

**Managing the Effects of Childhood Trauma in Elementary Schools through  
the Implementation of Trauma-Informed Practices**

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## Abstract

Childhood trauma impacts 1 in 4 children in the United States and has negative effects on child development that inhibit success in school and lead to adverse outcomes later in life. Elementary-aged children affected by trauma experience behavioral, social, emotional, and academic challenges in the school setting such as emotional dysregulation, externalizing behaviors, poor academic performance, and diminished social emotional competence. These challenges overwhelm schools, are disruptive to the learning environment, contribute to teacher burnout, and deteriorate school climate.

Despite being perfectly positioned to intervene in the negative effects of childhood trauma, elementary schools across the country are falling short of this potential. Children's trauma-related needs are not consistently identified and trauma-informed supports are underutilized. Educator burnout, insufficient staff training, and traditional discipline practices exacerbate the manifestation of trauma-related needs in schools and create barriers to establishing a trauma-sensitive environment. Trauma-informed practices are viable solutions to ameliorating the effects of childhood trauma and yield positive behavioral, social, and academic outcomes. These practices aim to create a safe environment by providing teachers with trauma-sensitive behavioral management strategies, building positive relationships, and supporting students' self-efficacy.

Despite their benefits, trauma-informed practices are not widely utilized, are limited in research examining their efficacy, lack a universal framework, and entail implementation challenges which deter schools from adopting these approaches. Policy recommendations for states and school districts that target the effects of childhood trauma and the underutilization of trauma-informed practices include research expansion, district-specific implementation plan development, multi-agency collaboration to streamline student access to services, increased funding and resources for schools to implement and sustain trauma-informed practices, and the establishment of community resources promoting prevention efforts and ongoing support for trauma-impacted children and their families.

*Keywords: trauma-informed practices, childhood trauma, children, educators, elementary schools*

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## **Introduction**

Childhood trauma is increasing in prevalence among elementary-aged children in the United States and has several negative effects that inhibit their success in school and lead to adverse outcomes later in life (National Child Traumatic Stress Network, 2024). Approximately 25% of children have experienced at least one form of trauma by the time they enter kindergarten, a sharp increase since pre-COVID-19 pandemic rates and likely an underrepresentation of its true incidence (National Child Traumatic Stress Network, 2024; Pace et al., 2023; SAMHSA, 2024). Exposure to trauma in childhood is linked to poor academic performance, low self-esteem, behavioral problems, mental health disorders, and various physical health issues in adulthood (Felitti et al., 1998; Melamed et al., 2024; Paulus et al, 2021; Puchner & Markowitz, 2023).

In the elementary school setting, children who have experienced trauma are likely to exhibit externalizing behaviors, struggle with self-regulation and social skills, and have difficulty developing and maintaining positive relationships (Frawley et al., 2023; Mitchison et al., 2020). Educators take a punitive approach to addressing these problems, especially disruptive behaviors, which further alienate children from the regular education curriculum and isolate them from prosocial interactions with peers (Caldarella et al., 2021; Sedillo-Hamann, 2022). Despite elementary schools serving as an entry point through which children first access mental and behavioral health services, students with trauma-related needs are not routinely identified and are consequently deprived of essential support (Dineen et al., 2022). The perpetuation of these problems through a lack of trauma-sensitive strategies leads to worsened behavioral and academic outcomes among students, teacher burnout, a negative school climate, and an overall exacerbation of the current challenges which presents several ethical implications of neglecting

trauma-related needs (Finch et al., 2023; Paulus et al., 2021; Tirrell-Corbin et al., 2023; Zarei et al., 2021).

Trauma-informed practices are efficacious approaches for educators and administrators to support children with trauma histories and are gaining momentum nationwide as a viable solution to trauma-related challenges in elementary schools (Maynard et al., 2019; U.S. Department of Education, 2022). Trauma-informed practices are evidence-based and effective in improving student outcomes and school climate by providing educators with strategies that promote a trauma-informed approach to engaging with students that facilitates supportive rather than retributive interactions (Puchner & Markowitz, 2023). Trauma-informed practices aim to neutralize the effects of trauma on children in the classroom by emphasizing the use of self-regulation skills, positive reinforcement, and self-efficacy (Jacobson, 2021). If implemented consistently and with fidelity, these practices reduce problematic behaviors, improve academic outcomes, assuage teacher burnout, and facilitate a safe and supportive school environment (Avery et al., 2021).

