2010) examined data from alternative education in South Carolina. Using both quantitative data from school records and qualitative data from surveys sent to schools, researchers studied reasons for student referrals to alternative schools, obstacles in implementing alternative education, and extra supports alternative schools needed (Turner & Muñoz-Miller, 2010). In the state of South Carolina, students were most likely to attend alternative schools due to behavioral or academic difficulties or as an alternative to expulsion. Teachers noted obstacles to their success such as difficulties transitioning students into and out of the program, the inability to offer elective courses, and the view of alternative schools as a “dumping ground” (Turner & Muñoz-Miller, 2010).

Additionally, teachers reported the need for more personnel, particularly outside services such as mental health professionals, and better access to technology (Turner & Muñoz-Miller, 2010). This report showed that South Carolina’s alternative schools shared the characteristics of schools studied by Kim and Taylor (2008), which lacked resources and support services. At the classroom level, teachers expressed difficulties working with students who were behind academically and exhibited challenging behavior (Turner & Muñoz-Miller, 2010). These results demonstrate that South Carolina not only has inequitable practices in its alternative schools but its alternative school teachers might have deficit-oriented beliefs about their students. To address the challenges that students face in alternative schools, teachers need not only to examine their own deficit thinking but also to understand the trauma students have faced, which may be impacting student behaviors, and to adjust their own practices accordingly.

Understanding Trauma and Its Impacts on Youth

Adverse Childhood Experiences (ACEs)

Before considering a school-wide approach to trauma, I examined the research about trauma and its effect on the mental and psychological health of individuals. During the 1990s, a partnership between the Center for Disease Control (CDC) and a large HMO in California, Kaiser Permanente, studied the effects of multiple ACEs on adult physical and mental health issues. Before this large-scale study, the relationship between individual experiences and health had been examined, but the ACEs study was the first to show how the severity of outcomes increased as the number of traumatic experiences increased. Using data from surveys obtained from adults who reflected on their childhood, the researchers assessed the relationship between seven categories of ACEs experienced before the age of eighteen including childhood abuse – emotional, physical, and sexual – and household dysfunction – substance abuse by a family member, mental illness in the household, domestic violence, and criminal behavior in the family (Feletti et al., 1998). The study found a cumulative relationship between experiencing ACEs and risk factors in adulthood such as obesity, inactivity, depression, attempted suicide, drug and alcohol abuse, and promiscuity. Additionally, there was a strong correlation between ACEs and heart disease, cancer, chronic bronchitis, emphysema, and diabetes (Feletti et al., 1998). The more ACEs that a person reported, the greater the likelihood that they would experience these risk factors and chronic diseases.

The original ACEs study inspired additional studies, which examined the relationship between multiple ACEs and other mental and physical illnesses. Using the same set of data from the original ACEs study, Dube et al. (2001) also found a strong, cumulative relationship between multiple ACEs and risk of attempting suicide. For a single ACE, the risk of suicide increased two to five fold while the risk increased 51-fold for youth with seven or more ACEs (Dube et al.,

2001). Using data from 8667 adults from the original ACEs study, Edwards et al. (2003) compared mental health scores of participants who had experienced ACEs. They found that as the number of ACEs increased, the mean mental health score for an individual decreased. In a retrospective study of 9460 adults from the original ACEs study, Chapman et al. (2004) also found a cumulative relationship between ACEs and depression in adulthood. The prevalence of depression among individuals who had experienced one ACE was 1.1 to 2.7 times the prevalence of depression among those who had experienced no ACEs. The prevalence of depression among those who had experienced five or more ACEs increased to five times the prevalence of those who had experienced no ACEs. Furthermore, research also demonstrated that ACEs often did not occur independently of one another. Of children who experienced at least one ACE, 87% experienced at least one additional ACE (Dong et al., 2004).

Experiencing ACEs has been shown to change the structure of the brain, particularly in developing children. Many of these stressors can permanently impair brain processing and make more difficult not only academic learning but also social functioning (Anda et al., 2006). According to Anda et al. (2006), stress causes deficits in hippocampal function, which obstructs learning and memory. Furthermore, stress may cause the brain to slow down the process of neurogenesis, or the ability to create new neurons, which “contributes to deficits in social attachment and regulation of mood” (Anda et al., 2006, p. 175). Constant stress also causes dysfunction in the pre-frontal cortex, which mediates anxiety and mood, as well as in the amygdala, which mediates fear responses (Anda et al., 2006).

In addition to physically changing the brain, ACEs may also affect a person’s ability to cope with stress. According to Larkin, Felitti, and Anda (2014), the body has a mechanism for coping with immediate stress called allostasis, which helps individuals respond and protect

themselves from stress. When a person has been exposed to stress repeatedly over time, the allostatic load becomes overtaxed, causing the body to physically remain in a protective mode. To cope with this overload, individuals often resort to unhealthy habits to manage the stress in their lives. Furthermore, since these individuals remain in a heightened state of stress, they may perceive nonthreatening stimuli as threatening, causing them to overreact emotionally.

Trauma and the young adult

Studies have also been conducted among young adults about the effects of ACEs on their academic and personal lives. Schilling et al. (2007) conducted a study of 1578 high school seniors in Boston, Massachusetts representing a racially and socioeconomically diverse set of students using ACEs as the independent variable and depressed mood, drug use, and antisocial behavior as dependent variables. They also explored outcome differences between genders and across racial/ethnic differences. Across all categories, eight of the ten ACEs were significantly related to depressive symptoms, nine out of ten to drug use, and eight out of ten to antisocial behavior (Schilling et al., 2007). Similar to previous studies, the researchers also found a cumulative or dose-response correlation between the numbers of ACEs and the different dependent variables. Only one significant difference was found between the genders; sexual abuse had a much larger impact on all three areas for boys than girls. While all three races/ethnicities examined experienced a cumulative or dose-response correlation of ACEs to the dependent variables, the cumulative effect of ACEs was more significantly associated with Caucasian students than with African-American or Hispanic students. The researchers did not explore this phenomenon further or attempt to explain the differences between the genders or among the races/ethnicities.

In studies of young adults, researchers also demonstrated a cumulative correlation between multiple ACEs and acts of violence perpetrated on themselves and others. Duke et al.

(2010) collected survey data from 136,547 6th, 9th, and 12th grade students in Minnesota, in which students anonymously reported ACEs and violent risk factors. The results of the survey measured the correlation between abuse and household dysfunction and eight behaviors: delinquent behavior, bullying, physical fighting, dating violence, weapon-carrying on school property, self-mutilation, suicidal ideation, and suicide attempt. Any ACE increased violence perpetration for girls from 1.7- to 5- fold and boys 1.7- to 44-fold. Any ACE increased the risk of self-perpetuated violence in girls from 2.47- to 5.07-fold and boys 2.47- to 15.04-fold. Experiencing physical or sexual abuse was a significant risk factor for boys for dating-violence perpetuation, weapon-carrying, and self-directed violence (Duke et al., 2010). As the number of ACEs experienced by the adolescent participants increased in each of these studies so did the likelihood of them engaging in violent behaviors.

Trauma and school engagement

While depression, drug use, and violence affect student engagement in school, studies have also found more subtle ways in which ACEs interfere with school engagement. Bethell et al. (2014) used survey data from the National Survey of Children's Health, which collected data from a national, representative sample of 95,677 children from all states. The researchers measured the association between ACEs and chronic childhood conditions, health risks, and school success factors such as school engagement and grade repetition. They also assessed the mitigating effects of resilience and receiving medical care. Researchers found that children with more ACEs were more likely to be classified as having special needs – there was a dose-response or cumulative effect as to the number of ACEs and the likelihood of being classified as having special needs. Children with more ACEs performed lower on resilience measures and were more likely to reside in unsafe neighborhoods. Children with at least 2 ACEs were also 2.67 times more likely to have repeated a grade (Bethell et al., 2014).

An extensive review of the literature on trauma and its impact on educational outcomes found that complex trauma impacted cognitive, academic, and social-emotional-behavioral functioning (Perfect, Turley, Carlson, Yohanna, & Saint Gilles, 2016). Cognitive impairment included lower IQ scores, impaired memory, lower verbal ability, and issues with inattention. Additionally, students who had experienced complex trauma performed lower on standardized tests, had worse attendance records, and had more disciplinary referrals. Complex trauma in students has also been associated with aggressive behavior, defiance, and hyperactivity in schools. In all three categories, the severity of the trauma was directly related to the severity of the impairment (Perfect et al., 2016).

While ACEs were significantly related to disengagement in school, Bethell et al. (2014) also found that resilience was a mitigating factor. Interventions focused on building resilience in children through emotional support from caring adults as well as using healthcare providers helped repair neurological networks, which reduced stress load on the brain and improved brain function, and mitigated the effects of ACEs on students' lives. Larkin et al. (2014) found similar mitigating effects. They found that increasing protective factors such as providing better social supports and helping students gain higher self-esteem could mitigate the effects of abuse and neglect. Crucial to these social supports were high quality relationships with caring adults.

Criticism of original ACEs

In recent years, researchers have criticized the early ACEs studies. One criticism noted the limited nature of the list of ACEs themselves, stating that other adverse experiences from childhood have been shown to have negative mental and psychological effects (Cronholm et al., 2015; Finkelhor, Shattuck, Turner, and Hamby, 2012; Wade, Shea, Rubin, & Wood, 2014). A second major criticism concerned the population sample of the study participants. Critics pointed out that the original study was done with middle to upper middle class participants who had

medical insurance and did not racially represent the general population (Finkelhor et al., 2012; Wade et al. 2014). To respond to these criticisms, researchers conducted new ACEs studies to measure the correlation of other ACEs to physical and mental health and tested the results with a more representative sample of the population of the US.

Finkelhor et al. (2012) suggested expanding the list of ACEs to include community-based experiences, such as violence. In their first study, Finkelhor et al. (2012) attempted to find a correlation between the original ACEs and a list of expanded ACEs to psychological distress. In this first cohort, they found some of their expanded ACEs to be significant predictors of psychological distress. Using their findings in this first study, Finkelhor, Shattuck, Turner, and Hamby (2015) expanded the original list of ACEs to include bullying, peer rejection/isolation, poverty/low SES, and community violence. In this study the researchers attempted to find correlations between the original ACEs and these expanded ACEs and psychological distress symptoms such as anger, depression, anxiety, dissociation, and posttraumatic stress as well as the child's physical health. In this phone survey of 1949 children from across the nation, Finkelhor et al. (2015) attempted to match the race, ethnicity, and SES in their sample to the general population. They found that students living in poverty had twice the negative health indicators of students not living in poverty, but that poverty did not predict psychological distress. Furthermore, they found that bullying as well as original ACEs such as emotional abuse, physical abuse, and sexual assault were predictors of psychological distress but not poor health.

In contrast to the two studies by Finkelhor et al., other researchers critiqued the original ACEs study because it did not reflect the experiences of urban Black and Brown students. Wade et al. (2014) argued for improving the ACEs scale by adding more experiences to reflect urban youth experiences. In a cohort study of youth in urban Philadelphia, Wade et al. (2014) asked

105 participants in 17 focus groups to identify stressful life experiences. In these groups, youth listed experiences and then picked the five most stressful. Wade et al. categorized these lists into four domains of stressful life experiences, including stress within the family (substance abuse, death, single-parent homes, familial violence), community stressors (neighborhood violence, crime, death), personal victimization (violent and nonviolent – abuse and neglect), and economic hardship (lack of monetary and non-monetary resources). While the participants did not mention racism as a stressor, the researchers noted “[a] possible explanation is these pervasive but subtle inequities have become expected norms of our participants’ lives and are not perceived as stressors” (Wade et al., 2014, p. 18). This study gave voice to marginalized individuals and produced an expanded list of categories of adverse experiences.

In order to explore the correlation among this set of expanded ACEs, Cronholm et al. (2015) studied an urban population of 1784 individuals in Philadelphia consisting of mostly African American and Latino youth in order to compare results of marginalized youth to those of the mostly White, middle class participants in the original ACEs study. The researchers used the original ACEs and added experiences of racism, community violence, unsafe neighborhoods, bullying, and foster care as a list of expanded ACEs (Cronholm et al., 2015). They found more reported original ACEs than the Kaiser study with 31.7% of participants reporting no ACEs, 47.6% reporting 1-3 ACEs, and 20.7% reporting 4 or more ACEs. In their expanded list of five ACEs, they found 36.6% of participants reported none, 50% reported 1-2 ACEs, and 13.4% reported 3 or more. In this study, they found lower occurrences of sexual abuse, emotional neglect, and physical neglect than in the original ACEs study (Cronholm et al., 2015). Among minority populations, the researchers found higher levels of the expanded ACEs, each of which correlated with “concurrent negative health effects and increased participation in risk behavior”

(Cronholm et al., 2015, p. 358). Unlike the plethora of research on the original ACEs, no research has yet been done on the cumulative effect of multiple expanded ACEs on either mental or physical health.

Studies have also yet to be done regarding the impact of these expanded ACEs on school engagement and risk behaviors in teenagers. However, studies in my synthesis show a correlation among the new, expanded ACEs, and psychological distress and poor health, which has been consistent in some of the original ACEs studies. Furthermore, the expanded ACEs are more prevalent in Black and Brown youth living below the poverty line, who are less likely to have access to health care and mental health professionals. Even when Black and Brown youth have access to mental health care, they are less likely to use such services due to fear of experiencing racism in the clinical setting (Bryant-Davis & Ocampo, 2005; Carter & Forsyth, 2010). Studies have shown that experiences of racism negatively impact the mental health of Black and Brown individuals and also compound the effect of other types of trauma (Bryant-Davis, 2007; Carter & Forsyth, 2010; Carter et al., 2013; Okazaki, 2009; Pieterse, Todd, Neville, & Carter, 2011). While research has yet to demonstrate the impact of the expanded ACEs and the trauma of experiencing racism on risk behaviors and school engagement in teenagers, teachers need to be aware of the potential in adverse experiences beyond the original ACEs including racism, community factors, and economic hardships particularly in urban schools and alternative schools, whose student populations more closely reflects the sociodemographic target populations of emerging studies on expanded ACEs than the original ACEs study.

Trauma and deficit thinking

Similar to when educators use other theories to explain students' school failure (e.g., culture of poverty and at-risk students), using trauma research to explain school failure has the potential to be deficit-based. Educators using trauma to explain student behavior may blame the

family or home culture for the deficits perceived in the child, a version of what Valencia (2010) calls the “cultural and accumulated environmental deficits variant of deficit thinking” (p. 13). In contrast, trauma research and trauma-informed care can be a way in which teachers can challenge the school institutions that produce school failure. For instance, teachers can recognize the racism, classism, and homophobia that can be the source of trauma or that can fuel deficit thinking in their own classrooms, and they can make changes to their own practices.

Additionally, teachers can use the research on trauma to expand their understandings about the sources of students’ challenging behaviors and to examine their own practices that may be hindering student success. In exploring the impact of trauma on student learning and behavior, teachers should be careful to maintain an asset view of students, seeing students’ inherent strengths and believing in their potentials.

Race-based trauma researcher Bryant-Davis (2007) argued that “education, prevention, intervention, and justice” that originated from knowledge of the effects of trauma and that used language that attributes life challenges to having experienced trauma could help those affected. Similarly, in education, teachers can use knowledge about trauma to reduce the effects of trauma in students and to challenge the systems that keep students who have experienced trauma from succeeding. To intervene effectively, teachers need to have the skills to work with students who have experienced complex trauma using an approach that reinforces students’ strengths, helps students learn self-regulation, and teaches students how to respond to life situations while critically reflecting on their own beliefs and behaviors. An approach to changing schools and training teachers should incorporate teachers’ awareness of their own lived experiences as well as the consideration of how students’ lives and backgrounds affect classroom interactions, and vice versa. Trauma-informed care has the potential not only to provide these skills to teachers but

also to change the institutional responses of the school as long as teachers are careful not to adopt a deficit-based view of students who have experienced trauma.

Trauma-Informed Care

In response to the research on the effects of complex trauma, mental health services, medical services, juvenile justice centers, and some schools have restructured services in order to address these effects. SAMHSA has outlined an approach for agencies that offer services to individuals exposed to complex trauma. According to SAMHSA (2014) a trauma-informed approach is one in which a system not only assesses, and provides treatment for, trauma but also changes the underlying culture of the organization. Many agencies working with survivors of trauma may unknowingly re-traumatize individuals, meaning that the ways in which agencies interact with individuals may trigger stress from the trauma to re-emerge. It is therefore imperative that service providers rethink how they conduct business and adopt a systems-focused, trauma-informed approach.

According to SAMHSA (2014), individuals working in these agencies must first understand trauma in order to begin to rethink their practices. SAMHSA, stated:

Trauma results from an *event*, series of events, or set of circumstances that is *experienced* by an individual as physically or emotionally harmful or life threatening that has lasting adverse *effects* on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. (p. 11, emphasis in original)

The event may be the occurrence of harm, the threat of harm, or neglect. Individual experiences surrounding the event may vary depending on factors such as cultural beliefs, support systems, and the age of the person. Finally, the effects of the event may occur soon after the event or years later.

SAMHSA's framework for trauma-informed care includes four key assumptions and six key principles. The four key assumptions that undergird the practices of any agency practicing

trauma-informed care include: a) realizing the impact of trauma by educating everyone in the agency about its effects; b) training staff in recognizing the signs of trauma; c) assisting staff in responding to these signs; and d) resisting re-traumatization through creating safe spaces (SAMHSA, 2014). In addition to the four key assumptions, SAMHSA also notes six key principles, which any trauma-informed system should follow:

- safety –both staff and the survivors of trauma feel safe particularly in interpersonal relationships;
- trustworthiness – transparency in decision-making;
- peer support – support offered from other survivors;
- collaboration and mutuality – shared power and responsibility between staff and survivors of trauma;
- empowerment, voice, and choice – helping survivors become self-advocates, determine goals, and have choice in decisions;
- cultural, historical, and gender issues – recognizing any biases and educating staff to be culturally responsive (SAMHSA, 2014).

SAMHSA also recognizes the importance of working with communities and partnering with various agencies to help trauma survivors. No one agency can tackle the problem of trauma in society.

While many social and health systems have adopted a trauma-informed approach, schools have been slower to adopt the practices. The Trauma and Learning Policy Initiative (TLPI), an initiative sponsored by the Massachusetts Advocates for Children and Harvard Law School, outlines a Flexible Framework for Action that schools can use in creating a trauma-sensitive approach (Cole et al., 2005). Their approach includes six key elements:

1. **School-wide Infrastructure and Culture:** The administrators and a team assess the needs of the school, plan for the change, communicate with the community, evaluate the program as it is implemented, and address barriers to the program.