Many elementary school-aged children in the United States have experienced some form of trauma which correlates with lower academic achievement, increased behavioral problems, and reduced social emotional competence (Hutchison et al., 2020; Jacobson, 2021; Phung, 2022; Puchner & Markowitz, 2023; SAMHSA, 2024). These challenges have significantly increased during COVID-19 and post-pandemic, overwhelming schools with an abundance of trauma-related needs (Aragon et al., 2024; Pace et al., 2023). Despite this, elementary school educators and administrators nationwide are falling short of their potential to support these children by failing to identify impacted students, engaging in ineffective and punitive behavioral management practices, and neglecting to provide or refer students to interventions that target the

effects of their trauma and enhance overall wellbeing (Dineen et al., 2022; Sedillo-Hamann, 2022).

This paper outlines the incidence of childhood trauma among elementary-aged children as well as its long-term and school-related impacts to illustrate its ubiquitous nature and the magnitude of its effects. A review of the literature provides context for the ways in which the impacts of childhood trauma manifest in the school setting and cause deficits related to self-regulation, social skill development, and academic performance. Physiological and environmental factors, as well as their influences on child development, are explored as potential contributors to challenges among children with trauma histories. The current state of elementary school disciplinary practices in response to manifestations of trauma effects in the classroom and the ways in which students with trauma histories are managed are discussed.

Empirical research underscoring the importance of addressing the impacts of trauma in elementary schools is presented and trauma-informed practices are defined and proposed as practical approaches to holding students accountable while promoting a supportive climate. Barriers to successful implementation of trauma-informed practices are examined and recommendations for future practice and policy are provided. Emerging themes in the literature are identified and analyzed from trauma-informed, ecological, cognitive, behavioral, and biological perspectives. Various theoretical frameworks including ecological systems theory, Polyvagal theory, social learning theory, attachment theory, attribution theory, operant conditioning, adult learning theory, and social exchange theory are applied to further explain and elaborate on emerging themes and to illustrate the relationship between trauma-related challenges among students in elementary schools and the importance of trauma-informed practices. Children impacted by trauma are unsupported in the elementary school setting, and the

implementation of trauma-informed practices can serve to address the effects of trauma and significantly improve outcomes for students and staff.

## **Literature Review**

### *Childhood Trauma*

Childhood trauma is a prevalent issue in the United States impacting children of all ages and is characterized as a distressing event experienced or witnessed before the age of 18 which activates the stress response and adversely impacts development (National Child Traumatic Stress Network, 2024; Substance Abuse and Mental Health Services Administration [SAMHSA], 2024; Skiendzielewski et al., 2024). Types of childhood traumas include physical, sexual, or emotional abuse, neglect, exposure to violence, natural disasters, sudden loss of a loved one, family stressors, serious accidents, or life-threatening illnesses, although definitions are subjective and may vary (SAMHSA, 2024). Approximately 1 in 4 children in the United States have experienced some form of trauma by the time they enter kindergarten, and more than two-thirds of children will have experienced at least one traumatic event by their sixteenth birthday (Puchner & Markowitz, 2023; SAMHSA, 2024).

There are several factors that correlate with the incidence of childhood trauma and exacerbate its effects. Children of lower socio-economic status are more likely to experience a traumatic event early in life, and children of color living in economically disadvantaged communities have the highest odds of being impacted by trauma, especially those in single-parent households (Hutchison et al., 2020; Skiendzielewski et al., 2024). Neighborhoods rife with crime, community violence, substance use, and overdose deaths are also associated with greater rates of trauma among children (Phung, 2022; Skiendzielewski et al., 2024). Similarly, exposure to domestic violence is linked to greater incidences of various types of childhood



trauma (Hutchison et al., 2020). Children whose parents have lower levels of education, poor physical health, and a history of mental illness are disproportionately impacted by adverse experiences (Feletti et al., 1998; Hutchison et al., 2020). Parents with financial and physical or mental health difficulties struggle to implement structure and maintain stability in the home, increasing child vulnerability to trauma and exacerbating its effects (Jacobson, 2021).

### *Impacts on Health and Development*

Traumatic events occurring in childhood have profound impacts on children's development, health, and wellbeing that persist in adulthood (Felitti et al., 1998). In the groundbreaking Adverse Childhood Experiences (ACE) study, Felitti et al. (1998) explored the relationship between various types of traumas occurring in childhood and health outcomes in adulthood and found a positive correlation between childhood trauma and poor health later in life. Individuals who have experienced trauma as children are more likely to develop long-term health problems such as obesity, high blood pressure, high cholesterol, cardiovascular disease, and cancer and are at an increased risk of struggling with substance use (Rishel et al., 2019; Zarei et al., 2021). Mortality rates are high among this population given the prevalence of health issues, and adults traumatized as children are at an increased risk of committing suicide (Zarei et al., 2021). Trauma occurring early in life is also associated with mental health challenges like depression, anxiety, bipolar disorder, and some psychotic disorders emerging in adolescence (Paulus et al, 2021).

Trauma also has adverse impacts on brain development (Cai et al., 2023). Experiencing trauma prompts physical and chemical alterations in the regions of the brain that are associated with executive functioning, decision-making, reward processing, and communication (Cai et al., 2023). These impacts are intensified if trauma is experienced during the first three years of life

when the brain is rapidly developing and most susceptible to environmental influences (Berger et al., 2023). Because of these effects, children with trauma histories struggle with cognitive processing, emotional regulation, and management of responses to external stimuli (Puchner & Markowitz, 2023). Subsequently, these children are likely to be diagnosed with behavioral and neurodevelopmental disorders, such as Oppositional Defiant Disorder (ODD) and Attention Deficit/Hyperactivity Disorder (ADHD), by the time they enter school given the affects that trauma has on the areas of the brain responsible for regulating the symptoms associated with these diagnoses (Crouch et al., 2021; Mikolajewski & Scheeringa, 2022; Mitchison et al., 2020; Puchner & Markowitz, 2023).

### *Externalizing Behaviors*

The impact that trauma has on child development is pervasive and cause behavioral, emotional, social, and academic challenges among young children that negatively affect their performance in school (Puchner & Markowitz, 2023). Externalizing behaviors, or behaviors that are disruptive or harmful to others, are a primary manifestation of trauma symptomatology, particularly in the elementary school setting (Petersen, 2024; Puchner & Markowitz, 2023). These behaviors include tantrums, yelling, using profane language, throwing or destroying objects, and defying authority (Frawley et al., 2023; Mitchison et al., 2020). These children are likely to exhibit anger disproportionate to the context, behave impulsively, have poor decision-making, and engage in violence against staff by way of slapping, punching, pinching, kicking, or spitting (Frawley et al., 2023; McMahon et al., 2024; Mitchison et al., 2020).

Externalizing behaviors are of exceptional concern due to their unsafe nature and their adverse impact on students and staff (Caldarella et al., 2021; Petersen, 2024). These behaviors evoke fear or discomfort among non-offending peers in the classroom and fragment the learning

process which negatively affects other students' academic progress (Petersen, 2024). Aggressive or violent behaviors directed toward educators threaten their safety and contribute to burnout which motivates teachers to leave the profession and perpetuates the national teacher shortage (Aragon et al., 2024; Koch, 2024; McMahon et al., 2024). Externalizing behaviors also impede the development of positive relationships between students and staff which are fundamental to promoting children's social, emotional, behavioral, and academic success in school (Caldarella et al., 2021; Puchner & Markowitz, 2023).

### *Emotional Dysregulation*

Externalizing behaviors are often rooted in emotional dysregulation, which is common among children with trauma histories (Paulus et al., 2021). Emotional regulation is defined as a child's ability to manage behaviors, thoughts, and feelings in accordance with their environment and is acquired early in life through interactions with caregivers (Mitchison et al., 2020; Paulus et al., 2021). The attainment of self-regulation skills is inhibited by poor attachment to caregivers and trauma-induced disturbances in the developing regions of the brain that are responsible for monitoring and managing shifts in emotional states (Paulus et al., 2021; Yuniar, 2021). Children without these skills are unable to identify, modify, and appropriately cope with changes in their emotions and struggle to manage intense or complex feelings, often resulting in externalized and disruptive behavior (Paulus et al., 2021). Resilience is also negatively impacted by exposure to trauma, increasing a child's vulnerability to stress by lowering their window of tolerance and impairing their capacity to moderate their stress response (Minne & Gorelik, 2022).