2. **Staff Training:** Teachers learn how to communicate and build relationships with parents, how to gain support from outside agencies, how to build relationships with students, and how to help students regulate emotions and gain confidence in education.
3. **Linking with Mental Health Professionals:** Staff partner with mental health professionals to gain support for teachers to learn techniques to manage stress in themselves and to help students in the classroom. Mental health professionals also help in the referral process and in helping teachers connect with parents.
4. **Academic Instructions for Traumatized Children:** Teachers receive training on techniques that help traumatized students flourish academically such as recognizing student strengths, keeping routines and behavioral plans consistent, predictable, and positive, using a variety of teaching methods to engage students, and helping students understand their emotions.
5. **Nonacademic Strategies:** Teachers find ways to build relationships with students outside of academics whether it is inside the classroom or through extracurricular activities such as supporting sports or drama.
6. **School Policies, Procedures, and Protocols:** School-wide, trauma-sensitive policies are in place, including discipline policies and procedures regarding communicating with parents and outside agencies (Cole et al., 2005).

Despite the in-depth frameworks presented by both SAMHSA and TLPI for educators, other research on trauma-informed care in schools is scarce. Studies evaluated the process of implementing trauma-informed care (Perry & Daniels, 2016), examined teacher attitudes about trauma-informed care (Baweja et al., 2016; Morgan, Pendergast, Brown, & Heck, 2015), provided guidelines for screening children for trauma (Plumb, Bush, & Kersevich, 2016; Woodbridge et al., 2016), and provided initial reports in improvement of student outcomes (Dorado, Martinez, McArthur, & Leibovitz, 2016). Literature reviews described the frameworks specific sites have used and provided guides for school implementation (Chafouleas, Johnson, Overstreet, & Santos, 2016; Tishelman, Haney, O'Brien, & Blaustein, 2010). The research on trauma-informed care in schools yielded several key themes, including the need for ongoing teacher training, the need to have a wide range of community involvement, and the importance of student-teacher relationships in creating a safe school environment.

The need for teacher training

Studies on trauma-informed care described the first step in creating a trauma-informed system as helping the staff see the need for the change. According to Morgan et al. (2015), teachers often blamed students for issues that stemmed from trauma because teachers had not received training on trauma. Teachers first needed to see the necessity for the program through training on the prevalence of trauma and its impact on students, particularly its impact on behavior, and providing teachers with skills in the classroom to impact behavior (Baweja et al., 2016; Chafouleas et al., 2016). After teachers recognized change in student behavior and engagement in school, they became more invested in the change (Baweja et al., 2016). At this point, the training was deepened to include strategies for addressing more difficult student behavior; strategies for building relationships with students, parents, and the community; and coaching for individual teachers (Chafouleas et al., 2016). Also important in training teachers was helping them avoid secondary trauma, or stress experienced by those working closely with trauma survivors. Teachers were also taught strategies for self-care, such as recognizing signs of stress in themselves and taking care of their own mental and physical health through practices including attending counseling, eating healthy, and exercising (Chafouleas et al., 2016; Dorado et al., 2016).

After teachers had received training, studies reported increases in teacher knowledge about trauma and increases in their skills in responding to the effects of trauma in the classroom. Using survey data from 175 school staff including teachers, administrators, social workers, and guidance counselors from the San Francisco Unified School District, Dorado et al. (2016) explored how educators' knowledge about trauma and trauma-sensitive practices changed before and after PD. They found that after receiving training educators reported a 57% increase in their knowledge about trauma and its effects, a 61% increase in knowledge about how to respond to

trauma, and a 68% increase in knowledge about trauma-sensitive practices (Dorado et al., 2016). Similarly, Perry and Daniels (2016) studied a pilot program in New Haven, Connecticut, which included training for 32 teacher participants. They found that 92% of the teachers self-reported that they gained knowledge about trauma, while 16% reported a better understanding of trauma symptoms, and 47% reported understanding how to use strategies to relieve stress in the classroom due to the training (Perry & Daniels, 2016). In a study of early childhood teachers in rural Appalachia, Shamblin et al. (2016) measured outcomes for 39 teachers before and after training using a researcher-developed scale. In their study, teachers reported a significant increase in their abilities to work with students who presented challenging behaviors, a significant decrease in overall classroom stress, and a significant decrease in using punitive behavior management strategies (Shamblin et al., 2016). The ultimate goal of training teachers in each of these studies was to develop school-wide capacity for trauma-informed care and to change the culture of the entire school.

The need for community involvement

While studies explained the importance of training teacher and staff, schools alone could provide all the support students who had experienced trauma needed. Schools needed to partner with outside agencies. For example, Lincoln Alternative High School in Walla Walla, Washington, a successful trauma-informed school featured in the documentary *Paper Tigers*, partnered with the community to create an on-site clinic to help treat student health needs on campus (Stevens, 2012). Other successful trauma-informed schools collaborated with outside agencies and universities to provide mental health services to students (Baweja et al., 2016; Chafouleas et al., 2016; Shamblin et al., 2016). Studies showed that many students, often minority students and those who live in poverty, did not have the resources to receive services outside the school setting (Baweja et al., 2016; Woodbridge et al., 2016), making school-based

care the only resource for the most vulnerable student populations. Teachers, administrators, and district officials needed to know how to advocate and reach out to community services to provide site-based care for students.

The primacy of student-teacher relationships

Perhaps the most important aspect of trauma-informed care included in the studies was its emphasis on supportive teacher relationships. Students who had a caring adult in their lives built resilience, which made overcoming trauma possible (Bethell et al., 2014; Larkin et al., 2014). In an open-ended questionnaire of 30 teachers in Queensland, Australia, Morgan et al. (2015) examined the idea of “relational pedagogy,” how teachers developed strategies that connected with students who had experienced trauma. According to Morgan et al. (2015), teachers exhibiting relational pedagogy listened to their students, focused on students’ strengths, and encouraged student agency in their classes. These teachers took time in the classroom to develop relationships with students and to provide the academic support students needed. Additionally, these teachers did not focus on punitive measures for managing student behavior; rather, they employed strategies for re-engaging students in their classrooms based on the relationships that they had formed (Morgan, et al., 2015). Some strategies teachers used were giving students choice in their learning, listening to students, and taking time to interact positively with students.

Similarly, McHugh, Horner, Colditz, and Wallace (2013) collected data from 78 teenagers in 13 focus groups from three urban areas throughout the United States. McHugh et al. (2013) sought student perceptions about teacher practices that fostered relationships. According to the study, two types of interactions helped build positive relationships: effortful engagement and support. According to McHugh et al. (2013), students perceived effortful engagement as teachers purposefully reaching out to establish a relationship by building upon shared likes and experiences, having extended contact time with the same teacher, and having authentic

relationships with the students. Second, students perceived supportive teachers as those who gave them advice, helped them academically, and helped them explore their ambitions in life. In contrast, students perceived teachers who did not have positive relationships with students as those who would not pay attention to them, who did not seem to care about them, and who stereotyped them before getting to know them (McHugh et al., 2013).

Improved outcomes after implementing trauma-informed care

When schools implemented trauma-informed care, researchers documented improvement in students who had experienced trauma. Perry and Daniels (2016) studied a school in New Haven, Connecticut that implemented a tiered support system for students who had experienced trauma. In this study, teachers received training, and students received either classroom-based interventions or more intensive clinical interventions, depending on their individual needs. In the more intensive clinical groups, students with documented PTSD showed a substantial decrease in symptoms. Out of the original students who met overall symptom criteria for PTSD, only 17% met overall symptom criteria after going through the program. In the same study, students participating in classroom workshops self-reported that they had better knowledge about how to relax, how to worry less, and how to trust others more.

Dorado et al. (2016) implemented a similar tiered framework of trauma-informed care in San Francisco schools to study improved academic and behavioral outcomes for students. After five years of implementation, they found that teachers' perceptions of student engagement increased. For instance, on an evaluation survey, teachers reported a 28% increase in student ability to learn, 27% increase in students remaining on task, and a 34% increase in attendance. Using school data about disciplinary referrals to administration, they also found an 87% decrease in disciplinary referrals and a 95% decrease in suspensions. Additionally, students who had received treatment for symptoms of trauma showed a significant decrease in symptoms.

One school that did groundbreaking work in trauma-informed care was Lincoln Alternative High School, the subject of the documentary *Paper Tigers*. After implementing a school-wide trauma-informed approach with students who had been expelled from traditional schools, administrators at Lincoln Alternative High School reported reductions in suspensions from 798 to 135, expulsions from 50 to 30, and disciplinary referrals to school administration from 600 to 320 (Stevens, 2012). In addition, both students and teachers reported a more caring culture, less tension between teachers and students, and students gaining the ability to self-regulate (Stevens, 2012).

While all these dimensions of trauma-informed care were important, sustaining system-wide change was difficult, and unlike other reform efforts, trauma-informed care had no unified framework and little long-term empirical evidence validating the approach. According to Chafouleas et al. (2016), keys to sustaining trauma-informed care over time included “commitment to cross-sector collaboration, building coaching capacity, and engagement of key stakeholders” (p. 154). Schools that remained trauma-informed in the long-term were committed to continuing training for teachers, had a leadership team that planned and made decisions, and continuously assessed the program (Chafouleas et al., 2016).

Studies about trauma in young adults emphasized the importance of teacher-student relationships in re-engaging students and helping them overcome the effects of adverse experiences. Research demonstrated that implementing trauma-informed care has the potential to impact student-teacher relationships system-wide and to help students overcome the effects of trauma. My research into teacher beliefs about trauma and the role of teachers’ relationships with students seeks to understand how we can address these needs in my school. By using practitioner

inquiry, I seek to understand how I can use the literature and the action research process to implement trauma-informed practices within my own context.

Summary and Overview

Many students come to school after having experienced trauma at home and in their communities, which impacts not only their physical and mental health but also their ability to function at school. Exposure to trauma particularly affects students who attend alternative schools. Therefore, it is vital for teachers to examine their own beliefs and practices in order to understand how their views might impact students in their classrooms. A trauma-informed approach has the potential to shape teachers' interactions with students and improve relationships. However, teachers should remain aware of the potential for deficit thinking when implementing any intervention such as trauma-informed care. This study explored four teachers' journeys toward understanding and enacting a trauma-informed approach collectively and individually at one disciplinary alternative school.

CHAPTER 2 METHODS

For this research project, I studied how a team of teachers including myself worked together to construct a trauma-informed approach in a disciplinary alternative school. In order to explore how teachers begin to build knowledge and practice, I sought to answer the following research questions: (1) How do teachers at a disciplinary alternative school characterize their relationships with students in their classroom? How do teachers at a disciplinary alternative school describe the importance of these relationships for themselves and for students? (2) How do teachers at a disciplinary alternative school develop an understanding of trauma and their responses to trauma while participating in PD? How does engaging in PD on trauma further develop the teachers' thinking about their relationships with students? (3) How do teachers at a disciplinary alternative school use the new knowledge gained from PD? In order to answer these questions, I used practitioner inquiry to examine how we began to understand and apply a trauma-informed approach at our alternative school.

Practitioner inquiry is a method for education practitioners to study their own context through action and reflection with the goal of enacting change and improving their own practice (Dana & Yendol-Hoppey, 2014). In practitioner inquiry, the researcher identifies a problem or question within her own practice; uses the literature to study that problem; makes a change in her context and collects data to study that change; analyzes the data collected; and continues this cycle by posing additional questions. Instead of producing a generalizable study as in qualitative or quantitative research methods, the researcher seeks insight into her own context and teaching practices (Dana & Yendol-Hoppey, 2014).

In my own practice, I identified teachers' lack of understanding students who have experienced trauma as a problem of practice. Many students who go through our program have

experienced multiple traumatic events in their lives. As teachers, we struggled with how to connect with all students, how to react to student behaviors, and how to approach students who we knew had faced trauma in their lives. As a result, I began to wonder how we might have better success connecting with all our students and keeping students engaged with school. Since student success had to start with our own beliefs and actions as teachers, I planned a series of PD sessions during which we would engage in reflection and action planning as a community.

During the spring 2016 semester, we received training and worked together as a team to understand trauma and its impact on students. I served in the dual roles of PD planner and teacher participant. As a PD planner, I was in charge of coordinating speakers, gathering resources, and planning our team meetings. I partnered with the director and assistant director of the program to bring in a district expert on adverse childhood experiences and trauma-informed care. Additionally, we purchased *Paper Tigers*, a documentary about an alternative school in Walla Walla, Washington that used a trauma-informed approach. As a teacher, I participated in all the PD sessions and worked alongside other teachers on my team to develop an action plan. Using these resources, we explored together how we could bring trauma-informed practices into our context.

Context

This study took place at an alternative learning center which housed three different alternative programs: a middle school disciplinary alternative school, a high school disciplinary alternative school, and a non-traditional high school. All three schools merged during the 2015-2016 school year and at the time of the study had the same director and assistant director. These programs were located in a midsize urban public school district in upstate South Carolina. Out of the 18,000 students in the district, 54% of the students were White, 35% Black, 6% Hispanic, 1.5% Asian, 1.5% Native American, and 2% other. About 56% percent of students in the district were on free or reduced price lunch (an indicator of low-income status), and 14% of students had

disabilities. The three programs shared the same building, and in a few cases teachers worked across the programs. Teachers in all three programs often worked together during PD sessions. This study focused on the four teachers who worked at the disciplinary alternative high school.

The disciplinary high school program served as an option for students who were facing expulsion from their home high schools. When students and parents met with an expulsion team, the student was given the option to attend the program or to move toward expulsion, which would exclude the student from the school system entirely. Students attended the school for either one or two semesters depending on the terms decided by the expulsion team. After their mandated term was complete, students had the option of attending the alternative school for an additional semester or returning to their home high school. The high school alternative school student population reflected the national trend of alternative schools having higher percentages of marginalized students than traditional schools (Dycus, 2009; Hemmer, 2011). The demographics for the 2016-2017 school year were balanced in the male (58%) to female (42%) ratio, and the percentage of exceptional education students (8% compared to 14% for the district). However, there was a higher percentage of African-American students (69% compared to the 35% for the district) and students living in poverty (69% compared to 56% for the district).

Participants

For this study, I followed our four-teacher team to understand how we developed a trauma-informed approach both individually and collectively. The other three teachers and myself formed the entire team at the disciplinary alternative school, and we worked together to make decisions about how to run the school. I chose to examine our team because we formed the entire school unit. Before beginning this study, all three participants were informed about the extent of the research and voluntarily agreed to participate.

At the time of this study, our social studies teacher, Mr. B, had taught for four years, all of them at the alternative school. Mr. B was a White man in his mid-forties who worked as a chemical operator for fifteen years before returning to college for his education degree. Our science teacher, Mr. N, filled a number of positions in his more than thirty years in education. His career included ten years in the classroom, twelve years in district-level positions, and eight years at a state-level teacher recruitment and leadership initiative. In addition to these roles, he worked as a research technician at a university doing environmental research. At the time of the study, Mr. N had been at the alternative school for two years and was a White man in his early sixties. Our math teacher, Mrs. J, was a Black woman in her late forties. Mrs. J had been at the alternative school for five years and had taught an additional nine years at the traditional high school. I was a full participant on this team, and I was a White female in my mid-thirties with thirteen years of experience teaching. I had taught both English and math in traditional, non-traditional, and alternative settings. For the two previous years, I had taught English part time at the disciplinary alternative high school and math part time at the non-traditional high school.

PD Plan

Between February and April 2017, my colleagues from the disciplinary alternative school and I attended three PD sessions. Each session was followed by a semi-structured discussion to reflect upon our learning. During each discussion our goal was to create and refine an action plan for our school to implement during the 2017-2018 school year.

While gathering the data from our initial interviews, I worked with our district behavioral specialist to plan our PD sessions. In our communications, I requested that she teach us more about trauma and how to respond in our classroom. During the first PD session, the behavioral specialist focused on the types of trauma that students experience and the physiological effects of trauma. She asked us to take the ACEs test, explained what happens in the brain when a student

experiences these stressors, and how these stressors can impact student behavior in the classroom. The presenter used videos and handouts depicting the impact of stress on the brain. At the end, the presenter provided a few strategies that we could use in order to help students experiencing ACEs. She also discussed district level expulsion practices and how she advocated for students.

In the second session, the behavioral specialist focused on classroom level and school level strategies to help mitigate the effects of trauma on the lives of students. She focused on developing resilience in students, and showed us videos of educators and schools that promoted resilience. When explaining how we could promote resilience in students, the behavioral specialist focused on student strengths, rather than their weaknesses, and demonstrated an appreciation for student identity, particularly racial identity. Building upon the idea of resilience, she introduced culturally responsive teaching, which focuses on the strengths of students' cultures and using those strengths in our teaching. For instance, she asked us to look around our classrooms to be sure that our materials, posters, and books reflected our student population. She also asked us how we involved our students in creating the classroom environment so that both the classroom and the environment reflected our individual students. The behavioral specialist promoted helping students understand their identities and working to appreciate and celebrate student individuality.

For the third session, we watched and discussed the documentary *Paper Tigers*. During the discussion we focused on practices from the school featured in the documentary. We discussed whether or not we did these practices, if we should or should not have been doing them, and how we could have implemented them in our context. We also compared the strategies suggested by our behavioral specialist to the ones used in the documentary and discussed how we could have implemented those in our context.

Data Collection

In order to answer the research questions I collected data from three sources. First, I conducted two different interviews with each of the three participants, one before the PD sessions began, and one after the conclusion of the final session. Second, I recorded and transcribed the discussions that followed each PD session. I also collected and analyzed artifacts such as the notes from our discussions and the various drafts of our action plan. Finally, I used a personal journal to record my own understanding and my own practice as I went through the PD sessions.

Interviews

I used semi-structured interviews to gather the teachers' thoughts about trauma-informed care (see [Appendix](#)). During the first interview, I focused on my colleagues' knowledge about trauma and its impact in the classroom, their perspectives on student-teacher relationships, and how these relationships might impact students who had experienced trauma. This information provided a baseline about my colleagues' understandings before the PD sessions. During the second round of interviews, I asked the teachers to self-report changes they had made in their thinking and actions due to the training as well as to reflect upon the action plan that we had created. I recorded and transcribed the data from these interviews.

Discussions

In addition to interviews, I audio recorded the discussions that followed each of the three PD sessions. During these sessions, I was a participant, joining in on the conversations and working with my colleagues to develop an action plan (Anderson, Herr, & Nihlen, 2007). The recorded meetings were transcribed, coded, and analyzed.

Artifacts

I took notes on the PD presentations and recorded the different drafts of our action plan after each session. I used the notes from the presentations to help me describe the content from

our sessions to provide context for the discussions. While I did not code or analyze my notes, I used the various drafts of our action plan as data that were also coded and analyzed.

Journaling

I also kept a personal journal reflecting on my own thinking and actions. Before the first training, I answered all of the interview questions that my colleagues did in their interviews, reflecting on my understandings of trauma and my perspective about student-teacher relationships. After the final session, I reflected on how the training changed my thoughts and actions along with how I responded to our action plan. I coded and analyzed data from my personal journal along with the interview data from the other three teacher participants. In addition to the personal journal that I kept as a participant to document my learning, I kept a separate researcher's journal to record, and write memos about, decisions made during data analysis.

Data Analysis

After transcribing all the data from the interviews, discussions, and journals, I read through the text multiple times to gain an understanding of the data, and noted general impressions in my researcher's journal (Creswell, 2013; Dana & Yendol-Hoppey, 2014). Using this initial reading, in conjunction with information from existing research and this study's theoretical framework, I developed a framework based on my research questions, the literature about trauma-informed care, Valencia's (2002, 2010) deficit thinking theory and Mezirow's (1978, 1997, 2001) transformative learning theory. My framework included three components, each of which was correlated with one research question: a) understanding teachers' perceptions of their relationships with students; b) understanding teachers' perceptions of how trauma impacts students; and c) examining the impact on school policy and teacher practice. For each of these three components, I first related it to findings from my literature review. Second, I explained how I used Valencia's (2002) theory to identify the presence of deficit thinking and

how our thinking did or did not change throughout the PD. Finally, I used Mezirow's (1978, 1997, 2001) theory of transformative learning to examine the evidence of shifts in our thinking. This framework was instrumental in creating and defining an initial list of codes. Throughout my data analysis process, I referred back to this framework as I added and defined codes and developed my themes

Using this framework for analysis, I developed a list of broad preset codes, under four main headings: trauma-related codes, relationship-related codes, program/practice-related codes, and trauma-informed care codes. My initial code list captured broad categories such as Examples of Relationships: Successful and Classroom Practice: Environment. As I developed these codes, I recorded and defined each one in my code notebook. An example of my original codes, their descriptions, and a data sample are provided in Table 2-1.

Table 2-1. Original coding system sample: Relationship-related codes

Original Code	Code Description	Data Sample
Successful Relationships: Description	Teachers describe the types of relationships with students that they believe are successful; teachers describe characteristics of the relationships without giving an example.	I keep going back to the same kind of themes. You have to be real with these kids, period. If they think you're BS-sing them, they're going to know. They don't like that. They think they've heard it all before kind of, they have this attitude like I've seen you're just another authority figure with a tie. You kind of have to get away from that. If you're trying to create a student/teacher relationship, professional relationship, you kind of have to not play the role that they're so used to. You kind of have to be a little more laid back, be a little more permissive, be a little more understanding, be less rigid.
Importance of Relationships for Teachers	Teachers articulate why their relationships with students are important.	But for me that's the most important thing I do here. If ... and I won't say if I didn't teach them any science it wouldn't matter. Yeah it would matter. It would matter to me. But I think that number one, that's the most important thing that we provide them, is that attention.
Benefits of Relationships to Students	Teachers describe what they believe are the benefits to students of strong relationships to teachers.	They may feel like "I don't have any support. Nobody believes in me." But you can be that person that gives them that little extra they need to keep going and to try to make something of themselves. Whereas before, if they've been through something they might be kind of crushed mentally. If we have that relationship with them if might give them that extra that they need to overcome it and move forward with what they want to do.
Example of Relationships: Successful	Teachers give specific examples of what they view as successful relationships with specific students.	I would take his clothes home and wash them for him. I would like make sure that he had his ID. When he left I said, "Give me your ID, I'll put it in my desk so tomorrow I know you have an ID."

After an initial round of coding, I noted that some codes were used with high frequency, indicating that some codes were not specific enough and needed to be named and defined more narrowly. Furthermore, these codes did not sufficiently answer my research questions. In response, I read through the data again adding more descriptive emerging codes under my broad initial codes. I provided an example of descriptive codes I developed along with their original codes in Table 2-2.

Table 2-2. Code development.

Original Codes	Final Codes
Successful Relationships: Description	<ul style="list-style-type: none"> • Caring Talk, Not Condescending • Know How To Talk To Students • Find Out What’s Going On With Students When They Misbehave • Laugh With Students; Share Serious Moments (Real Talk) • Teacher Is a “Man of His Word” • Perceived as Fair by Students • Find Common Thread With Students • Be Real With Students • Open, Honest, Trustworthy, and Supportive • Tell Students You Care About Them • Talk and Joke With Students yet Be Able to Pull It Back
Importance of Relationships for Teachers	<ul style="list-style-type: none"> • Using Relationship to Encourage Students Not to Give Up • School as a Place Where Caring Relationships Occur • Teacher Self-Definition of Their Role • Caring = Being Genuine, Not Fake • Relationships More Important Than Curriculum • Teaching Is Not About Content but Relationship • Using Rapport/Relationship When Setting and Enforcing Rules/Expectations • Good Teacher = Good With People • Different Relationships With Each Student: Loving, Aloof, Friendly, Tumultuous • Good Relationship Makes up for Bad Practices • Relationships More Important Than Curriculum
Benefits of Relationships to Students	<ul style="list-style-type: none"> • Good Relationship = Not Letting Students Give up on Themselves • Allowing Students to Vent • Relationship May Help Students Keep Trying in Spite of Frustration • Students Work Harder When They Have Good Relationships With Teachers • Using Relationship to Engage Student in Learning • Honest Talk With Students • Having Hard Conversations With Students • Using Relationships to Keep Students From “Jumping off a Cliff” (Keep Trying) • Relationships Help Students Overcome Hardships

Table 2-2. Continued

Original Codes	Final Codes
Example of Relationships: Successful	<ul style="list-style-type: none"> • Speak “Like a Mother” to Student About Smoking Pot • Telling Student Not to Miss More School and to Graduate • Knowing Student’s Family • Student Sharing Personal Writing With Teacher • Understanding Kid’s Sense of Humor • Getting to Know Students Better • Building Trust and Having Honest Conversations • Washing Kid’s Clothes; Making Sure Kid Has ID so He Doesn’t Get in Trouble • Honest Conversations About Student Sexual Identity • Letting Kids Know You Don’t Hold a Grudge • Working Out Ways for Students to Vent Anger Without Getting in Trouble • Encouraging Student After He Came Out as Gay • Seeing Progress With Student: Angry to Being Able to Joke and Talk • Seeing Progress with Student: Getting Student to Smile • Talking With Students About Careers • Knowing Student Interests and Conversing About Them

As I began to develop more codes, I noted how certain codes were related and began to develop themes (Bazeley, 2013; Dana & Yendol-Hoppey, 2014). I provide an example of developing themes along with their descriptive codes and data samples in Table 2-3.

Table 2-3. Theme development sample: “Successful Relationships: Description”

Data Sample	Final Codes	Theme
You have to be real with these kids, period. If they think you're BS-sing them, they're going to know. They don't like that. They think they've heard it all before kind of, they have this attitude like I've seen you're just another authority figure with a tie. You kind of have to get away from that. If you're trying to create a student/teacher relationship, professional relationship, you kind of have to not play the role that they're so used to. You kind of have to be a little more laid back, be a little more permissive, be a little more understanding, be less rigid.	Be Real with Students	Teachers build successful relationships by relating to their students through honest talk.
When they come to me, they know. I can say, "You should do this, you should do that", and they know, "Okay, she cares about me. She's not talking to me in a condescending way. She tells me 'I want you to graduate'. She tells me 'You only have this and this to do, and you know you'll graduate'."	Caring Talk, Not Condescending	
As I was describing briefly, the types of relationships that teachers have with students that make the greatest impact, in my opinion, are open, honest, trustworthy, and supportive. I was greatly impacted by a PD that I attended years ago. What they said was cliché, but true: “Students won’t care what you know until they know you care.”	Open, Honest, Trustworthy, and Supportive	

Table 2-3. Continued

Data Sample	Final Codes	Theme
<p>You just have to watch what you say, and your tone ... If you know somebody's having a bad day, if they have their head down, maybe go over and don't just automatically jump on them. "Hold your head up, and do this." Maybe try to find out what's wrong. "Is there anything I can do? I understand this and this and this is going on, but you know we have stuff that we need to get done." If you come at them that way instead of just, "Okay, you know, sit up", I think some people do that instead of trying to find out what's really going on. Instead of, they may already be feeling two feet high, and you're going to push them down another foot. Just totally shut them down and totally turn them against you.</p>	<p>Find Out What's Going On When Students Misbehave</p>	<p>Teachers build successful relationships by getting to know and understand their students.</p>
<p>I really took it upon myself . . . to get to know [the student] better so I could help, if it was necessary, to help him navigate here because, fortunately, we didn't have any students that had come back that knew she is now a he, though the discussions go on. I've had to nix a few of them from time to time. I really think for all of us, really, first of all, getting to know him as this really kind, caring person that we did not see the first time, and the fact that we really wanted to understand and help him be successful here so that maybe he could be successful away from here.</p>	<p>Getting To Know Students Better</p>	<p>Teachers build successful relationships by getting to know and understand their students.</p>

Understanding Teachers' Perceptions of Their Relationships with Students

Using the literature as a foundation, I first examined our team members' perceptions of student-teacher relationships. The literature suggested that teachers' relationships with students are of paramount importance in creating trauma-informed practices (McHugh et al., 2013; Morgan et al., 2015). Indeed, the relationships with caring adults have been shown to mitigate the effects of trauma in students' lives, and teachers should take care to examine how their own behavior influences these relationships (Kennedy, 2008; O'Neill et al., 2010). To assess how the PD may have impacted teachers' relationships with students, I examined how teachers initially defined and described their relationships with students in the classroom.

In my initial coding, I used broad codes such as Importance of Relationships for Teachers, Importance of Relationships for Students, Benefits of Relationships to Teachers, Benefits of Relationships to Students, Successful Relationships: Description, Unsuccessful

Relationships: Description, Examples of Relationships: Successful, and Examples of Relationships: Unsuccessful. As I examined this list closely, I reflected in my researcher's journal that these categories were not specific enough to answer my first research question. As I read through the data that I had coded, I found similarities in the data that I coded Successful Relationships: Description, and Examples of Relationships: Successful. Furthermore, with just the original codes, I could not understand specifically how we described successful relationships, so more specific coding was needed. In response, I isolated all the data that I had coded about relationships and recoded it with more descriptive codes. For instance, under data originally coded Successful Relationships: Description, I added more descriptive codes such as Be Real with Students, Caring Talk, Not Condescending, and Open, Honest, Trustworthy, Supportive. After this second round of coding, I read through the descriptive codes and categorized them into emerging themes. Some of my emerging themes under Successful Relationships: Description included "Teachers build successful relationships by relating to their students through honest talk" and "Teachers build successful relationships by getting to know and understand students." As I continued to analyze my data, I refined my emerging themes looking for evidence in my data to answer my research questions.

Understanding Teachers' Perceptions of How Trauma Impacts Students

After considering our perceptions of student-teacher relationships, I examined our perceptions of the impact of trauma on students and of our roles as teachers in combatting that trauma. According to the literature on trauma-informed care, teachers must understand the need for changing their practices, and this understanding comes through a realization of trauma's impact on students (Baweja et al., 2016; Chafouleas et al., 2016; Morgan et al., 2015). To assess how teachers responded to the information about trauma, I looked for evidence of teachers articulating the effects of trauma on students in the interviews, the work sessions, and in my own

personal journal, and I examined how that understanding transformed throughout the sessions. Additionally, I searched for instances of teachers relating student behavior to the trauma students had experienced. Finally, I sought evidence that teachers were beginning to reflect upon their individual role or the school's role in combatting trauma.

Similar to the data on relationships, I began with a set of broad codes. Some of my initial codes included Trauma Recognition: Understanding, Trauma Recognition: Physical, Psychological, and Emotional Effects in the Classroom, Trauma Recognition: Social Effects in the Classroom, and Teacher Classroom Response to Trauma. After comparing my coding to my research questions, I reflected in my researcher's journal that these codes did not answer my second research question about trauma. Again, I isolated all the data that I had labeled with any of the trauma-related codes, and I recoded the data with more descriptive codes. For instance, under data originally coded Trauma Recognition: Understanding, I added codes for types of trauma we recognized such as Abuse, Neglect, and Poverty. I also distinguished recognizing the trauma from our recognition of the risk factors of trauma, which included codes such as Self-Esteem Issues, Drug Abuse Issues, Mental Health Issues, Gang Affiliation, and Expulsion. After recoding my data, I again reorganized the new codes into emerging themes. These emerging themes, however, still did not answer my research question about trauma since these codes were mostly from my initial interviews.

Reflecting again in my researcher's journal, I decided to reexamine the rest of my data set for a greater understanding of how our thinking on trauma developed over the course of the PD. I decided to re-examine some of the data that I had previously coded as Trauma-Informed Practices: Tensions, Trauma-Informed Practices: Specific Ideas, Trauma-Informed Practices: Learning from PD. Some examples of the more descriptive coding from this set of data included

the following: Teachers Communicating about Student Trauma and How Teachers Should React, Relationships Make the Difference for Students, and How My Behavior Affects Student Behavior. After recoding data about trauma, I identified more specific themes including “Teachers gain more awareness of trauma and its impact on behaviors in the classroom”; “Teachers gain more awareness of how relationships with students can counteract the trauma they experienced”; and “Teachers learn that specific strategies can help build relationships and reduce the impact of trauma.” As with the data about student-teacher relationships, I refined these emerging themes through more analysis using a similar process of rereading data for evidence to answer the research questions and reorganizing codes until I had fully answered my research question about trauma.

Examining the Impact on School Policy and Teacher Practice

I also explored evidence that teachers were in the process of changing their individual practices and collectively changing school policies. In order to identify these changes, I looked for instances of teachers talking about how they either intended to change their practices or how they had changed their practices due to the training. Specifically, I searched for examples of teachers’ critical reflection on how current practices may or may not have been working and which actions needed to be taken to correct it. In addition to teachers’ mentions of individual practices, I looked for instances of teachers discussing how the program practices should have changed due to the training.

As in the previous categories, I began with broad categories when coding my data. Some of the broad categories regarding practices included the following: Classroom Practices: Environment, Classroom Practices: Specific Strategies, Classroom Practices: Discipline, School Practices: Structures, and School Environment: Safe Place. Repeating the process used with other codes as described above, I isolated all data coded in practice/program-related codes and

recoded the data with more descriptive codes. For instance, under the code School Practices: Structures, I added the following emerging codes: Need for More Funding, Lack of Home Visits, Lack of Support from Administration, Intake Interviews, and Need for Extracurricular Activities. Furthermore, after examining all the new descriptive data, I noted in my researcher's journal that I needed to examine how these practices might have changed throughout the PD sessions, so I color coded the emerging codes according to when the data occurred: before PD, during one of the PD sessions, and after PD. After reorganizing the data chronologically, I grouped similar codes together and reread the raw data from each of these groups to see if there were patterns within the groups. As I reread the data, I used these patterns to create themes about the data. Some emerging themes included the following: "Teachers see the need for strategies to use in relationship building with students"; "Teachers see the need to learn strategies to address trauma"; and "Teachers experienced both personal and structural challenges to implementing strategies."

Deficit Thinking

Throughout my data analysis process, I also used Valencia's (2002, 2010) theory to examine the data for evidence of teachers' deficit thinking about their students. Regarding relationships, I noted whether teachers blamed the student behaviors on students' families or "cultures" or whether teachers recognized how society impacts student behaviors and achievement. With regard to trauma, I examined whether or not teachers identified students' abilities to be resilient and to recover from trauma and succeed. Concerning school policies and teacher practices, I looked for evidence of how teachers described their own behaviors in the classroom or overall school policies that needed to change.

During my data analysis, I coded some data specifically as deficit thinking. Some of these codes included the following: Trauma: Deficit Thinking, Trauma: Strengths Thinking, and

Trauma: Recognizing Inequities. However, my recognition of some of my colleagues' and my own deficit thinking did not come until I had reorganized the data and begun to develop my themes. For instance, I had coded some of the data as Trauma-Informed Care: Tensions because we expressed that we were struggling with how to implement a strategy or a concept from our PD. After an initial analysis of the data, it became apparent that the struggle was really with deficit thinking rather than simply implementing a strategy. One example of this occurred when Mr. N expressed his concern about how students might destroy some of the creative work that we were going to display in the hallways. Instead of struggling with how to implement the new practice, Mr. N was struggling with judging our students by their past behaviors. As I read the data along with my initial themes, I looked for evidence of deficit thinking that might have been hidden in my coding and initial analysis process.

Transformative Learning

Finally, after coding and analyzing my data, I used Mezirow's (1978, 1997, 2001) transformative learning theory to explore how our beliefs and actions shifted throughout the PD. I examined evidence that we moved through three stages: acknowledging our assumptions through critical reflection, engaging in critical discourse with colleagues, and changing assumptions through actions. First, I used data from our initial interviews to examine our critical reflection on our belief system. Second, I examined evidence of critical dialogue among the teachers as we participated in our PD discussions. I looked for instances of us challenging each other's thinking, examining new evidence together, or affirming others in a new direction of thinking. To assess any transformation that we made throughout the PD, I considered evidence of action in the action plan and final interviews.

In my analysis, I did not code data specifically for transformative learning. After I had coded my data and I had reorganized the data chronologically, I looked for evidence that

teachers' thoughts and actions changed throughout the PD. I looked for similar codes from our initial interviews, the PD discussions, and the final interviews. For instance, I noted that throughout the PD teachers changed the way they talked about trauma. Before the PD, we were able to explain the hardships that students faced. Throughout the PD, we began to use the terminology of ACEs and were better able to connect our students' challenging behaviors to trauma. By the end of the sessions, we understood that the effects of trauma could be reversed and that we as teachers could be part of the solution. I continued analyzing codes to show any transformations we made in the three main sections of my analysis framework: relationships, trauma, and practices and policies.

Researcher Positionality

When considering my positionality in this study, I aimed to consciously acknowledge my values, beliefs, relationships, and social position, all of which influenced how I analyzed and interpreted my data (Creswell, 2013; Ortlip, 2008). First, I remained aware of my position as an insider/outsider and a full participant observer. In this study, I was a teacher, researcher, PD planner, and a team member. I anticipated some inherent tension in managing all these roles. As a teacher and a member of my team, I worked alongside the other teachers in my program. My working relationship in these roles was one of a colleague who had shared responsibility and ownership in building the program with the three other teachers in the study. As a PD planner and researcher, I was in charge of scheduling the PD alongside my administrators. As I managed all of my roles, I noted how the differing power dynamics may have influenced the study. In my reflections in my researcher's journal, I found that I struggled to schedule the PD since I was a colleague and not an administrator and could not compel fellow colleagues to attend. Furthermore, I had difficulty getting my colleagues to respond to an email discussion chain.

While I had difficulty in scheduling and convincing my colleagues of the importance of the PD, I noted in my reflections that we conversed easily during our discussions.

Second, I remained aware of my relationships with the other teachers in the study and how those relationships might have influenced the data collection process. In addition to all my roles in the study, I had developed professional and personal relationships with all of the participants. Since our program had only four teachers, I worked closely with my colleagues. Three of us ate lunch together every day, communicated often, and had developed personal friendships. Professionally, all four of us worked together to make decisions for our program often without administrator influence. My personal and professional influence may have either hindered or facilitated the interview process. My participants may have given the answers they believed I wanted to hear rather than being completely honest since they wanted to help me. However, I believe given the care that I gave to my data collection process that my close relationships with them allowed them to be more candid about their thoughts than they would have been with an outsider.