### *Social/Emotional Competence*

Children who have experienced trauma also have poor attachment styles with caregivers which lead to adverse social and emotional outcomes beginning in early childhood (Yuniar,

2021). These children struggle to trust others, especially adults in authority, and have difficulty developing and maintaining positive relationships, getting along with others, and developing social skills (Minne & Gorelik, 2022; Sedillo-Hamann, 2022). This leads to lower social/emotional competence among trauma-impacted children (Hutchison et al., 2020). Social/emotional competence is determined by a child's ability to regulate their emotions and to make decisions as well as their aptitude for making friends, getting along with others, and establishing and maintaining interpersonal relationships (Hutchison et al., 2020). A child's level of competence in this area correlates with their educational achievement and learning ability, with students of higher social/emotional competence performing better academically than their counterparts (Hutchison et al., 2020). Students with deficiencies in this area are more likely to display externalizing behaviors in the classroom and create a hostile and unsafe environment (Santamaria-Villar et al., 2021).

Behaviors stemming from social/emotional incompetence have social consequences for children which alienate them from positive relationships and supports (Ho et al., 2022). Ogelman et al. (2020) found that young children prefer to play with peers who are kind, share, and take turns as opposed to those who are aggressive, rude, and behaviorally deviant. Socially incompetent children lack the prosocial skills to appropriately engage with others in ways that promote and sustain healthy relationships, and as a result they are excluded from peer interactions, are involved in fights or peer conflict, and receive disciplinary referrals at exceedingly high rates due to their behaviors (Ho et al., 2022; Offerman et al., 2022). Classmates are a primary source of emotional support and identity development among children and students devoid of these interactions suffer worsened social/emotional outcomes (Santamaria-Villar, 2021).

### *Impacts on Academics*

Poor academic outcomes are also common among children who have experienced trauma (Puchner & Markowitz, 2023). These students are more likely to struggle with learning deficits and to receive a learning disability diagnosis (Zarei et al., 2021). They are three times more likely to repeat a grade, have a lower IQ, and achieve lower grades than their peers (Jacobson, 2021; Phung, 2022; Puchner & Markowitz, 2023). Children who have experienced trauma are at an increased risk of dropping out of school during adolescence (Offerman et al., 2022). In addition, these students possess low levels of self-efficacy and self-esteem which further impede their ability to perform well academically (Melamed et al., 2024). Lastly, the incidence of childhood trauma is strongly associated with decreased attention and hyperactivity among school-aged children, both of which significantly impact school performance (Caldarella et al., 2021; Zarei et al., 2021).

### *Schools' Current Approaches to Managing Trauma-Related Needs*

The behavioral, social, emotional, and academic implications of childhood trauma among elementary students and the level of need they possess place significant strain on schools (Jacobson, 2021; Offerman et al., 2022). Teachers and administrators are overburdened with students' trauma-related needs and struggle to find the time and resources to address those challenges while maintaining their regular job responsibilities (Aragon et al., 2024). Teachers also report feeling overwhelmed by manifestations of trauma in the classroom, are ill-equipped to meet student needs, and feel unsupported by administration (Aragon et al., 2024). The combination of student need and lack of administrator support contribute to a negative school climate, which is characterized by a hostile and unsupportive environment fraught with burnout, job stress, and low morale (Finch et al., 2023).

Elementary schools' current approaches to managing the effects of trauma in the school setting are ineffective and can exacerbate students' trauma-related needs. One such approach is the use of traditional disciplinary practices to address externalizing behaviors that place emphasis on retribution and deterrence (Jacobson, 2021). Caldarella et al. (2021) found that in elementary schools, teacher reprimands occur at higher rates compared to verbal praise, and reprimands are positively correlated with increased conduct issues. Similarly, reprimanding students exhibiting undesirable behaviors negatively impacts student engagement (Caldarella et al., 2021).

Reprimands may temporarily suppress undesirable behavior but do not contribute to sustained change; rather, the practice increases the likelihood behavior will recur (Caldarella et al., 2021). Frequent use of reprimands is largely attributable to elementary teachers' lack of training on working with children who have experienced trauma and their ambivalence about responding to students' needs caused by burnout and secondary stress (Berger et al., 2023; Caldarella et al., 2021).

In addition to reprimands, exclusionary discipline practices are heavily utilized by school administrators (Sedillo-Hamann, 2022). Exclusionary discipline includes any practice that removes a child from the school setting such as suspension, expulsion, or removal from the classroom (Sedillo-Hamann, 2022). These responses may serve as a stopgap for undesirable behaviors, but much like reprimands they perpetuate the problem and are detrimental to students long-term (Caldarella et al., 2021; Sedillo-Hamann, 2022). Students who are removed from the classroom or suspended from school feel disconnected and unwelcome which damages relationships with educators and school authority figures, reinforces feelings of rejection, and worsens self-esteem over time (Jacobson, 2021; Sanders et al., 2024). These students are further alienated from prosocial interactions and positive supports, contributing to more externalizing

behaviors (Sedillo-Hamann, 2022). Exclusionary discipline also leads to lower academic achievement, higher dropout rates, and often results in alternative education placements, which are specialized and highly restrictive setting for students with severe emotional and behavioral disturbances who have been removed from general education (Minkos et al., 2022; Sedillo-Hamann, 2022). School districts are responsible for funding the costly tuition of alternative education placements and thus are further disadvantaged by the effects of childhood trauma (Offerman et al., 2022).