I also analyzed the values, beliefs, and thought processes that brought me to this study. My teaching background and my educational training influenced my values and beliefs. At the time of this study, I had taught for thirteen years, four years in a traditional high school as an English teacher, and nine years in a non-traditional alternative school as a math teacher. For the two previous years, I had split my time between the non-traditional school as a math teacher and the disciplinary alternative school as an English teacher. During both my time in the traditional school and my time at the two alternative schools, I worked with students who had been marginalized. I personally believed that developing caring, trusting relationships with students had to occur first before any other learning could take place, and I was motivated by that belief

to pursue an approach such as trauma-informed care as a means to understand my students and to inform my work in the classroom. Using my belief system, I sought to influence other teachers' perspectives about the importance of caring relationships with students.

Finally, I acknowledged my social position and its potential influence on my study. Remaining aware of my social positioning was particularly important for me during this study since I was a White, female, middle class teacher whose students were overwhelmingly young Black teenagers who lived in poverty. While most of my research was conducted with teachers, implementing trauma-informed care into our program would greatly affect our students. Furthermore, I had to be aware of my position as a White teacher in charge of PD who had a close working relationship with the other two White teachers and how racial dynamics might have impacted my relationship with our one Black teacher. During my study, our one Black teacher did not participate in two of the sessions and voiced opposing opinions to some of the ideas we wanted to implement. While I sought her input and valued her thoughts, I realized that I had planned the PD with little input from her. As I analyzed my data, I kept in mind this power dynamic and how it may have influenced my findings in the study.

Enhancing Trustworthiness

In order to increase the trustworthiness of the study, I took several steps suggested by Creswell (2013). The data were triangulated through the use of interviews, journal data, discussion transcripts, and action plan artifacts. This triangulation of data provided multiple sources of information, "corroborating evidence from different sources to shed light on a theme or perspective" (Creswell, 2013, p. 251). Using these multiple data sources, I provided a thorough description of my participants, my context, and our thoughts throughout the process to give a full picture of our program and to increase the transferability of this study to readers' own contexts. That is, since I provided an in depth discussion of my context and my participants,

readers may be able to use my findings to make connections to, and inform, their own practices. For example, a teacher working in another disciplinary alternative school or on a small team of teachers may be able to use my findings about my team's interactions to inform their own team dynamics. In addition to triangulation, I worked with an advisor who debriefed both the data collection and analysis processes.

In addition to the steps above, I kept a researcher's journal as an audit trail to improve trustworthiness. According to Ortlipp (2008), journaling provides the researcher a way to "make [her] decisions, and the thinking, values, and experiences behind those decisions visible, to both [herself] and to the reader" (p. 697). Throughout the research process, I recorded my decisions, the reasoning for those decisions, and my thoughts on the data analysis process. Specifically, I journaled about the following:

- The decisions and changes that I made with data collection and analysis and why I made those decisions;
- The tensions I experienced during the data analysis process and how I resolved them;
- My questions, evolving thoughts, and organizing process for the data (Bazeley, 2013; Dana & Yendol-Hoppey, 2014).

For instance, during my data collection process, I made several decisions about data sources to add or take away to better capture the PD process. One data source I added was artifacts from the PD sessions such as notes and the action plan, which I had not originally planned to include in data collection and analysis. Additionally, I noted tension during the coding and data analysis process about the conversations that my advisor and I had about how "colorblind" my analysis was. Reflecting on the presence of this colorblindness, I decided to make changes in my coding and data analysis by looking specifically in the data for evidence of how my colleagues and I were influenced by racial tensions within the school. This reflection and change enhanced the

findings of my study and have implications for improving both my own practices and our school culture.

Summary and Overview

In this study, I examined how a team of teachers responded to series of PD sessions and engaged in critical discourse about their new learning. Using practitioner inquiry, I studied my own context and my own practice. I conducted two sets of interviews with my colleagues, one before and one after the PD. I also wrote in a personal journal to capture my own thinking before and after the PD. I recorded the three discussions that my colleagues and I had after each session. As I analyzed the data, I used a framework based on my research questions, the literature, Valencia's (2002, 2010) theory of deficit thinking, and Mezirow's (1978, 1997, 2008) theory of adult learning. My ultimate goal was to learn how my colleagues and I could better serve our students, many of whom had experienced trauma in their lives.

CHAPTER 3 FINDINGS

The purpose of my study was to understand how a team of teachers, including myself, in a disciplinary alternative school in upstate South Carolina responded to professional development on trauma that students face. In this study, I asked the following three research questions:

1. How do teachers at a disciplinary alternative school characterize their relationships with students in their classroom?
 - a) How do teachers at a disciplinary alternative school describe the importance of these relationships for themselves and for students?
2. How do teachers at a disciplinary alternative school develop an understanding of trauma and their responses to trauma while participating in PD?
 - a) How does engaging in PD on trauma further develop the teachers' thinking about their relationships with students?
3. How do teachers at a disciplinary alternative school use the new knowledge gained from PD?

During the study, a team of teachers, including myself, attended three PD sessions in which we learned about the prevalence of trauma in students' lives, the effects of trauma in our classrooms, and how to use strategies to counteract students' exposure to trauma.

The aim of my study was to trace how our understanding of trauma and the role of our relationships in combatting trauma developed as we engaged in training and critical discourse, and how we responded to this new understanding. To capture our thinking, I interviewed teachers and journaled before the PD. After each PD session, we discussed our thinking about the session and worked on an action plan. After all three sessions and the development of the action plan, I interviewed all teachers and journaled again to see if our perspectives had shifted.

During this study, I occupied the three roles of PD planner, participant, and practitioner scholar studying the implementation and outcomes of the PD. As I planned for the PD sessions, I

contacted a behavioral specialist in my district who had some expertise on trauma and how it impacts student behavior the classroom. The behavioral specialist presented the first two PD sessions. She defined trauma and described how it impacts the classroom, and she focused on how we as teachers could build resilience in our students to overcome trauma through respecting students and helping them build a positive image of their personal and cultural identities. In addition to discussing trauma, she also focused on culturally responsive teaching. We examined how our actions and behaviors in the classroom impacted students, and we learned specific strategies to use in our classrooms to build resilience.

In this findings chapter, I trace our journey through the PD as we first acknowledged our beliefs, reflected on new information presented in the PD, and began to act on the new learning. First, I report the findings from our initial interviews. I describe our beliefs about our relationships with students, our beliefs about trauma and our role in combatting it, and our tensions with forming relationships and reducing the effects trauma. Second, I explore how we became more aware of trauma and the importance of student-teacher relationships during our PD session discussions. During our discussions, we displayed an increased awareness of trauma and its impacts, the importance of positive relationships with students, and the importance of addressing student identity in building resilience. In addition to changing our mindsets towards students, we also increased our level of critical discourse and acknowledged our personal needs in the classroom. In this section, I also address individual, interpersonal, and institutional challenges we faced as we reflected upon our new learning. Finally, I examine how our action plan addressed these tensions and planned to enact trauma-informed care both in our individual classrooms as well as school-wide next year. I also discuss unresolved tensions that remained at the end of the study.

As I describe our learning process, I examine how we viewed students overall, whether we were aware of the inequities our students faced or if we had a deficit view of our students. Several types of deficit thinking were evident in our interviews and conversations. First, most of us saw our students as “at risk,” and therefore blamed poor family values and lack of motivation for students’ challenging behaviors and lack of success in school. Second, we did not see our students’ strengths, particularly when we spoke about students with whom we struggled to connect. Overall, however, we noticed inequities within our school such as lack of funding and personnel, but we did not connect them to our students’ struggles with school.

Inherent in our deficit thinking was our struggle with race in the classroom and in our interpersonal relationships. Three of us were middle class, White teachers, and the majority of our students were Black. During our conversations, our struggles with race and identity emerged. While we were open to talking about privilege, we did not address the underlying tensions that our position of power in the classroom created particularly regarding relationships with students who had experienced trauma who were of a different race. We also did not address the impact that race may have had on the power dynamics of our teacher team as well. As I described our PD journey, I embedded a discussion of how deficit thinking and race impacted our learning.

Finally, throughout the findings, I examine any transformation in our thoughts at each stage of our journey (pre-PD, during PD, and after PD) and how critical reflection and critical discourse impacted these changes. Initially, there was a disconnection between our beliefs and our actions, but as we moved through the PD and engaged in critical discourse, we became more aware of how our actions needed to change. By the end of the series of PD sessions, we showed evidence of change in our deficit views of our students through our conversations and our action

plan. However, we lacked both critical discourse and action in our response to potential racial tensions both in our teacher team and with our students.

Teacher Beliefs and Values: A Look at the Pre-PD Belief System of Teachers

Before we began our PD, I interviewed my fellow teachers and wrote in my journal to capture our beliefs about our relationships with students in the classroom, our knowledge about trauma in students' lives, and our beliefs about our role in helping students overcome trauma. The questions asked during the first interview can be found in [Appendix](#). I organized the data from our interviews into two broad themes: our beliefs about our relationships with students in the classroom and our beliefs about trauma and our role in combatting it. My findings demonstrate that before the PD we understood the importance of caring relationships with our students, recognized the qualities of these relationships with students, and exhibited basic knowledge about trauma and how to respond to it. However, we struggled with how to translate our beliefs into action with all students and expressed tensions due to a lack of knowledge about the trauma students experienced. Furthermore, deficit thinking, particularly toward our more challenging students, was embedded in our beliefs about our relationships with students.

Teacher Beliefs About Relationships with Students in the Classroom

The literature consistently demonstrated that a trusting and supportive relationship with an adult was crucial in helping students overcome trauma and build resilience. Therefore, I asked my colleagues about their beliefs about their relationships with students in the classroom while journaling about my own beliefs. In our responses we described why these relationships were important and how we defined successful relationships. Moreover, all of us mentioned struggles we experienced when developing relationships with individual students and described tensions we faced in forming caring relationships in the classroom.

Importance of student-teacher relationships

All four of us described the importance of developing supportive student-teacher relationships in the classroom. While we all described relationships as important, only two of us specifically mentioned building relationships as the most important aspect of teaching. In responding to the question, “What is the most important aspect of your work as a teacher?” I wrote in my journal:

The most important aspect of my teaching is helping students become the best that they can be whether it is being a better math or English student, learning how to study better, or learning lessons from and about life. Most important in all of this is how I treat my students, how I relate to them, and the relationships that I form with them.

Similarly, Mr. N, our science teacher answered the same initial question with the following statement:

To me, I can teach you all the science in the world. I can make it as exciting as I want to, but unless you think that I care for you as a person and that I'm genuine, I'm not being fake about it, that, to me, the most important in my job, is that relationship with the kids and building that relationship.

While the other teachers did not explicitly state that relationships were the most important aspect of their teaching, overall they viewed the relational aspect of teaching as important to both themselves and the students. Ms. J, our math teacher, stated, “I think that's the main thing. They just have to know that you care, and you want the best for them in their future.” Similarly, when asked about the most important aspect of his job, Mr. B, our history teacher, spoke about making connections with students and helping them feel safe and comfortable in the classroom.

While we believed that building relationships with students was the most important aspect of teaching, the reasons we felt relationships were important for us and for students were different. For ourselves, we felt that building relationships was important for us professionally because it helped us establish and maintain discipline. In contrast, we felt that relationships were

important to students personally and academically because of the support our relationships with them could offer.

For us professionally, trusting relationships with students were important because they helped us manage our classrooms, particularly in defusing conflicts. In his interview, Mr. N described a situation in which one student misinterpreted a joke from another student and suddenly became angry. Mr. N stepped in and separated the students, keeping the situation from escalating. When I asked why he was able to defuse that situation, Mr. N answered, “Because I’ve built a relationship with both of them.” Similarly, Ms. J stated that because she had a relationship with the students, she could reprimand students effectively: “The way that you might reprimand them ... I wouldn’t say I yell, but that tone of voice. It’s like me, I can get away with it because I have that relationship with them.” Both Mr. N and Ms. J viewed the building of caring and trusting relationships as foundational in establishing and maintaining discipline in the classroom.

Other teachers described using relationships as a way to build rapport when setting expectations in the classroom. In my first journal entry, I discussed how students followed rules in my class because of the relationship I had built with them. For instance, I reflected on how one student told Mr. B that she was never on her phone in my class like she was in other classes. I wrote in my journal that I thought that she and other students met my expectations not because I was tough or strict, but because I had developed relationships with my students alongside of setting high expectations:

I have developed a level of rapport with students that I can speak to them about my expectations that they generally listen and comply. When dealing with enforcing the rules, I try to lead with my relationships with students, setting high expectations, communicating these expectations with respect, and helping the students attain these expectations.

Likewise, Mr. B described the way he wanted students to feel when they entered the program initially as well as his classroom on a daily basis. Mr. B introduced new students as they arrived in our program, giving them their schedules and talking them through the program expectations. In his interview, Mr. B explained that these introductions were a way to set the tone for students to feel comfortable and relaxed in our program. He described his role as easing student anxiety over attending our program, which he believed would set students up to respect him as a leader.

In contrast to how we characterized relationships as important to us in establishing and maintaining discipline, we believed caring relationships were important to students academically and personally. When we demonstrated supportive relationships with students, we noticed that our students worked harder and kept going in spite of frustration that they may have had with the class. Several of us mentioned that we used our relationships to get students to work harder and to engage them in the learning. According to us teachers, caring about students was an important part of our jobs, and our students viewed teachers' maintenance of high academic expectations as a caring teacher behavior.

Similarly, we believed that supportive relationships with teachers were important to students because teachers served as trusted adult figures in their lives. During the interviews, we all demonstrated deep knowledge about students' home lives and believed that many of our students lacked an adult who was actively involved in consistently attending to students' emotional and physical needs. Since we thought students lacked a caring adult figure at home, we believed that students having teachers as caring adults in their lives was important. According to Ms. J:

They have to know you care. I think that's the main ingredient. They have to know you care. They have to know that they're not in it by themselves. Even if they don't have anybody else outside of this building, they have people here that care and want the best for them ... That aren't going to let them sit and waste their time, that

are working with them. I think that's the main thing. They just have to know that you care, and you want the best for them in their future.

In our initial interviews, we articulated beliefs that we filled this role as caring adults while also allowing students to vent when necessary and having honest talks with students. We believed that these types of relationships helped students overcome hardships in their lives.

Description of successful relationships

In addition to knowing that relationships were important, we described the types of relationships we believed were successful with students. We all expressed that we believed successful relationships were built through honest, real talk with students and through getting to know students personally. We described successful relationships through the tangible ways that we showed we care and through not giving up on students even when we had to discipline them.

First, we described successful relationships as relating to our students through honest, real talk. Several of us defined the idea of “real talk” as not being condescending but being open, honest, trustworthy, and supportive. Mr. B described real talk in this way:

You have to be real with these kids, period. If they think you're BS-ing them, they're going to know. They don't like that. They think they've heard it all before kind of, they have this attitude like I've seen you're just another authority figure with a tie. You kind of have to get away from that. If you're trying to create a student/teacher relationship, professional relationship, you kind of have to not play the role that they're so used to. You kind of have to be a little more laid back, be a little more permissive, be a little more understanding, be less rigid.

Through engaging in honest talk with students, we could share both serious moments and laughter with students. Mr. N stated that part of this honest talk comes about through finding some common thread with students and building on it. Mr. B described moments of real talk as accepting students, and he gave the example of being supportive and talking with one student about her sexual identity. Overall, to us engaging in real talk meant being able to understand the students and their perspectives and being willing to talk to them about issues affecting their lives.

We also built supportive relationships through learning about students and their lives. Mr. B stated that he did not talk as much about himself in the classroom, but that he asked students about their lives specifically to learn more about them. Mr. N mentioned how knowing a student's family and his family history helped him connect with the student. In one instance, he knew about a student whose father played college football yet died from cancer when the student was eight years old. In another instance, Mr. N built a relationship with a transgender student's parents and through that was able to build a relationship with the student. In this instance, he was able to know the student better, and understand the student's interests and sense of humor. Mr. N described his relationship with the student:

I really took it upon myself ... to get to know [the student] better so I could help, if it was necessary, to help him navigate here ... I really think for all of us, really, first of all, getting to know him as this really kind, caring person that we did not see the first time, and the fact that we really wanted to understand and help him be successful here so that maybe he could be successful away from here.

Getting to know students personally and showing an interest in them was important to us even before the PD.

To us, successful relationships meant that we demonstrated our care for students in tangible ways. For instance, Mr. B built a relationship with one young man and knew that this student often did not have clean clothes and was embarrassed that he smelled like smoke. The student's parents did not wash his clothes regularly, so Mr. B would take the student's clothes home and wash them for him. This student also did not have his student ID with him often because of his unstable home life. Mr. B kept the ID in his desk and gave it to the student every day so he did not get into trouble for not having it. In another instance, Mr. N described the extra hours that he put in after school tutoring another student in chemistry. Not only did this tutoring help the student navigate through a difficult subject, it also provided time in which Mr. N could help the student, who was a senior, figure out what he wanted to do after graduation. Mr. N

mentioned that this time was important because “I don't know whether he had that in his regular high school or not. And I don't know about what other male figures there are in his life.” In another instance, I described talking to one student who had recently come out as gay on social media and was afraid to return to his home school because of how the other students might have treated him. We talked several times and I encouraged him not only to be who he was but also to get involved with an activity such as theater, which he loved.

We also defined successful relationships through our interactions with students when they misbehaved. We believed that we should use our relationships with students to find out what was going on with them in these moments. Ms. J described how she used her relationship in discipline:

You just have to watch what you say, and your tone ... If you know somebody's having a bad day, if they have their head down, maybe go over and don't just automatically jump on them. "Hold your head up, and do this." Maybe try to find out what's wrong. "Is there anything I can do? I understand this and this and this is going on, but you know we have stuff that we need to get done." If you come at them that way instead of just, "Okay, you know, sit up", I think some people do that instead of trying to find out what's really going on. Instead of, they may already be feeling two feet high, and you're going to push them down another foot. Just totally shut them down and totally turn them against you.

In one specific instance Ms. J described “speaking like a mother” to a student about smoking pot, letting him know she disapproved and wanted him to change while not turning him in. I described in my journal an instance in which a student expressed anger and frustration inappropriately in class. Instead of disciplining the student for her mutterings and outbursts, I worked with her to find appropriate ways to vent her anger and frustration, which helped the student to not give up in my class, and which helped me to build a better relationship with her. After disciplining a student, Mr. B let the student know that he did not carry a grudge and welcomed him back into the classroom. In all these instances, we used our relationships to

engage in productive and instructive disciplinary interactions instead of simply giving punitive consequences.

Tensions and reflections about student-teacher relationships

In spite of the depth of knowledge that we demonstrated about the importance of student-teacher relationships and how these relationships should look, we expressed difficulties forming relationships with some students. We had knowledge about relationships, but we struggled with how to enact these supportive relationships. Moreover, we reflected upon our lack of knowledge about how to work with students who faced trauma in spite of our knowledge about the types of trauma students faced.

Several of us mentioned personal characteristics that inhibited us in reaching all students. Mr. N reflected that he often did not give students wait time when asking them to do something, and he could overreact quickly if a student did not respond. He noted that his own reactions often escalated situations with students. Mr. B mentioned that he could be dismissive of students who may have complained or been going through a difficult time: “I feel like you know, you need to be tough, quit whining. Sometimes that probably... has a negative impact ... I don't know why they are sleepy or not sleepy. Sometimes I can be real just ‘Suck it up, Buttercup’ kind of way.” In my journal, I noted that I do not like confrontation, that I could be inconsistent with students, and that I was not always emotionally available for the students. All of us noted specific students that we had difficulties connecting with for various reasons.

Besides our personal characteristics, we all mentioned lacking knowledge and skills to work with our students. Several of us mentioned not knowing what was going on in students’ homes or being unaware of some of the difficulties students may have been facing. We also mentioned lacking knowledge of how to deal with specific situations. For instance, Mr. N mentioned that several students had mental conditions causing them to overreact to simple

instructions and that he needed to know more strategies to work with these students. I also mentioned not knowing how to help other students understand and accept our transgender student without making the student feel uncomfortable. Overall, we had a lot of knowledge about how to conduct relationships. What we lacked was the plan, the strategies, and the actions to be successful with all students.

This disconnection between our beliefs about supportive relationships and our actions in the classroom revealed that we had some entrenched beliefs that still needed to be challenged. Some of these beliefs included deficit thinking about our students. For instance, several of us believed that students did not have a supportive adult at home while at the same time stating that we were not always aware of students' home lives. These assumptions about our students and their home lives were evidence of deficit thinking. Even though we were not completely aware of our deficit thinking, we were able to critically examine some of our actions and know that they were not ideal. We simply did not know how to change. According to Mezirow (1997), critical reflection would have been a good first step to challenging our beliefs. However, simply acknowledging them would not have been enough. We needed to gain new knowledge, participate in reflective discourse, and finally engage in action.

Examining Teacher Beliefs about Trauma and Our Role in Combatting It

In the initial interviews, I asked all teachers to describe the hardships that our students faced at home and in their personal lives. All of us described the unique sets of difficulties and hardships that our students faced. Several of us believed that our students experienced a higher rate of hardships than the typical high school population. In our responses, we described our understanding of students' backgrounds, how these backgrounds impacted student behavior in our classroom, and how we responded to students who had experienced these hardships. We all also noted tensions in working with students due to our lack of knowledge about our students'

backgrounds. Furthermore, embedded in our discussions was deficit thinking about our students and a lack of a description of student strengths.

Understanding student backgrounds

While my colleagues and I were not able to use the terminology associated with trauma and ACEs, we were able to name events in students' lives that were traumatic. In the initial interviews we named sexual, physical, and mental abuse as a sources of trauma in our students' lives. Experiencing mental abuse from parents, witnessing physical abuse between parents, observing parental substance abuse, and fighting with parents were also mentioned as sources of trauma. Teachers also noted neglect, particularly lack of needed items such as food and clean clothing, as traumatic. We noted several times that poverty was at the root of much of the trauma that students faced. At the school level, teachers also mentioned expulsion itself as a potential source of trauma. We also discussed students struggling with homophobia and racism as potential sources of trauma because of how society had responded to these students.

In addition to recognizing types of trauma, teachers were aware of the risk factors associated with trauma. That is, they recognized some of the risky behavior and side effects that students who had experienced trauma may have faced. The risk factors we noticed included doing drugs and being placed in drug treatment facilities, gang affiliation, and criminal activity that may have included incarceration. We also noted personal risk factors including emotional disorders such as depression and anxiety, low self-esteem, and difficulties with managing conflict and anger. In addition to the risk factors mentioned in the literature, we noted that expulsion from school could be a risk factor for students who had experienced trauma.

Only one of us recognized at this point the idea that re-traumatization of students could occur in our classrooms. Re-traumatization occurs when the stress and symptoms of trauma resurface due to stressful experiences that remind the individual of the initial trauma. With

regard to re-traumatization within her classroom, Ms. J stated: “You definitely don't want to do something or say something that will cause flashbacks or some kind of negative emotional reaction when you're working with them. You have to watch what you say and how you relate with them.” While Ms. J specifically identified the idea of re-traumatization, all of us needed to recognize that re-traumatization could occur due to our behaviors, the language we used with students, and how we interacted with students. Furthermore, we needed to understand that re-traumatization could occur from the behaviors of other students including how students interact with each other and how students interact with the teacher. Moving forward, we needed to understand our classroom environment and our own behaviors as having the potential for re-traumatizing students.

Recognizing effects of trauma in the classroom

Before the PD, we were also aware of the effects trauma may have had on students in the classroom. Some effects mentioned were sleeping in class due to parents being up late arguing, students not being able to calm down due to constant stress in their lives, and learned helplessness due to trauma. I wrote that students may have exhibited poor behavior due to “unmet emotional, social, and psychological needs,” and that students may have struggled with relationships within the classroom as a result of these unmet needs. In my first journal entry, I also noted that students may have misread social cues because of the conflict within their homes and may have reacted in socially unacceptable ways. Furthermore, we noticed that student transience and constant stress may also have affected academics.

While we were able to name many effects of trauma in our classrooms, we noted that we often did not know the specific trauma each student faced. Ms. J stated, “Sometimes we don't know a lot of background about them when they come in so it is important to know if they've been through any kind of trauma.” Other teachers also mentioned not knowing what type of

hardships students faced at home as a difficulty when responding to student behavior. We believed that we needed to understand if a student was “simply misbehaving” or if he was reacting to trauma in order to respond effectively. While it may have been important for us to know what kind of trauma students faced, it was not always necessary to know when responding to student misbehavior. Furthermore, we may never have known or understood the reasons behind student behavior and could never assume that a student was “simply misbehaving.” As we went through our PD on trauma, I realized that we needed to reframe how we thought about student misbehavior in general.

Another effect in the classroom mentioned by a few of us was how teachers could be traumatized by student behavior as well. Mr. B noted that student stress may have affected teachers negatively:

You could be so angry that it ruins the rest of your day because that kid didn't back down to you. Then you go home, you go, "I got this kid. His parents must be..." It affects you negatively. Yes, that's one thing. They live in conflict, so it negatively manifests itself if you bring it out in them.

During our sessions, I realized that it was important not only for teachers to realize their own behaviors and reactions to students but also to understand how student trauma may cause secondary trauma in teachers.

Understanding how to respond to trauma

In addition to recognizing the effects of trauma, we demonstrated a general understanding of how to respond. Some of the more general responses that we mentioned were to be nurturing and to be consistent with our rules and behaviors within the classroom, though we did not clarify what those meant. Some more specific responses that we mentioned were to allow students to sleep occasionally if needed, to give students food when they were hungry, and to teach students how to calm down through modeling and strategies. Both Mr. N and Mr. B specifically

mentioned that how teachers touch students was important. Mr. N noted that he would pat students on the shoulder, but one specific female student who had been raped winced at that kind of touch, so he had to adjust his behavior with her. Mr. B, on the other hand, used appropriate touch as communication: “Patting them on the back, touching's a form of communication so, ‘Good job.’ With my guys, I shake their shoulders, like, ‘Good job, man!’ that kind of thing.” Overall, most of us mentioned using strategies such as adjusting our behavior and responses based on what we knew about individual students and their backgrounds. However, we lacked proactive strategies and did not understand the part that our relationships with students in the classroom played in abating the effects of trauma.

Tensions and deficit thinking related to trauma

During the initial interviews, we demonstrated our in-depth understanding of trauma and how it could impact students in the classroom. However, we all also noted that we often did not know whether or not students had faced trauma and often did not know how to react. Some of this lack of knowledge may be attributed to not knowing students and not having supportive relationships with them. Ms. J explained in her initial interview that when she first started teaching at our school, teachers were expected to do home visits, so they knew what kinds of situations the students were facing at home. Furthermore, these visits created a way in which teachers could develop stronger, more effective relationships with parents and students. However, this practice had not been done for several years. While we all mentioned talking to parents and getting to know them as a strategy to better support the students, our knowledge remained superficial at times.

This lack of knowledge about students’ home lives may have been linked to the evidence of deficit thinking that I found in the initial interviews. Two of our teachers blamed student behavior in the classroom on poor parenting. Without more information about the trauma both

students and their parents may have been facing, teachers may have been prone to blame parents for the discipline problems that they saw in students. Furthermore, as another teacher expressed, a lack of knowledge about students may also have been linked to the willingness to give up on them.

While we demonstrated our knowledge about trauma, there was a disconnection between our beliefs and our actions. When we reflected upon our students' behaviors, we were able to recognize trauma and understand that we needed to change our own behaviors in response to student trauma. However, we lacked the knowledge to make the necessary changes. I planned PD in order for us to first gain the knowledge that we lacked, to critically reflect upon our learning through discourse with our colleagues, and to plan for action needed to transform our beliefs and practices.

The PD Process: New Thinking and Tensions

During the PD process, teachers discussed their new learning with each other after each session. Each session was guided by a set of questions I gave to my colleagues, but I allowed free discussion in order to gather genuine reactions and interactions among my fellow teachers and myself. Before we began each of our sessions, I communicated our goals of creating an action plan for our school and implementing changes within our classrooms. All four of us attended and participated in the first session. However, one of my colleagues had a family emergency immediately before the second session and was not able to join us. Furthermore, she did not watch *Paper Tigers*, and thus did not join our final discussion either.

After analyzing the data from the discussions after the PD sessions, I found evidence of increased knowledge and awareness among the three of us who participated in all sessions. The data showed evidence of increased awareness of trauma and increased knowledge about the importance of relationships in counteracting trauma, which was expected. Unexpected, however,

was learning about the importance of building a sense of identity in students, something that I did not encounter in the literature. Another unexpected finding was the increased connection and improved communication among the three teachers that participated in all sessions. Also significant was the lack of participation by one of my colleagues, the only non-White member of our teacher team, the implications of which I discuss in the findings.

Throughout this new learning process, we experienced a series of tensions and struggles both individually and institutionally. Individually, teachers felt an acute awareness of their continued lack of knowledge about trauma and its effects. Within the institution of the school, teachers struggled with the policies and practices of our school and district that may have hindered us from implementing trauma-informed care. Furthermore, we struggled with how to implement this approach in our context since we were a disciplinary alternative school with a large percentage of minority students and mostly White teachers. Our struggles with our district and with race within our school were surprising, yet vitally important, findings that were not addressed in the literature for this study.

Developing New Thinking: What We Learned

During our PD discussions, we talked about what we learned during the sessions. The data showed how we became more aware of trauma, particularly the specific effects of trauma, and began to use the terminology of ACEs. Furthermore, we became more aware of how building positive teacher-student relationships was an important part of counteracting trauma. Finally, we became more aware the importance of valuing and fostering student identity, particularly for students who may have different racial or ethnic backgrounds than us.

Deepened awareness of effects of trauma

As we went through the PD sessions, we expressed a greater awareness of trauma, particularly how it affected our students. From the first PD session until the final interviews, I

noticed a shift in the way that we spoke about trauma. During the first session discussion, several of us dismissed the need to discuss trauma and trauma's impact on student behavior. For instance, Mr. B initially challenged the idea that student behavior was related to trauma. He stated:

I don't understand why we have to look at extremes all the time to define success ... I think what I'm saying is we always try to find something like, 'Oh, well that kid. He's got [Oppositional Defiant Disorder], oh, that kid, oh, that kid,' Why can't it just be a kid that's kind of just a kid acting like a ding dong? Why does it have to mean something?

Some of my colleagues agreed with him by stating that he believed kids were simply "acting like jerks" and that it was not the job of schools to "fix" students. During this first session, I also noted a lack of the use of language regarding ACEs and trauma. While the PD leader spoke in depth about trauma, we as teachers used "trauma" only twice and we never used "ACEs" during our discussion. The focus of our discussion centered on the overall purpose of our school and helping students grow academically, behaviorally, and personally during their time with us.

After our second session, the way we began to discuss trauma changed. In our initial interviews we described how the hardships in students' lives affected their education, but we did not clearly see our role in reducing the effects of trauma. After the second PD session, however, we became more convinced of the negative impact of trauma, and we understood that we could help reduce trauma's impact on students. For instance, in contrast to his initial dismissal of the need to focus on trauma, after the second session, Mr. B stated that our role as teachers was "helping [students] recognize that they've had trauma, helping them recognize how to address that trauma, and helping them recognize that they can overcome it." We also began to critically reflect on our current practices, finding them inadequate to address trauma. Mr. N reflected that he had not done much to deal with trauma in his classroom, and that our knowledge about student trauma was inconsistent. When working with students who may have faced trauma, Mr.

N noted that he “ended up being more reactive than proactive.” We also began using the vocabulary of trauma. In the second PD session, we specifically mentioned “trauma” sixteen times, but we still did not use the term “ACEs.”

After our third PD session, we responded more emotionally and personally than we had after the previous sessions. Watching *Paper Tigers* affected us all because we related personally to the stories. Mr. N stated that after watching *Paper Tigers* all the learning on trauma “really came home.” All of us discussed how different students featured in the documentary reminded us of our own students.

Along with this emotional response came a more in depth discussion of trauma and its effects. During this session we mentioned trauma twelve times, ACEs nineteen times, and two of us discussed specific research about trauma. Additionally, we demonstrated a better understanding of the effects of trauma on a student’s brain and the physiological effects of trauma. During one discussion, we specifically talked about how the brain is affected. Mr. B described the process students go through:

Children who live in high stressor environments all the time ... a good example is you're going down the road, a car cuts you off and you have that "Whoosh" feeling. In about 20, 30 minutes, that feeling should be gone. It shouldn't be there any more and that is a fight or flight reaction to a situation. If you don't come back down, if you're a child and your brain is developing and you constantly live in that state, you never come out of it. You're always in that heightened sense of anxiety or heightened sense of fight or flight, all the time.

During this discussion, I added that students who had experienced this type of stress would be more likely to overreact to us or other students in the classroom. I also mentioned that these students might not be able to calm down, requiring us to respond differently to students who had experienced trauma. We were able to discuss this information and apply it to how our students behaved in our classrooms.

By the time we had finished our last PD session, we became more aware that the effects of trauma are not permanent. In the following conversation, both Mr. B and I explained to Mr. N that we could help change students' brains:

Mr. B: Trauma and the effects of it on the brain and how to change it. That it's not permanent.

Me: Right.

Mr. N: Oh it's not permanent?

Me: No, that's the great thing about kids in this age and at any age, our brains are changeable. You can make changes.

Mr. N: Okay.

Mr. B: You can change the brain.

Mr. N: So it's not a ... so it's a physical change in the brain?

Mr. B: Yes. An actual biological change in the brain.

Mr. N: Okay.

With the awareness that these effects are not permanent, we expressed the desire to know our roles in reversing the effects of trauma. Through our PD, we learned that building relationships and understanding student identity could combat the effects of trauma.

Developing awareness of mindsets about relationships

While our initial interviews showed that relationships with students in the classroom were important to us, we became more aware of the importance of a caring adult in students' lives, particularly for students who had experienced trauma. As we progressed through the three sessions, we challenged previous ideas that we had about relationships with students in the classroom. Specifically, we changed our mindset from one that reacted to our students to one that believed in intentionally building relationships with students, changing our judgments about

students, and beginning to value every student's individuality. We later used these emerging mindsets to plan strategies for action.

Devoting time to relationship building. Our first major mindset that needed developing was understanding that devoting classroom time to relationship-building was essential. In our initial interviews, we had all spoken about the importance of our relationships with students, but the relationships we described were reactive and incidental, not intentionally built through classroom structures and strategies. When confronted with the idea of taking class time to build relationships during the first PD session, we debated the need to devote class time to these activities. During the first PD session, Mr. B reacted to the idea of taking class time to build relationships through social-emotional learning strategies:

You cannot do all these fluffy things with them. I mean, it sounds good in a great and perfect world, but the reality is you can't. [The district office is] not looking to see. They want to see things substantial, and credits are substantial. Mitigating the trauma of stress is invisible. You can't see it.

By the last PD session, we began not only to see the importance of these strategies, but we also wrote them specifically into our action plan. In contrast to his reaction in our first session, Mr. B stated during our last session: "Supported by research, a supportive adult figure in that kid's life can be more valuable to changing the brain than just about anything else we do." In response to Mr. B's statement, I led us into a discussion about specific strategies and techniques that we could intentionally apply to our classroom practice. Our collective response was to prioritize relationship-building strategies during our school day because our mindset had shifted about the importance of taking time away from academic issues to work on student-teacher relationships.

Not judging students by their past behavior. Another relationship-based mindset we needed to develop was not to judge students based on past behavior. During the second PD session, we debated whether or not to use some of the strategies our presenter introduced. One

strategy that she suggested was using a wall in our hallway as a creative space in which students explored their identities. This wall would also be one way in which students gained ownership of our school. One of our teachers mentioned that students might tamper with or destroy the other students' work on the wall. However, through critical discourse, we pushed each other's thinking about not making assumptions about our students. Examining our assumptions about students directly impacted our action plan because we could not try any of the strategies if we were afraid that our students would ruin our plans.

As we considered our individual classroom practices, we also had to develop the mindsets of not making judgments about students based on their behavior. In initial interviews, several teachers blamed student behavior on a lack of parenting and kids "being a jerk." Through the new learning and our team's reflective discourse, we began to challenge these beliefs. In one example of how our beliefs began to shift, Mr. B stated that "we're not a system of judgment, seek the cause. Like seek the cause rather than [judge] the behavior." As we moved forward to enact trauma-informed care, fostering the mindset of not judging students was crucial to our success.

Valuing students' individuality. Finally, we developed the mindset of valuing each student individually. During our initial interviews, we all mentioned specific students with whom we personally had difficulty connecting. We decided that we should value each student individually regardless of our personal feelings about the students. After watching *Paper Tigers*, we discussed how much we enjoyed seeing how the documentary highlighted each student's individuality and that we needed to relax certain rules and enact strategies that allow our students to express their individuality. Our ultimate goal in allowing students to express their

individuality was that it would lead to students being more engaged and having better relationships with us as teachers because we would know them better.

New awareness of the importance of student identity

One significant thing we learned was that we could reduce the negative impacts of trauma through building student identity. During our first two PD sessions, the behavioral specialist from our district focused on strategies that helped build student identity and resilience in students. These strategies included giving students a creative outlet, displaying student work, celebrating small successes publically, and giving students structured time for personal talk in the classroom. The goal of these strategies was to reduce the effects of trauma through building student identity.

The behavioral specialist agreed that relationships with teachers were crucial in combatting trauma in students' lives. However, she also recognized that we may face roadblocks to achieving these kinds of relationships with students. In our second session, she addressed the roadblocks of race, class, and ethnicity. She presented ideas about culturally responsive teaching, key to which was connecting with our students through genuinely knowing them and helping them understand and appreciate their personal and cultural identities.