Zero tolerance policies are also commonplace in elementary schools to address maladaptive behaviors (Sedillo-Hamann, 2022). These policies consist of strict and inflexible punishments that do not take into account the context of the behavior and are delivered indiscriminately (Sedillo-Hamann, 2022). By failing to consider the totality of the circumstances surrounding a behavior, school administrators are not cognizant of any trauma-related mental health or emotional needs that may be contributing to the behavior (Sedillo-Hamann, 2022). As such, they run the risk of implementing consequences that are ineffective at best and harmful at worst (Sedillo-Hamann, 2022).

Students with trauma histories are also likely to be placed into special education programs, which are in-school placements designed to provide support and accommodations for students who have cognitive, health, behavioral, or emotional needs inhibiting them from being successful in the regular classroom setting (Offerman et al., 2022). Students with emotional and behavioral problems are among the largest groups supported by special education, and although these programs are intended to provide students with the support they need to succeed through mainstream education, that is not always the case for this population (Offerman et al., 2022). A shortage of service providers and educators in this area makes it challenging to sustain a robust

program, and these children often receive these placements as a means of removing them from the regular classroom where their needs are disruptive to others (Offerman et al., 2022). As such, special education students may experience further isolation, a decreased sense of belonging, and greater problems achieving and maintaining positive interpersonal relationships (Offerman et al., 2022). Lastly, special education programs have been inundated with referrals in recent years and are overextended by the high incidence of behavioral and academic needs of students who have experienced trauma (Offerman et al., 2022). This has led to increases in staff turnover and a reduction in the efficacy of the services and supports administered (Offerman et al., 2022).

To address behavioral, emotional, social, and academic needs among children, schools rely heavily on the services and supports provided by guidance counselors, school psychologists, and school social workers (Aragon et al., 2024). Although these professionals are excellent school-based resources for children, they are unable to effectively serve all students in need (Aragon et al., 2024). On a national scale, only 40% of school districts have a school psychologist on staff, making the ratio 1 school psychologist for every 1,211 students in grades K-12 (National Association of School Psychologists, 2021). In addition, 86% of schools do not meet the recommended ratio for guidance counselors, inflating caseloads and reducing the quality of the services counselors can provide to their students (Prothero & Riser-Kositsky, 2022). School social workers are another valuable school-based resource, but like school psychologists and guidance counselors, they are understaffed and overutilized which create considerable challenges in balancing caseloads and render them incapable of supporting all students (Carnes, 2023). The current practice of referring children with behavioral, social, and emotional needs exclusively to one of these roles is not sufficient in providing services and supports and effectuating sustained change.



Not only is there a scarcity of resources essential to supporting trauma-impacted students, but elementary schools also generally lack a formal or consistent process through which students' needs are identified (Dineen et al., 2022). National statistics indicate that in general, elementary schools are not screening students for trauma-related needs as they enter school or as needed based on displayed behaviors or difficulties (Splett et al., 2023). Any trauma assessments that are done rely on self-reporting or parental reports which are "highly subjective and are influenced by recall bias" (Offerman et al., 2022). Thus, even though problems associated with trauma in children are often detectable upon starting school, students are not promptly identified for services and as a result are deprived of much-needed support (Rishel et al., 2019).

Despite these shortcomings, elementary schools are the primary provider of mental health services among young children and play a pivotal role in supporting students impacted by trauma (Aragon et al., 2024; Dineen et al., 2022). They are ideally situated to target these effects given that children spend most of their time in an educational setting and are often the first place that students with behavioral, emotional, or learning challenges are identified for additional support as their difficulties become distinct when juxtaposed with their peers (Aragon et al., 2024; Splett et al., 2023; Tabone et al., 2020). Additionally, educators are able to identify signs or changes in children which may signal trauma exposure and can respond accordingly to prevent further harm (Berger et al., 2023). Early intervention for children who have experienced trauma decreases the incidence of externalizing behaviors, improves social and academic outcomes, and extenuates many of the negative outcomes associated with trauma, underscoring the importance of schools' efforts to address students' trauma-related needs (Aragon et al., 2024; Puchner & Markowitz, 2023; Tabone et al., 2020).