We decided to focus on strategies that would not only help students understand their identity but would also help us appreciate students' individual traits. In our second and third discussions, we stated that we believed that if students could appreciate their individuality and build a sense of identity they could build the confidence they needed to succeed academically and personally. During the second PD session, I stated:

Being able to see a future for yourself, being able to know who you are, and being confident in that, and building those resilience things. If we can do something with that, that will help them.

Similarly, during our third PD discussion, we were able to connect what our behavioral specialist stated about building resilience through identity to the strategies used in the documentary *Paper*

Tigers. Mr. B expressed the importance of this:

We have to have some kind of creative outlet that gives them individuality, that they can express their individuality. And I think that the result of letting them do that will be they'll be more engaged and have better relationships with us ... because we're accepting them for who they are.

Ultimately, we believed these strategies would help us appreciate students' individuality and differences. Therefore, we believed that our relationships would be better and would help us mitigate the effects of trauma in students' lives.

Improved teacher discourse

Another effect of our PD meetings was the increased engagement of the three teachers who attended all meetings. First of all, we realized the importance of team communication about students. Mr. N stated in his final interview:

I think a hugely powerful piece for us too, is because we are few, we have few students, we can talk about the kids. We have the ability to talk about what it is that's bothering this particular child. What sort of, since we're talking about trauma, trauma this child has been through?

In addition to communicating about specific trauma that a child had been through, we had been able to become more open with communicating professionally if one of us was not using best practices. Mr. N mentioned how I had let Mr. B know when I felt he was too harsh with a student, which caused Mr. B to reconsider some of his actions. While we successfully communicated before the PD, having sessions in which we talked openly to each other about our learning created better and more open communication within our teacher team.

Increased teacher self-awareness

Another surprising finding was an increase of teacher self-awareness of our own needs. Several of us mentioned throughout the interviews how we could become stressed working with

students who had faced trauma, and that our stress level may have impacted how we reacted to students. Since we became more aware of this impact, we noted that we needed some stress relief during the day as well. The creative outlets that helped us connect with students may have also reduced our stress level too. Mr. N addressed this idea:

The other piece that we're [ignoring] is how to relieve our stress during the days...I've gone home the last couple of weeks just really quite knotted. I think that those outlets will really be good for us too. And I think the fact that [Mr. B] could share with them his art, I think that will change those relationships. I'll figure out what mine is but, and again, I just think it's a great idea and I think it will make a world of difference here. Even if that was the only piece that we did, and there's many more that we need to do and want to do, but that piece right there I think is just great.

According to Mr. N, reducing teacher stress would improve both our relationships with students and teacher morale.

Struggles Identified As We Encountered New Learning

While the data from the discussion demonstrated our learning, we faced challenges enacting our new knowledge. We all struggled with our overall lack of knowledge. With our increased awareness of the effects of trauma came an increased awareness of how much we did not know. In addition to individual struggles, we noted interpersonal issues within our school and institutional obstacles that we needed to overcome in order to implement the new strategies that we learned during our training. Among these issues were a struggle with power and race, most acutely between teachers and students, but also within our teacher team as well.

Individual struggles

Individually, we struggled with our lack of knowledge and emotional tensions related to what we learned. Mentioned several times throughout our PD discussions was the fact that we did not know the specific ACEs that our students had faced, and we felt as if we lacked the skills and strategies to work with students who had faced trauma. In addition to admitting a lack of

knowledge, we felt overwhelmed by everything we had learned. During our discussions, we generated many new ideas to try, but several times one of us noted that we were doing too much and needed to focus our energy on the most important aspects of our training. Some of the institutional obstacles, including school and district policies, were out of our control. We, therefore, decided to focus on classroom- and program-level items were more feasible for us to address. However, we also debated whether we should focus on academics and getting students to work within our classrooms or on social-emotional learning and building relationships. We all wanted to do so much, but felt the pressure and limitations of time and resources. According to Mr. B:

The reality is there's only so much money and there's only so much time and that's it. You can't escape this. We can talk about it till we're blue in the face, so you have to work within the [limitations] of what you have.

We decided to limit our ideas to a few manageable yet potentially powerful strategies that we could reasonably implement, yet we still expressed concerns about the feasibility of doing it all.

Personally, some of us also felt tension about being White teachers working with mostly Black students. After watching *Paper Tigers*, the three of us in the session, all White teachers, mentioned that our school was quite different than the one in the documentary, mainly because nearly everyone in their school was White while only about 20% of our students were White. As a team, we did not discuss the implications of the race dynamic in our school further. In the last interview, Mr. B did discuss this idea with me. He stated that as a White teacher he needed to be aware of the “invisible knapsack of privilege that I use whether I know I’m using it or not, but I still need to be aware of it and admit it.” Because of his awareness of privilege, Mr. B stated that he tried to be authentic with students in discussing issues of race. However, he thought he could do little to change the impact of racism on students’ lives: “What’s one teacher actually going to do to change systemic racism?” None of the rest of our interviews or discussions broached the

topic of race in our classrooms. Not understanding how race impacted our relationships with students may have undermined the effectiveness of these relationships and may have harmed rather than helped in mitigating the effects of trauma in students' lives.

Institutional challenges

We also struggled with the logistics of implementing our school-wide priorities given the limitations of our context. We noted a lack of support in both policies and finances from our district that limited our ability to implement some of the strategies. Policies regarding when students could attend our program, which students could attend, and how the referral process worked were all beyond our control yet influenced our ability to implement some strategies that we learned. For instance, this past year we received nearly thirty new students in the last two months of school. Both district administrators and school administrators admitted new students into our program up to the week before summer break began. Having many new students so close to the end of the school year made it difficult for us to integrate new students into the program. Another limitation that we noted was how busy our school administrators could be. Neither we, nor our students, saw our administrators often, and administrators' busy schedules did not allow for them to spend time with individual students. These schedules also reflected a lack of support from our district office. In the past few years, district officials combined programs and eliminated administrator positions in order to save money, resulting in school-level administrators having less time to spend in the classroom and more time on administrative duties.

All four of us also expressed frustration with a lack of resources that we needed to implement the strategies that we learned. Specifically, the lack of time, money, and personnel may have limited the scope and depth of subsequent efforts. First, since we were an alternative school, we did not have all semester to work with students. We also only had classes from

Monday through Thursday. This four-day week severely limited the time that we had with students, so we felt the pressure to focus on academics and did not feel we had enough time to implement extra strategies in our classrooms or to take time out of the day to teach students about trauma. Furthermore, we did not have monetary resources for our school for the extra personnel that we needed. In the movie *Paper Tigers* we noticed that the school had a dedicated interventionist who visited students' homes and worked with them to address their challenging behaviors. We did not have the budget for such specialists. As we began to create our action plan, we had to figure out how to overcome these obstacles and prioritize our areas of focus for the next semester.

Interpersonal tensions

While our team worked well overall to craft the action plan, our discussions and an analysis of our interactions revealed interpersonal tensions among team members. During the first discussion, Mr. B tended to dominate the discussion, driving the agenda and asserting changes, while the rest of us tended to follow his lead. During this discussion, Ms. J said very little, and I hardly spoke until about ten minutes into the conversation. This discussion did not follow a specific protocol since I wanted to capture authentic interactions. However, I provided guiding questions and an end goal of creating an action plan. Without the structure, however, I noticed that Mr. B was off topic and dominated until I stepped in to redirect our conversation back to the guiding questions.

Noting the lack of focus during our first discussion, I provided more structure for our final two discussions. After the second session, we filled out a reflection sheet with guiding questions and used it as a basis for our discussion. After the third discussion, we brought notes from the movie regarding specific practices. I noticed that the latter two discussions were more focused and productive. Our action plan changed drastically from the initial discussion to the

second one due to the increased focus. I realized that using protocol-driven discussions made a difference both in productivity and the distribution of participation. During the last two workshops, we engaged in deeper reflective discourse regarding our current practices.

Our most noticeable interpersonal struggle, however, was the lack of participation by one of my colleagues. Ms. J did not attend the last two workshops, and she did not speak up much in the first discussion. Mr. B, Mr. N, and I all expressed the desire to include Ms. J more in the discussion, but Mr. B asserted several times that this was typical of her to not participate since he had worked with her the longest. While Mr. N and I contributed our thoughts in the discussion, ultimately Mr. B drove the policy and decisions included in the action plan. While Mr. B led the team overall, I operated behind the scenes to influence his thinking about trauma and how our program needed to change. Additionally, I attempted to give Ms. J a chance to express her opinion on the action plan and to be included in the process through a one-on-one discussion to get her input before we began enacting the plan. The lack of participation by Ms. J was particularly notable because she was the only Black teacher on our team, and she often did not participate socially with the rest of us either. Although Mr. B dismissed her non-participation as part of her personality, to move forward as a team, we needed to consider how the racial dynamics of our team influenced not only her participation but also our relationship with her and how we included her in the team's decision-making.

Although Ms. J was not in the sessions, during individual interviews she expressed differences of opinion from some of our team responses. In our discussion in the third PD session, Mr. B adamantly expressed that he would not do home visits because it was not part of his job. In contrast, Ms. J felt that conducting home visits was a necessary way to learn about students and expressed regret that we no longer did them. In the last two PD sessions all three of

us stated that we believed that dress code inhibited student individuality and should be eliminated. However, Ms. J said that she believed dress code was essential to maintaining discipline in the classroom and that we did not need to get rid of it. Although she expressed her opinions, she ended up deferring to our decisions.

During our last two PD discussions, several of us mentioned frustration with Ms. J not attending and not participating as much as we had in developing our plans. Although we never discussed it together, moving forward, it would be important to consider how race impacted the relationships among our staff members. To create a fully inclusive teaching team, we needed to understand and value Ms. J's perspective and her opinions about decisions we collectively made.

Planning for Action: Overcoming Tensions and Developing New Thinking

After the PD sessions and the ensuing discussions, I interviewed my colleagues a second time and journaled to see if our understandings of trauma and relationships had changed. During the second interview, I sought to understand my colleagues' changing thoughts as well as any actions that we had taken in the classroom in response to what we had learned. I found evidence that we had increased awareness about the importance of supportive relationships with students, but that our immediate actions in the classroom had changed little.

Another development from the sessions was an action plan for the following school year. Since the PD occurred at the end of a school year, many of the school-wide strategies could not be enacted until the following year. I found evidence in the action plan that we desired to create a more trauma-informed school through specific strategies to build relationships and reduce student trauma. We also planned to develop our understanding of trauma next semester through more professional learning and better relationships between students and teachers.

Applying Teachers' Understanding of Trauma and Relationships in the Classroom

In the final interviews, we demonstrated our learning from the PD through a better personal understanding about trauma and how our relationships with students in the classroom impacted student trauma. In addition to simply learning about trauma and its effects, we demonstrated in both our final interviews and our action plan that we understood the importance of relationship building. Not only did we explicitly express the importance of relationships in reducing trauma, we also intentionally created opportunities to work on relationship building in our school and in our classrooms.

Developing our thinking about trauma

Teachers expressed a deeper understanding of trauma and how it affected their classrooms. Specifically, teachers learned the basic vocabulary of Adverse Childhood Experiences (ACEs) and how trauma impacted the brain. Most importantly, we learned that negative neurological impacts of trauma on students' brains could be lessened, and that we could help in that process. In his final interview, Mr. B stated, "I have changed in that I think you can alleviate some of the damage or stressors caused by trauma if you know strategies, if you know what to do and how to do it." In addition to knowing that the effects of trauma could be reduced, we became aware of the importance of supportive student-teacher relationships in this process. Mr. B specifically mentioned in his final interview that, "a consistent, reliable adult figure in their life is one of the major things that can reduce the effects of trauma in a child's life." This increased awareness of the importance of student-teacher relationships reshaped how we began to think about our relationships with students in the classroom, resulting in small action steps that we began to take to address how we developed relationships.

Developing our thinking about relationships with students

We began to believe that better relationships with our students had the potential to shape student outcomes and that these relationships had a role in our own feelings of fulfillment as well. In comparison with the initial interviews, we expressed a deeper understanding of the importance of supportive relationships with our students and our role in combatting trauma. While we clearly identified the importance of relationships in our initial interviews, the language we used in the final interviews demonstrated a stronger belief in the power of relationships in the classroom. In his first interview, Mr. B said that the most important aspect of teaching was connecting with students. In his final interview his language was stronger: “If relationships is the sun, academics is the planets that revolve around the sun, in my opinion. Relationships is the thing that fuels everything else.” As in our initial interviews, we all still described the importance of supportive relationships to us as simply professional; we used relationships to manage our classrooms. However, in our final interviews, we described relationships as personal as well; building relationships was part of the purpose that we found in teaching. Ms. J stated that because she had been able to build relationships with students, she did not dread coming to work and instead enjoyed it. These beliefs evolved from the understanding of the central role that these relationships play in combatting trauma and helping students succeed in our classrooms.

In addition to our developing thoughts about relationships, we attempted to enact better relationships. Mr. B noted in his earlier interviews that one of his weaknesses was being dismissive of students who were grappling with emotions during class, so he tried to be more open with students. In his final interview, he reflected that he had overused structure in his classroom because it helped him stay organized and focused, but that he had “learned to soften that a little bit” allowing for impromptu conversations and students’ free movement around the

classroom. Mr. N stated specifically that the PD and the movie *Paper Tigers* gave him better ideas about how to handle a student who was going through a difficult time:

It gave me some idea of how to approach [this student]. How much to push him to get work done. How much to back off and let him stew through it a little bit. And really how to handle that particular situation.

In my journal I noted that the PD made me try to be more vulnerable with my students in order to build relationships with them. I wrote in my journal, “I’m trying to take time each day to speak to each student. I try to allow myself to be a little more vulnerable, more goofy, and more real with students.” All of us became more reflective of our relationships with students, realizing that we needed to do more to develop relationships with all students.

While these changes may have been small, we made progress in improving our relationships with students and working on our weaknesses as teachers. These small actions demonstrated a slight, yet meaningful shift in our thinking. Additionally, we became more reflective of our own practices and behaviors. As indicated in the learning from our discussions, our awareness shifted, and in turn our beliefs started to change as we took actions based on our reflections of our current practices. Since we knew that we needed more specific strategies, we developed an action plan to help us intentionally develop more supportive relationships and purposefully give us more time to reflect on our practices as a team.

Creating an Action Plan Based on the PD

As we reflected upon the learning from our PD sessions, we created an action plan to address the challenges we mentioned during our discussions. First, we contended with the institutional tensions we felt with our program by changing policies and procedures in our school as a whole. Second, we tackled classroom tensions through focusing on student strengths rather than their deficits. Finally, we confronted tensions in our interpersonal relationships through intentionally developing time for us to reflect on our team practices.

Addressing institutional tensions through changing school policies

Many of the institutional tensions that we mentioned in our discussions were out of our control as teachers. Although we wanted to advocate for our students and our program at the district level, that was a long-term goal that we decided to put on hold in favor of short-term goals that we could enact immediately. We could, however, make change on a school and classroom level by removing barriers for students and setting up intentional structures to help foster relationships and combat trauma.

School-level supports for relationship building. One critical reflection from our discussions was that we were not intentional about developing relationships with students. We decided to develop school-wide practices to help foster these relationships. In our initial interviews, we all named students with whom we had difficulty forming relationships. As we went through our PD, we gained the knowledge about the need to get to know all students, and we challenged each other to rethink our relationships with students in the classroom. In response, we advocated with our administration for a specified time during the day for us to focus on students rather than academics. Structured into the day, this activity block would give us the chance to get to know students personally as well as help us enact specific strategies that we learned during the PD.

During this new activity time, both teachers and students would produce artwork on a creative space on the wall in the hallway that would help all of us appreciate our identities and learn about each other. This wall would have three spaces. First, “What’s behind you?” would include words or pictures to represent our life events and struggles we had overcome. Second, “What’s in front of you?” would include words or pictures to represent what we wanted for our lives in the future. Third, “Who are you now?” would include pictures or words that represent who we were at that moment, or our identity. Both teachers and students would create a space for

themselves on the wall, and teachers would help students articulate their identities. In connection with the wall art, students and teachers would use this block to learn about themselves through meditation and yoga techniques, special speakers, and peace circles. This block would also include activities such as planting gardens, working and hiking on our nature trail, or learning how to paint or write alongside a teacher.

Another challenge to relationship building that emerged from our discussions was the difficulty in getting to know students who transferred to us in the middle of the semester. Since we could not control when students arrived, we decided to create structures that were more welcoming for new students and that allowed us to get to know new students. In order to solve this problem, we planned to put together an introductory packet for students to complete before they started any schoolwork. Included in this packet would be the ACEs survey, interview protocols for students to do with each teacher, and questionnaires about student interests. Furthermore, we planned to have structured conversations with each student to identify individual strengths or needs the student may have had.

While we still had some unresolved tensions regarding the structure of the school and relationships, our action plan indicated that we understood that relationships would not be built incidentally. Instead of reacting to students, we planned to build relationships proactively and to learn about every student. We decided to build strategic time into each school day to develop relationships, which is key to trauma-informed practices in schools.

School-level responses to trauma learning. Another consistent tension that arose during the PD sessions was a need for more training on trauma. We all reflected upon not only our lack of knowledge about the trauma students faced but also our lack of understanding about how to respond to the trauma within our own classrooms. However, we did not have the personnel or

financial resources to continue our training. In spite of these roadblocks, we decided that we wanted to take it upon ourselves to learn more about trauma. Therefore, we planned to study and develop training for ourselves. As discussed in the final interview, Mr. B planned to do his internship for administration the following semester. As part of this internship, he decided to provide monthly PD centered on ACEs and specific strategies to respond to ACEs in students' lives.

Additionally, we planned school-wide strategies to help students with the trauma that they faced. In addition to learning about trauma ourselves, we planned on teaching our students explicitly about trauma and how it may have impacted their lives. Embedded into the teaching about trauma would be instruction regarding how to combat the negative impacts of trauma in students' own lives. As mentioned earlier, we planned an activity block to be built into our schedule to allow students to engage in relationship-building activities. While we would be building relationships during this block, we would also be engaging in stress-reducing activities that would help our students learn how to cope with trauma.

During our PD sessions, we expressed tensions we faced regarding the structure of the day, the required, yet tedious online curriculum, and the lack of time to devote to building relationships. While not yet enacted at the end of the study, teachers expressed excitement and strong commitment to seeing the changes take place. The action plan illustrated our evolving beliefs about the central role that supportive relationships with students have in combatting trauma.

Addressing classroom tensions by addressing deficit thinking. Besides planning for the school-wide structural changes, we decided to implement a few strategies in our classrooms as well. In response to realizing the pervasiveness and negative impacts of our deficit thinking, I

suggested that we work to see the positive in our students and to celebrate their strengths. In our action plan, we decided that we wanted to celebrate the small successes that students had. As we mentioned in our discussions, we already did this to a certain extent with our student of the month program and perfect attendance incentives. We planned to expand these programs to include celebrating student success with individual goals in the classroom and with completing credits while at our school.

Furthermore, we responded to our old ways of thinking by planning to get to know our students better in the classroom. One specific strategy we decided to use was having structured time for students and teachers to talk within the classroom. During the first five minutes of each class period, every teacher would choose from a selection of topics to discuss. For instance, one teacher may have shared discuss with students how they can overcome struggles in their lives. Another teacher may have had students set goals and share how they planned to accomplish them. Another may have had all students share positive things happening in their lives. We would communicate as teachers to be sure that we did not duplicate topics. The overall goal of this sharing time would be to get to know students better individually and to help us reframe our thinking about students into a strengths-based mindset.

While we had developed strategies to help us form better relationships, our action plan did not explicitly address issues of racial relations within the school. Our plans for identity-building activities with students, particularly the wall and activity time, were based on ideas from our PD presenter. However, since she was not able to fully train us on the ideas due to a lack of time, the activity times became more about us building relationships and getting to know and value students individually. While relationship building was important, moving forward we

needed to be more explicit in how we addressed racial relations in our school. Addressing racial relations is key to addressing deficit thinking.

Addressing interpersonal relationships

In our discussions, we realized the value of having regular meetings in which we challenged each other's thoughts and discussed school issues. However, I pointed out that sometimes during our discussions we lacked focus and did not participate equally. To continue our critical discourse and distribute participation, we planned structural changes to teacher training and meetings. We decided to set aside two Fridays per month for teachers to meet. During one of the meetings each month, we would continue our PD on trauma. In both meetings each month, we would work collaboratively to discuss students and how we were implementing our new practices using a teacher-made protocol. In his last interview, Mr. B described his vision for these meetings:

Not just like me personally as an individual [reflecting, but] as a collective group of teachers, where we come together each month ... and discuss students individually and look at behaviors, see if there's trends, see if you can make correlations or connections, and kind of look at the kid as an individual really, really under a microscope, instead of looking at it as the program.

Adding a protocol to our meetings would not only keep us focused on the topic but also address the distribution of participation by the teachers, ensuring that all teachers had a voice.

Ultimately, we did not address any ways in which race may have played a role in our interpersonal relationships. While some of us reflected upon our roles as White teachers in a school with predominately Black students, we remained blind to how race could factor into the power relationships within our teacher team interpersonally. Moving forward, we needed to find ways to not only address racial inequity within our school but also among our staff.

Conclusion

In this chapter, I described the learning process along with its challenges that my colleagues and I faced when learning about trauma, its impact on our students, and the role of supportive relationships in helping students overcome trauma. Throughout this process, my colleagues and I transformed our ways of thinking about our relationships in small, yet important ways through reflection on our beliefs, critical discourse, and action. I found that initially we believed in supportive relationships and were able to enact them, but our actions indicated that we still engaged in deficit thinking toward our students, which impacted our ability to have supportive relationships with all students. Our relationships tended to be reactive instead of proactive. Furthermore, we articulated difficulty in reacting to students who had experienced trauma. As we went through the PD, I found that critical discourse pushed us to reexamine our thinking particularly in: our awareness of trauma and its effects; the importance of supportive relationships for all; the importance of developing student identity; the importance of interpersonal communication; and the value of teacher self-awareness. At the same time, we encountered tensions at the individual, interpersonal, and institutional levels. As we reflected upon our developing thinking and the tensions we identified, we created an action plan to address the tensions and to enact our developing ways of thinking.

CHAPTER 4 DISCUSSION AND IMPLICATIONS

As a teacher at a disciplinary alternative school, I recognized the prevalence of trauma in the lives of my students and the impacts trauma had on their school experience. While we as teachers understood that our students faced hardships, we often felt unable and unqualified to help mitigate the effects of those hardships in the classroom. In order to understand how my team and I could better respond to trauma, I organized PD for myself and the other teachers on my team with the goal of collectively creating an action plan for our school. The purpose of this study was to understand how our team at a disciplinary alternative school interpreted and responded to the knowledge about trauma in students' lives.

For this study, I gathered data from semi-structured interviews with my colleagues both before and after the PD, from my personal journal, from discussions among the teachers after each session, and from the various action plan drafts. I sought to answer the following research questions:

1. How do teachers at a disciplinary alternative school characterize their relationships with students in their classroom?
 - a) How do teachers at a disciplinary alternative school describe the importance of these relationships for themselves and for students?
2. How do teachers at a disciplinary alternative school develop an understanding of trauma and their responses to trauma while participating in PD?
 - a) How does engaging in PD on trauma further develop the teachers' thinking about their relationships with students?
3. How do teachers at a disciplinary alternative school use the new knowledge gained from PD?

Since I was both a participant on the teacher team and a researcher, my study was grounded in practitioner inquiry. In practitioner inquiry, teachers study their own context through posing a question or a wondering based on a problem of practice (Dana & Yendol-Hoppey,

2014). For this study, the problem of practice was our lack of understanding of students' experiences with trauma and how that impacted teaching and learning in our classrooms. We needed to understand how to better connect with our students and how to approach students who had faced trauma. As we learned more about trauma, we all reflected upon our learning and engaged in action planning for the following semester.

I explored our journey from before the PD through the creation of our action plan. Before our PD, I found that while we believed in supportive, caring relationships and had knowledge about trauma, we had trouble responding to trauma and caring for all students. During the PD, we deepened our awareness of the effects of trauma, the importance of relationships, the importance of student identity, the importance of interpersonal communication, and the value of teacher self-awareness. At the same time, we faced challenges with our own thinking, with our interpersonal relationships, and with the institutions that limited our ability to implement changes. Finally, after our PD sessions, we used an action plan to address each of these challenges through strategies learned in our PD.

Discussion

Changing Frames of Reference

Throughout my findings, I used Mezirow's (1978, 1997, 2001) transformative learning theory to describe our learning process as we went through PD on trauma-informed care. Mezirow described the process that adult learners follow as they change their belief system, or frame of reference. All individuals have a set of beliefs to which they ascribe. These beliefs, which individuals accept unconsciously, are products of socialization. If adults are to change these frames of reference, they must first become aware of their belief system and how they acquired these beliefs. Then they must be able to reflect critically on that belief system in light of

new evidence and engage in challenging discourse with others that confirm or deny the evidence. Finally, they must take action based on their new frame of reference.

In my study, I found Mezirow's (1978, 1997, 2001) theory a useful description for the pattern of teacher learning I observed. At the beginning of the study, I had teachers reflect on their beliefs about their relationships with students and how these beliefs guided their thinking and actions in the classroom. I found that teachers valued supportive, caring relationships, yet sometimes we chose which students we supported with our relationships. I also found substantial knowledge about the trauma that our students had faced; however, we often did not connect the trauma to student behavior in the classroom and did not know how to enact our roles in reducing the effects of trauma. As we learned more about trauma and relationships, we realized that we needed to be more intentional about building relationships with all students, and we became more aware that the effects of trauma could be reduced and that we as teachers could help that process. During the PD sessions, we had time to both reflect upon and discuss the ways in which this new knowledge challenged our existing practice. This critical discourse shaped our thinking and spurred us to action. While we did not make drastic changes, the shifts in our perceptions about relationships and trauma helped us draft a plan to build relationships intentionally and combat trauma purposefully.

This study demonstrated that allowing time for critical discourse among teachers and planning for action could shift the commonly held beliefs of a teacher team. When encountering new and challenging information, it is important that teachers be given the time to reflect both individually and communally through discourse. According to Mezirow (1997), reflective discourse helps us validate our new thinking. Finally, it is important to take action, since according to Mezirow (1981), "a new meaning perspective clearly implies action" (p. 19). While

we had yet to take action on our plan at the end of the study, we had made small, yet meaningful changes to how we approached students and to how we thought about relationships and trauma. Knowing that action is necessary to fully change our perspectives, we should plan to continue the process of reflection, discussion, and action as we move forward and implement trauma-informed practices in the classroom.

Elements of Trauma-Informed Care in the Action Plan

As I planned for the PD and discussion sessions, I had the elements of trauma-informed care in mind. Our training and our action plan reflected the key elements I synthesized in my review of the literature on trauma-informed care in schools. While our learning process and action plan emphasized the importance of student-teacher relationships and the need for continued training, I found gaps in our learning, particularly in connecting to the community, outside agencies, and mental health professionals.

Student-teacher relationships

A major theme from the literature was the importance of supportive teacher relationships in combatting trauma in students' lives (Bethell et al., 2014; Larkin, et al., 2014). The teacher characteristics that helped build supportive relationships included focusing on student strengths, encouraging student agency, providing academic support, and re-engaging students rather than using punitive measures for behavior (Morgan et al., 2015). Students perceived positive relationships with teachers who demonstrated effortful engagement by purposefully reaching out to establish relationships, and who offered support by giving advice and helping academically. Students contrasted these teacher behaviors with the behaviors of teachers who did not care about them and judged them before they knew them (McHugh et al., 2013). In my study I found that we believed our positive relationships were built through having real conversations with students, demonstrating care in tangible ways, finding ways to connect with our students, and

building upon our positive relationships with students when we had to discipline them. However, we had some difficulty with what McHugh et al. (2013) described as effortful engagement, or purposefully reaching out to students. In response, we planned for more structured, effortful relationship-building strategies in our school.

Most of the literature that I reviewed for this study asked students their opinions about student-teacher relationships (Kim & Taylor, 2008; Lagana-Riordan et al., 2011; McHugh et al., 2013; Morgan et al., 2013; Morrissette, 2011). In contrast, I studied teacher perceptions of their relationships with students. As we move forward to implement strategies to engage students and build relationships with them, we need to consult our students to see if their ideas about positive relationships coincide with our own and if we need to adjust our practices accordingly. Through practitioner inquiry, I can help my school and my district listen to the voices of our students, which is particularly important in engaging with students who may have experienced trauma. Listening to students' voices is important because often our students have been silenced. Students in our school in particular have been more harshly disciplined and removed from the traditional school setting. Listening to students gives them a voice not only in their education but also potentially in their lives as they must confront the trauma they have faced and make decisions for themselves in the future.

Need for training

Another theme from trauma-informed care research is the need for teacher training (Baweja et al., 2016, Chafouleas et al., 2016; Dorado et al., 2016). For my study, I organized three PD sessions for teachers to learn about trauma and trauma-informed practices. I also planned discussions for us to reflect upon our learning and to plan new practices for our school. By the end of the PD sessions, all of us reflected that we needed more training. In response, we decided to learn more as a team in the upcoming semester. However, we lacked the financial

resources to receive professional training from trauma-informed experts. Furthermore, the implementation of trauma-informed practices in school was still new at the time of this study. Even with the guidelines from various agencies, there was no guiding framework to use with trauma-informed care, and research into the effectiveness of these practices was promising yet limited. Moving forward as a team, we need to request more resources to help us obtain the training we need. In my own classroom, I should continue trauma-informed practices using cycles of practitioner inquiry regarding my own practice to evaluate the effectiveness of new strategies.

When implementing trauma-informed care, teachers should understand trauma and its impacts, develop strategies for working with students who have experienced trauma, and learn self-care in order to avoid secondary trauma (Baweja et al., 2016, Chafouleas et al., 2016; Dorado et al., 2016). Through PD we learned the vocabulary of trauma, articulated its effects on students, and understood that we could help reduce trauma's impact on our students. This new awareness about our potential role in reducing trauma's impacts led us to develop strategies, particularly relationship-building strategies, to help combat the effects of trauma. While we mentioned the need for stress relief for ourselves as teachers, or self-care, our plan did not include any self-care strategies. As we begin implementing the new strategies, I should use practitioner inquiry to evaluate the effectiveness of these new strategies in helping students overcome trauma and in helping us as teachers form relationships with our students. Furthermore, we as teachers need to learn strategies for self-care. In my research one of my colleagues mentioned that we needed stress relief during the day, so moving forward, teacher self-care should be part of our plan.

Community support

Successful trauma-informed schools also engage the community and other support services to help students who have experienced trauma (Baweja et al., 2016; Chafouleas et al., 2016; Shamblin et al., 2016; Stevens, 2012). These support services may include mental health services or health clinics at the school to help meet the needs of students who may not otherwise have the resources to receive outside help. Furthermore, these outside resources help support the teachers who may not have the appropriate training for all situations. In my own study, we did not connect with any outside resources other than the behavioral specialist from the district who provided the training. While the focus of the study was on helping teachers change their ideas and assumptions about students, moving forward we should connect more with outside agencies to support both our students and ourselves.

Racism as Trauma

One of SAMHSA's (2014) key principles in trauma-informed care was confronting cultural, historical, or gender biases that impede staff responses to trauma. During my initial literature review, however, I found little on the relationship between trauma and racism. The numerous ACEs studies hardly accounted for race when studying the effects of trauma, and the few studies that mentioned race did not explain how racism might affect those who had experienced trauma. During my PD, however, the trainer brought up race and its impact on the classroom. As a team, we did not examine race in our classrooms or in our interpersonal relationships. Reflecting on the omission of race in our dialogue, I examined further research on how racism impacts trauma and how this might impact my relationships in the classroom and with other teachers. Furthermore, I considered research on strategies that might help us confront racism in the classroom. A new review of research confirmed identity-building activities as a

way to combat trauma, particularly when those activities affirm students' cultural identities and strengths.

Research on trauma and racism

Racism's impact on trauma is two-fold: experiencing racism itself causes trauma, and racism compounds the effect of other trauma on individuals. Trauma may result from experiencing racism. According to Ponds (2013), trauma deriving from racism is "the physiological, psychological, and emotional damage resulting from the stressors of racial harassment or discrimination" (p. 23). Racial harassment includes hostile threats or violence to an individual or group of individuals while discrimination involves stereotyping and microaggressions (Carter & Forsyth, 2010). While some forms of harassment may be included in traditional categories for trauma, racial discrimination is often overlooked. Furthermore, even racial harassment that is viewed as traumatic does not take into account the institutionalized racism from which these incidents stem (Bryant-Davis & Ocampo, 2005). According to Bryant-Davis and Ocampo (2005), "viewing racist incidents through the narrow lens of overt, individual racism removes the responsibility of action against covert and/or institutionalized racism" (p. 574). In order to respond to racial trauma, we should acknowledge the institutional racism that causes it, recognize the different types of racial trauma, and learn the effects of this type of trauma.

Additionally, according to Bryant-Davis (2007), race could have a "multiplicative effect" on trauma. When responding to Black and Brown people who have experienced trauma, White individuals are more likely to be dismissive or blame the victim. For instance, Black and Brown individuals who have been raped may be more likely to be blamed for the rape, and may not receive supportive counseling services. In other cases, the experience of the victim may be minimized, particularly if a Black or Brown individual is perceived as "arrogant, opportunistic,

or hypersensitive” (Bryant-Davis & Ocampo, 2005; Helms, Nicolas, & Green, 2010). Such experiences potentially re-traumatize victims and intensify the trauma.

Individuals who have experienced race-based trauma have physiological and psychological effects similar to other types of trauma. However, racial trauma has some distinctive psychological effects on individuals. Several studies have linked racial stress to negative health outcomes such as cardiovascular reactivity, higher rates of hypertension, and higher blood pressure; even subtle racism has been shown to increase blood pressure (Okazaki, 2009). Negative mental health outcomes such as PTSD, depression, anxiety, and hypervigilance have also been noted in numerous studies (Bryant-Davis, 2007; Carter et al., 2013; Helms, Nicolas, & Green, 2010; Okazaki, 2009; Pieterse, Todd, Neville, & Carter, 2011). In a meta-analysis of sixty-six studies, Pieterse et al. (2011) found a positive correlation between perceived racism and psychological distress in individuals and a negative correlation with psychological well-being.

After being racially traumatized, many individuals remain hypervigilant, particularly to racial stereotyping and microaggressions, which mirrors the stress response in other types of trauma. However, pervasive institutionalized racial stereotypes may cause others to believe that the victimized person is overreacting to perceived racism, causing re-traumatization. According to Bryant-Davis and Ocampo (2005), Black and Brown individuals may be viewed as “oversensitive[e] to racism, because when they respond, they are responding not only to the incident but to the pervasive, covert, ambiguous, and unnamed institutional and cultural events against which the overt incidents are framed” (pp. 575-576). Pieterse et al. (2011) suggest that this stress response, the fear of being further victimized and stereotyped, and depression and

anxiety related to trauma may all contribute to noncompliance with medical and mental health care, which in turn may worsen outcomes.

Research on cultural identity and trauma

In the school setting, race-based trauma affects students' abilities to connect with school and teachers' abilities to respond effectively to students. In his studies about PTSD in Black and Brown urban youth, Emdin (2016) found students often experienced stress related to race in schools resulting in fear, anger, and powerlessness. These students felt as if they were taught to "leave their day-to-day experiences and emotions at the door and assimilate into the culture of schools" (p. 23). According to Emdin (2016), teachers of students experiencing this type of PTSD may further traumatize students by not seeing the students for who they are: "what educators and the world at large see when looking at students is often a distortion of their authentic selves" (p. 25). In order to combat this type of trauma in the classroom, Emdin promoted reality pedagogy in which a teacher "sees students as individuals who are influenced by their cultural identity" (p. 27-28). In order to do this, a teacher must begin by acknowledging and learning the individual and cultural identities of students, using strategies based on student identities, and creating a safe classroom environment. Valuing students' cultural identities is particularly necessary for White teachers in urban schools because our experiences in the classroom may be vastly different than those of our students, and in order to bridge that gap, we should learn how our students experience our classroom environments.

Similarly, Thompson and Schwartz (2014) conducted an ethnographic study of young Black males to understand how the trauma they experienced affected their learning. They found that these young men's teachers did not understand that racial trauma affects the lives of their students. Furthermore, they discovered that these young men found school re-traumatizing and that they "were less trustful, less assertive, and wary of educational settings" (Thompson &

Schwartz, 2014, p. 53). For teachers to help students recover from trauma, we need to create a safe environment, defined by Thompson and Schwartz (2014) as a place in which students can feel empowered, have a chance for self-expression, and be accepted for who they are.

Applied to education, these studies highlight the importance of teachers helping students appreciate their cultural identity. Furthermore, for us as teachers, understanding our students' identities helps us bridge the gap between our perspectives and our students' perspectives of the classroom environment. Both are important in combatting trauma in the classroom. The former creates positive regard within a student for him- or herself, a tool for potentially mitigating trauma. The latter helps teachers not to re-traumatize students and to build the supportive classroom environment students need to heal.

Connections between research and action plan and PD

In implementing trauma-informed care in schools, research demonstrated that supportive teacher relationships have a significant impact in reducing the effects of trauma in students' lives (O'Neil et al., 2010). In reality, however, racism may impact teachers' abilities to create these supportive relationships, particularly in schools with mostly Black and Brown students and mostly White teachers. If a Black student has experienced racial discrimination, then that student may have a difficult time trusting White teachers. Furthermore, if the teachers' reactions to the student are perceived as racist, then the student may react in ways that mirror a stress response but may be perceived by the teachers as disrespectful, noncompliant, or aggressive. Teachers should be aware that these responses by students are not simply a response to them as teachers but to institutionalized racism. Students who have been exposed to racial discrimination may be re-traumatized if teachers are not aware of their students' experiences with racism and the racial dynamics in the classroom.