### *Trauma-Informed Practices*

Due to the growing body of evidence indicating the significant short- and long-term impacts that trauma has on children within the school setting, the United States Department of Education among other stakeholders have made efforts in recent years to support public school districts and their students in addressing mental health and trauma-related needs (U.S. Department of Education, 2022). Among these efforts is the initiative to make schools more trauma-informed by encouraging educators to use empirically based approaches when engaging students in the school curriculum that neutralize the effects of adverse experiences among children (Phung, 2022). These specific approaches are further delineated as trauma-informed practices, or TIPs (Minne & Gorelik, 2022). TIPs consist of strategies or protocols within schools that are rooted in the understanding of how trauma affects children and their behavioral, social, emotional, and academic functioning (Puchner & Markowitz, 2023). To achieve these goals, TIPs aim to increase educators' understanding of how experiencing trauma impacts children and their development and provide strategies for managing undesirable behaviors in the classroom (Puchner & Markowitz, 2023). TIPs are intended to be applied universally, eliminating the need to identify specific students who have experienced trauma (Ballin, 2021).

Several frameworks have been developed and are empirically supported as effective systems to support students experiencing trauma. One such framework is Positive Behavioral Interventions and Supports, or PBIS (Elrod et al., 2022). PBIS is commonly implemented in schools and utilizes a tiered approach to improve behavioral, social, emotional, academic, and mental health outcomes for all students by providing targeted support in a safe and encouraging environment (Elrod et al., 2022). Additionally, several evidence-based social emotional learning curricula exist that are accessible and simple for schools to use in their classrooms (Blewitt et al.,

2020). Restorative justice practices are other approaches that yield promising outcomes for students and comprise a trauma-informed approach to discipline that promotes inclusion, communication, relationships, and the reparation of harm (Sedillo-Hamann, 2022). All these frameworks and others like them provide consistency and safety, emphasize the development and implementation of self-regulation and interpersonal skills, and provide greater opportunity for all children to access the school curriculum (Puchner & Markowitz, 2023).

Consistent utilization of TIPs in schools decreases the incidence of disruptive behaviors, yields better academic outcomes, improves teacher job satisfaction, and reduces burnout (Puchner & Markowitz, 2023). They are emotionally supportive and counterbalance the adverse effects of trauma when redirecting students (Rishel et al., 2019). By perceiving students through a trauma-informed lens, educators can identify emotions and aggravating factors underlying behaviors and respond with support rather than reprimands (Jacobson, 2021). TIPs also teach students the value of rules as well as self-regulation strategies, striking the crucial balance of holding students accountable while understanding the impact of trauma (Jacobson, 2021). TIPs do not assume that all children have self-management skills and enlist educators as a resource to encourage their attainment (Ballin, 2021). Teachers trained in trauma-informed approaches are more in tune with their students' needs which promotes positive relationships and guides children toward self-regulation, improves student outcomes, and reduces teacher burnout (Minne & Gorelik, 2022; Puchner & Markowitz, 2023).

### *Barriers to TIPs Implementation*

Despite their benefits, there are barriers and challenges associated with effectively implementing TIPs in elementary schools. Many school districts lack an understanding of how trauma can impact their students, particularly those in elementary school, and how to incorporate

a trauma-informed approach when working with these students (Phung, 2022). Educators feel unprepared to implement these practices and report a lack of training in trauma and the ways it impacts children (Aragon et al., 2024; Phung, 2022). Teachers' own trauma histories may also make it more difficult for them to manage job stress exacerbated by student behaviors and needs (Minne & Gorelik, 2022). Personal and vicarious trauma can negatively impact the degree of educators' emotional intelligence and interfere with their emotional capacity to implement trauma-informed practices with fidelity (Aragon et al., 2024). School leadership can also present obstacles to the successful implementation of TIPS (Greig et al., 2021). In general, elementary school administrators are not clear on how their roles can help support children who have experienced trauma and lack an understanding of how to make their buildings more trauma-informed (Grieg et al., 2021). These deficiencies prevent school leaders from providing adequate support to teachers which increases their frustrations and reduces levels of job satisfaction (Aragon et al., 2024; Greig et al., 2021).

For TIPS to be successful, teachers and administrators need to hold all children in a positive regard and depart from traditional disciplinary approaches that aim to punish when responding to behavior (Puchner & Markowitz, 2023). This requires a shift in mindset that can be difficult for educators who lack an understanding of trauma and are fatigued by the manifestation of its effects (Puchner & Markowitz, 2023). Leadership also needs to be overtly dedicated to implementing TIPS, and the success of these programs is contingent upon buy-in from teachers and stakeholders (Greig et al., 2021; Phung, 2022). In the absence of administrator commitment and educator support, the longevity of these programs is unlikely (Phung, 2022). Furthermore, negative school climates present barriers to the successful implementation of TIPS (Aragon et al., 2024). When school climate is positive, educators are more likely to adopt in-

house protocols like TIPs (Aragon et al., 2024). Conversely, if morale is low and administrator support is lacking, teachers are less likely to buy into new practices and are less amenable to change (Aragon et al., 2024).

Sustainability of these practices is also a challenge even if successfully implemented (Aragon et al., 2024). Logistical resources such as staffing and time may be lacking, making it difficult to implement more structured and therapeutic TIPs within schools (Aragon et al., 2024). Funding may also limit the types of TIPs that can be utilized and the duration for which they can remain in effect (Aragon et al., 2024). Additionally, if educators are not allocated the time or resources necessary to participate in professional development on TIPs and trauma-informed care, they are unlikely to stay current on best practices and may feel less prepared to perform their roles in this capacity (Phung, 2022).

Lastly, despite substantial empirical evidence that trauma-informed approaches are the gold standard when working with trauma-impacted populations of any age and across a multitude of settings, the concept of TIPs in the educational context is relatively understudied when compared with other trauma-informed approaches (Maynard et al., 2019). Currently, there is no universal and formally agreed upon framework for the implementation of TIPs in schools in the United States (Thomas et al., 2019). Although a handful of states contain school districts that are utilizing evidence-based TIPs that yield promising outcomes, research on these practices is not extensive, and many of those currently in place have not been used long enough to thoroughly evaluate and assess their effectiveness, reducing their external validity and hindering their widespread implementation in schools (Maynard et al., 2019; Phung, 2022).

## **Analysis**

### *Childhood Trauma*

Several major themes emerged from the literature. The widespread incidence of childhood trauma in the United States was pronounced throughout the research and its prevalence implies that many children in the United States are exposed to traumatic experiences and suffer their adverse effects. The theme of childhood trauma is analyzed from an ecological perspective which seeks to understand the nature of behavior and interactions occurring within the context of an individual's surroundings (Apgar, 2024). Through this lens, a child is involved in various complex systems that interact with one another and is directly impacted by any disruptions to or adaptations within those systems (Lenhoff et al., 2022). Examining the prevalence of childhood trauma from an ecological perspective supports the understanding that trauma is the result of malfunctions within a child's environment that are in some way detrimental to wellbeing.

The general occurrence of childhood trauma and its ubiquity in recent years can be further understood by applying Urie Bronfenbrenner's ecological systems theory which posits that human development is influenced by a series of environmental interactions and complex, layered systems, as well as the interplays between those systems (Lopez et al., 2021). These systems include the microsystem, mesosystem, exosystem, and macrosystem (Bronfenbrenner, 2000). A child's microsystem is the immediate environment in which his day-to-day interactions occur (e.g., the home or school setting), and the mesosystem encompasses the interactions between the various microsystems (Bronfenbrenner, 2000). On a larger scale, the exosystem comprises settings or exchanges in which the child is not involved but that still influence his life,

such as parents' jobs, siblings' schools, and laws or policies, and the macrosystem includes social constructs such as customs, norms, and values (Bronfenbrenner, 2000).

Bronfenbrenner's ecological systems theory emphasizes the influence that environmental factors have on child development and can be used to examine the characteristics of a child's systems and their various interplays (Lopez et al., 2021). For instance, a child whose family is living in poverty may experience food insecurity, homelessness, limited access to resources, and parental stress within the microsystem (Hutchison et al., 2020). Problems in a child's exosystem such as unemployment, mental illness, physical health issues, or substance use among caregivers create difficulties for parents in providing a secure and stable home for their children which impacts the child's microsystem in ways that correlate with or exacerbate the incidence of childhood trauma (Jacobson, 2021). Additionally, larger social constructs within the macrosystem, such as changes to laws and health policies or fluctuations in the economy, also affect children by impacting their family dynamics, their education, and their access to resources such as food and healthcare (Pace et al., 2023). Thus, problems occurring in the child's macrosystem and exosystem permeate the microsystem and influence interactions within and between these systems which directly influence child wellbeing.