In our PD sessions, our trainer briefly spoke about how we as White teachers should be aware of how our classrooms may or may not be inviting to the Black students in our classrooms. We were asked to look at the posters on our walls, the books in our collections, and the structures of our classrooms to see how we could incorporate our students' voices in our classroom. In our discussion of trauma, however, race was completely left out of the conversation. As we began our action plan, the strategies we chose to incorporate focused on changing the school environment and building student identity, all color-blind strategies. For instance, the creative wall space provided students an outlet to express who they are, where they come from, and who they want to be. Additionally, the conversations we planned for our individual classrooms concentrated on generic topics to help us connect with students.

While our action plan included creating a welcoming learning environment, we should use these and similar strategies to value both students' cultural and individual identities in planning for the future. Our original strategies were color-blind, but as we move forward we should modify these strategies to begin to understand our students' perspectives better. In our action plan, we included training on trauma-informed care for us as teachers. However, all of our plans were made by the three White teachers on our team with little input from our one Black teacher, which could indicate a power structure in which she was either silenced or not valued. In future planning, we should be sure that we listen to and value her voice particularly in decision-making for our school. Furthermore, we needed to give students a voice in their own learning. Giving students a voice is important to us especially as White teachers because it returns power to students who have been marginalized and powerless. In enacting the plan, we should consider how racism and trauma intersect to impact our students, how we as teachers can resist re-

traumatizing our students, and how we can implement strategies to understand our students' cultural identities.

Implications for Practice

After considering my findings in light of existing scholarship, there are several practical implications of my research. First, my findings suggested that my team and I needed to move beyond our beliefs to take purposeful action in both our relationships with students and our responses to trauma. My findings also revealed that the interpersonal relationships in the school needed improvement. Moreover, I found that district administration needed to address institutional barriers and inequities that hindered the implementation of programs such as trauma-informed care. Furthermore, I found that teachers implementing trauma-informed care needed to be aware of the impact of race in their practice. Finally, my findings revealed the difficulty of eliminating deficit thinking in my own practice and research.

Move from Beliefs to Action

In our initial interviews, my team and I expressed strong feelings about how we viewed our relationships with our students. We believed ourselves to be supportive, understanding, and caring teachers. In spite of our beliefs about student-teacher relationships, we all struggled connecting with students. There was a disconnection between our beliefs about relationships and our actions in the classroom. Similarly, my colleagues and I recognized the trauma that students faced, but we did not know how to address trauma in the classroom. Our responses were limited to reacting to student behaviors once they manifested in the classroom. In both instances, we needed strategies to be proactive in building relationships and addressing the trauma in our students' lives.

Critical reflection and critical dialogue with each other were important in helping us realize that we needed to put our beliefs into action. In practitioner inquiry, an important part of

changing one's own practice is reflection. In the same way, as a practitioner scholar wanting to enact change in my school, I should allow both myself and my colleagues time to reflect on our own beliefs and actions when confronted with new knowledge. Second, we need to have the time to reflect collectively with other teachers. When we did, I found that we spurred each other to action. Moving forward, we should continue regularly meeting together to critically discuss our practices. I found that these meetings produce the best discourse when guided by a semi-structured protocol with a definite end goal. For my team and myself, we need critical reflection and discourse to help us not only believe in change but also to enact it..

Respond to Interpersonal Relationships

In the PD, our team discussions often lacked focus and did not reflect distributed participation. Our lack of focus was evident in our initial discussion when one of my colleagues dominated and led us off topic. In my findings, I reported that this colleague, a White man, often drove decision-making on the team and saw himself as the leader in our program. As we created our action plan, we needed to communicate better interpersonally so that everyone could contribute to our decisions. In our action plan, we addressed this lack of focus and inequitable participation through making our future meetings protocol-driven.

I also needed to consider my own relationship with my colleague, Ms. J, who did not participate equally in the PD. My colleague's voice was important in this study and in our school because she was the only black teacher in a school with mostly black students and because some of her suggestions were overruled by other participants. For instance, Mr. B in particular refused to do home visits while Mrs. J found them valuable. While I attempted to get feedback from her, I felt as if she did not value the PD that I had scheduled. As I reflected on this, I realized that my conversations prior to scheduling the PD occurred mainly with my other two colleagues with whom I ate lunch nearly every day. During our lunch conversations, I spoke often about my

research and ideas, getting their thoughts and feedback informally. While I spoke to Ms. J occasionally about my research, I did not have in-depth, ongoing conversations with her, and I did not seek her feedback about my research before I began scheduling PD.

After I had analyzed my data, I realized the significance of Ms. J's lack of participation. At this point, I could have had a conversation with her about the PD and my findings. However, I still found myself reluctant to have conversations with her about my data. Some of this reluctance was due to her lack of participation in my research. I felt that she would not be willing to read my data analysis and felt as if I was imposing if I asked her to do anything else for my research. Upon further reflection, I believe she probably would have been willing to have a conversation. As a practitioner scholar, I have more work to do in unpacking my own reluctance and researching how I can begin to bridge the gaps in the relationship between my colleague and me.

Additionally, I should consider the role that race might have played in our team dynamics. Since Ms. J was our only Black teacher, she may not have felt comfortable in our group discussions, particularly considering the close friendship that the other three of us had both inside and outside of school. As a practitioner scholar, I need to seek ways to improve our interpersonal relationships through reading more research on the impact of race in relationships among teachers. Furthermore, I should use my knowledge to help create an environment within our school that empowers and shows appreciation for all of our teachers as well as our students.

Address Institutional Barriers

My findings revealed substantial institutional barriers to implementing trauma-informed care in my school. In our discussions, we repeatedly mentioned the lack of resources that we needed. We did not have the financial resources for additional personnel such as counselors or behavioral specialists. Furthermore, our administrative staff had been cut recently leaving little

time for administrators to connect with students. Our lack of resources also included Friday bus transportation, which limited our hours of operation to Monday through Thursday. Our school was also limited in its ability to provide challenging curriculum. We used an online, self-paced program, required by the state for alternative programs such as ours. Furthermore, we did not select the program; rather, district office personnel selected it for us. As I demonstrated in my literature review of alternative education, many of these barriers also exist nationwide. Studies of alternative schools revealed that lack of personnel, lack of support from district office personnel, and lack of resources are common through South Carolina and the United States.

In addition to lack of resources, we found barriers in the practices of district and school level administrators that limited our ability to implement trauma-informed care. For instance, we could not control when students were enrolled in our school. In the 2016-2017 school year, we received students until the last week before school ended for the summer and were expected to help those students gain the credits they needed to be promoted. Such practices inhibited our abilities to build relationships with all of our students and our abilities to provide a challenging curriculum to these late-arriving students.

All of these barriers not only affected our abilities to implement programs such as trauma-informed care effectively, they also created inequitable schooling conditions. The schools in our district pushed our students out of school because they violated behavioral expectations. Not only did our students lose their rights to attend a traditional high school, but they also lost access to challenging curriculum, extracurricular activities, and additional support staff. Furthermore, our students were overwhelmingly Black students living in poverty, many of whom had experienced numerous traumatic events in their lives. The inequitable conditions in our

school further marginalized our students and created barriers for us as teachers when trying to support our students.

This study has implications for district level administration when considering the resources they provide for alternative schools. To make schools more equitable for students that have been marginalized, districts should be sure that alternative schools have the support staff necessary for both teachers and students. Students should have access to mental health services, guidance counselors, and behavioral specialists if needed. Likewise, teachers should have access to curriculum support and training. Furthermore, districts should include teachers in alternative schools in the development of district policies and the planning for the distribution of resources. While teachers in alternative schools may advocate with district office administration, ultimately they cannot change institutional policies and practices without the help of those administrators.

Combat Racism as Part of Combatting Trauma

My research has implications for both my own context and the field of trauma-informed care because it revealed a lack of research on race and trauma. In the field of trauma-informed care, major policy documents from SAMHSA (2014) and TLPI (2005) stated that understanding the culture of individuals who have experienced trauma is important. However, literature on implementing trauma-informed care in schools did not take racism or race-based trauma into account. The literature I found that addressed race-based trauma came from the counseling field, not education or trauma-informed care. More interdisciplinary research should be done to integrate the field of education, trauma-informed care, and race-based trauma.

In my own practice, I need to consider race when implementing trauma-informed practices. During the PD, our presenter brought up race and its impact on our classrooms, but the three White teachers who participated in the last two sessions hardly discussed race. Only in one of the last interviews did one of my colleagues bring up the impact of race in our classrooms.

Even as I coded my data and analyzed my findings, I initially left out the impact of race in my study. As I discussed my findings with my advisor, I revised my analysis, but still struggled with my positionality as a White teacher in this study. For instance, I struggled connecting race to issues with my relationship with my colleague, Ms. J, because I had always attributed our lack of communication or connection as personality differences. My other White colleagues also attributed her lack of participation to her personality. As I reflected on my positionality in this study, I realized that I pushed for changes in our program and for training that I felt was appropriate. However, I am a White teacher pushing for changes in a school with mostly Black students, and I did not gather input from our one Black teacher. As I move forward, I need to value Ms. J's opinions and gather her input as well as truly consider how race impacts all relationships in my school.

My study illuminated a glaring omission in the literature on trauma-informed care: the connection between racism and trauma. Educators in schools and districts need to consider this connection when implementing any trauma-informed program. First, districts should consider the race of both the students and the teachers within trauma-informed schools. When mostly White teachers work in schools with mostly Black students, it is important for those teachers to value the students' cultural identities, examine how racist ideologies might influence their classroom environment, and be aware of how their actions could re-traumatize students. Second, educators should consider the impact of racism on the trauma that students have faced. The schools in the literature on trauma-informed care taught students explicitly about trauma, helping students recognize its effects and how they could respond. Such programs should specifically include teaching about race-based trauma as well. Furthermore, teachers and counselors leading such programs need training on how to include race into these programs.

Be Conscious of Deficit Thinking

Throughout my research on trauma and trauma-informed care, I compared my findings back to Valencia's (2002, 2010) theory of deficit thinking. According to Valencia (2002, 2010), deficit thinking blames the student, the student's family, or the student's environment for educational failure. In my literature review, I examined research from the ACEs study and trauma-informed care, some of which correlates poor student behavior and academic failure to environmental factors in the student's home such as abuse and neglect. While adverse experiences in childhood certainly impact student behavior and outcomes, this research has the potential to perpetuate deficit thinking if teachers blame poor schooling outcomes on a student's home environment without examining the societal factors that impact the trauma.

In my own experience as a PD participant and practitioner researcher, I had a difficult time eliminating my own deficit thinking, even as I analyzed my data and wrote my findings. For instance, in one of my earlier drafts I wrote about how we believed that "our students lacked caring relationships with adults at home." While I was giving an example from one of our interviews, I did not recognize it or analyze it as deficit thinking. As I continue in my own practice, I need to be aware of my own deficit thinking regarding my students, especially as I plan more PD opportunities for my colleagues and myself. As I learn more, I should also help my colleagues begin to recognize deficit thinking within themselves. As we implement trauma-informed care, we do not need to use it as another tool to blame students and their families but rather as a tool to change ourselves, our practices, and the school system.

Limitations of my Study and Opportunities for Future Research

Unlike other methods of research, practitioner research involves using the literature to solve a context-driven problem of practice. In my own study, I found limitations in both the

methodology and the implementation of my research. Nevertheless, although limited in its generalizability, practitioner research has the potential to transform teacher practice.

Limitations

While practitioner inquiry provides in-depth knowledge to teachers to guide successful changes in practice, this methodology has limitations. In my study, I was limited to one group of teachers in one specific site, a disciplinary alternative school, making my research highly specialized and highly contextual. My research, therefore, cannot be generalized to other schools and other contexts. In practitioner inquiry, my role of being both an insider as a participant in the study and an outsider as a researcher added both tension and depth to my findings. In my study, I was an outsider in my role as researcher and an insider as a full participant in the PD and discussions. Before I began the research with my colleagues, I already had in depth knowledge about trauma and its effects on students. My journal entries demonstrated the depth of my knowledge compared to my colleagues, particularly at the beginning of the research. My outsider knowledge may have influenced my colleagues during both informal discussions and the scheduled PD discussions. Since I was a participant during the action planning process, my research knowledge may have influenced our plan. Even with my influence, our team still encountered challenges implementing trauma-informed care, and we still had genuine discussions during our PD sessions. Other practitioners may be able to adapt our responses to these challenges and our learning process to their own contexts.

Finally, this study had limitations in its implementation. I began the study toward the end of the second semester of the school year. When planning my dates and sessions, I had to change dates several times due to various conflicts with my colleagues' schedules. Since I did not have the authority to require my colleagues to attend, I had to accommodate their schedules. Additionally, one colleague missed several meetings, so I had to adjust in order to keep her

informed and gather her thoughts on our action plan. Furthermore, we had students show up to work on non-school dates during times in which our sessions were scheduled, so we had to conduct a session while students were present. Since we ended the last session near the end of the school year, I did not get to track the changes as they were being made in the following school year to see how things were implemented.

Strengths

While practitioner inquiry may typically be seen as limited in its generalizability, using practitioner inquiry provides a research-based method for practitioners to examine their own practice. The strengths of practitioner inquiry include the democratization of research, an in-depth knowledge of the context, and the potential to make immediate changes. Practitioner inquiry decentralizes the control of the research through enabling participants to find a context-specific course of action (Dana & Yendol-Hoppey, 2014; Herr & Anderson, 2015). Since I had in-depth knowledge about the context and my fellow participants, I was able to design the PD with our context in mind and include the entire team in the decision-making process.

Furthermore, our discussions and interviews were more authentic because of our prior relationships, and we were all involved in, and responsible for, the impacts of the inquiry.

Since practitioner inquiry implies action, research becomes a dynamic process. Since practitioner inquiry occurs in cycles, it allowed the other participants and myself to make real changes in our context throughout the course of the research. For instance, after our first PD session, our action plan consisted of attending expulsion hearings and using pamphlets to recruit students into our program. As we learned more about mitigating the effects of trauma, we changed our focus to the aspects of the program that we could control and to our behaviors in the classroom. Our end result was a participant-created action plan, which we began implementing

in the 2017-2018 school year. These aspects of practitioner research empower teachers to make changes in their own classrooms and to challenge institutional practices.

Future Research

Future research into trauma-informed care in education should include qualitative, quantitative, and practitioner research. Future research should further examine both the process of implementation and the outcomes of trauma-informed care. As I found in my literature review, the research is just now emerging on the impact of trauma-informed care in schools. Quantitative studies need to examine longitudinal results to see if and how trauma-informed care in schools impacts student learning and student recovery from trauma. Practitioner scholars should continue to do studies within their schools to show how different contexts translate trauma-informed care. In my study, I was only able to look at a small disciplinary alternative school. Other practitioner inquiry in larger traditional schools, in different areas of the country, or with different student populations may find that the implementation process works differently.

Additionally, future interdisciplinary research is needed to integrate race-based trauma, trauma-informed care, and education. At the moment, these fields are discrete, and one seeking to find how race and trauma intersect must look outside education research. Traditional researchers need to study the impact of race-based trauma in the classroom both on student behavior and outcomes and on teacher perceptions and reactions. This research can be used to revise trauma-informed care for schools to include examining how institutionalized racism and racial trauma may impact students and how teachers can keep from re-traumatizing students in their classroom. Further practitioner research needs to be done that includes an awareness of race-based trauma as a part of the implementation of trauma-informed care. This research can track individual teacher response or program response to race as a part of trauma-informed care.

Conclusion

In conclusion, this study chronicled the experiences of four teachers as they progressed through a series of PD sessions on trauma-informed care. I found that while initially we believed in supportive relationships with students and understood that trauma impacted their lives, we did not act upon our beliefs in strategic and intentional ways. As we engaged in critical reflection and critical discourse throughout the PD process, our beliefs became more action-oriented. However, we experienced challenges as we moved through the PD process. While our action plan addressed most of these challenges, I found that we lacked understanding about how race may be a factor in interpersonal tensions and how race may impact student trauma.

Trauma-informed care in schools has the potential to address the underlying causes of student behavior, particularly in an alternative school such as the one in this study. We should address teacher perceptions about the need for trauma-informed practices and facilitate taking an in-depth look at how racial tensions and race-based trauma may impact relationships in the classroom, a key component to trauma-informed care. Through a process of learning, critical reflection, and critical discourse, it is possible for teachers to change their unproductive or harmful perspectives about students' challenging behaviors. As schools and districts become more trauma-informed in practice and policy, we have the possibility of both re-engaging students and helping them heal from trauma they may have faced.

APPENDIX INTERVIEW QUESTIONS

Interview One Questions:

- What are the most important aspects of your work as a teacher?
- How do you make your classroom a safe place for all students?
- Describe the kinds of student/teacher relationships that in your opinion have the most impact on students.
 - Describe some of the ways you encourage student engagement and the support you give students.
 - How may your actions or behaviors as a teacher negatively impact your relationships with students? Please describe some examples, if any.
- What kinds of challenges/hardships do your students face at home and in their personal lives?
- What impacts do you think these hardships have on our students?
 - Inside your classroom, what impacts on behavior, academics, and social life do you think hardships have on your students?
 - What impacts do you think hardships have on our students outside of school – in their homes, communities, and jobs?
- What is your role as a teacher in working with students who have experienced hardships?
 - To what degree do you feel competent in this role? What makes you feel more or less competent? What do you believe would help increase your feeling of competence?

Interview Two Questions:

- What in your opinion is the most important thing to consider about the impact that hardships have on students in the classroom?
 - How has your opinion about the effects of these hardships on your students changed after the professional development sessions?
 - Please give examples of how your opinions have changed throughout the series of professional development.
 - What caused your opinions to change? A specific piece of knowledge? What part of the professional development sessions?
- What impact do you believe that your relationship with students has on them in the classroom?
 - With your students who have experienced hardships, how important is your relationship with students? Explain.
 - How has the training impacted your relationships with your students?
 - Please give some specific examples of how your relationships with your students have been impacted. What strategies have you tried? To what extent have they been successful or not? Why do you feel they have been successful or unsuccessful?
 - What caused you to make these changes? A specific piece of knowledge? What part of the professional development sessions?
- What does it mean for you to have a trauma-informed approach in your classroom to working with students who have experienced hardships?

- What changes have you made in your classroom based on the training? What changes do you plan on making in your classroom?
 - Please provide specific examples of your classroom practices that you have changed? What strategies have you tried? To what extent have they been successful or not? Why do you feel they have been successful or unsuccessful?
- What changes should the school make as a whole moving forward in response to students who have experienced hardships?
 - Please provide specific examples of what we could do moving forward. What specific strategies or plans should we make?

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BIOGRAPHICAL SKETCH

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