During COVID-19, many families in the United States experienced economic hardship, increased stress, role restructuring within the family unit, and instability within the home (National Child Traumatic Stress Network, 2021). Major and unprecedented changes in the educational context drastically altered how children attended school and limited the breadth of their social interactions (National Child Traumatic Stress Network, 2021). Not surprisingly, rates of childhood trauma spiked during this time and remain elevated (Pace et al., 2023). Through an ecological lens, changes occurring at various points within a child's macro-, exo-, meso-, and

microsystems as a result of the pandemic and their detrimental effects on families can explain the uptick in childhood trauma in recent years (Pace et al., 2023). Research findings support this interpretation as they reveal correlations between various types of stressors within the home and community during the pandemic and the incidence of childhood trauma (Jacobson, 2021; Hutchison et al., 2020; Pace et al., 2023).

### *Externalizing Behaviors*

Another theme emerging throughout the literature is the manifestation of externalizing behaviors in elementary schools among children who have experienced trauma. Specific behaviors of concern that were commonly identified include aggression, dysregulation, hyperactivity, and an inability to focus (Frawley et al., 2023; Mitchison et al., 2020). The overwhelming amount of empirical evidence linking externalizing behaviors to the incidence of trauma among children suggests that consideration be given to this connection when devising solutions for managing behaviors. Utilizing a trauma-informed perspective when exploring the connection between behavior and trauma can facilitate a comprehensive understanding of how and why these factors among children are related. This perspective upholds an awareness of the impacts of trauma, emphasizes the prevention of re-traumatization, and distinguishes undesirable behavior as a symptom of trauma (Sweetman, 2022). Assessing motivators of externalizing behavior through a trauma-informed lens suggests that instead of willful defiance, these behaviors are the result of trauma-related impacts on children's cognitive processes and their ability to moderate responses to external stimuli, especially stimuli that is perceived as threatening or that triggers a trauma response (Paulus et al., 2021). Thus, the presence of externalizing behaviors in elementary schools among children with trauma histories can be



explained as the byproduct of traumatic experiences and the various impacts they have on child development.

Polyvagal theory provides a foundational context for a more thorough analysis of this theme. This theory explains how the nervous system evolves to ensure survival through evoking adaptive behavioral strategies (Porges, 2022). These autonomic adaptations also limit the emotional range and simultaneously exaggerate the emotional response to a triggering stimulus, especially when in a physiologically aroused state (Porges, 2022). This theory encapsulates a biological perspective to explain behavior as a product of the nervous system's level of functioning (Porges, 2022). When exposed to acute or chronic stress, neural circuits in the brain remain activated to anticipate a threat and maintain a sense of safety (Porges, 2022). If activated frequently or for long periods of time, the nervous system struggles to downregulate and initiates a threat response even when confronted with benign stimuli (Porges, 2022). In children who have experienced trauma, externalizing behaviors can be the result of autonomic breakdowns which cause them to perceive innocuous cues as threatening and signal an exaggerated neurophysiological response (Porges, 2022).

#### *Lack of Social/Emotional Competence*

The lack of social/emotional competence among elementary school children is another theme identified within the literature. Children with trauma backgrounds struggle to appropriately interact with others, establish meaningful relationships, and manage their emotions (Paulus et al., 2021; Sedillo-Hamann, 2022). A trauma-informed perspective is useful in understanding how trauma connects to a child's difficulty in formulating connections, getting along with peers, and regulating their emotions as it takes into consideration the child's prior experiences when analyzing present areas of need (Sweetman, 2022).

An ecological perspective provides an alternative context for analyzing social/emotional incompetence in children by considering the impact that external factors within a child's environment have on their development. Children exposed to trauma are likely to experience instability within the home due to challenges encountered by parents such as poverty, physical or mental health issues, or substance use, and consistent or unavailable parenting deprives children of regular prosocial interaction with adults in the home during their formative years (Hutchison et al., 2020; Yuniar, 2021). Albert Bandura's social learning theory, which postulates that behavior is learned through observing and imitating others, emphasizes the importance of modeling and engagement between children and caregivers (Kretchmar, 2024). This process is paramount during a child's early developmental years, which is when social/emotional competence is typically established (Kretchmar, 2024). If a child does not engage with adults who exemplify appropriate communication, social skills, and self-regulation skills, they are unlikely to internalize and access those competencies when necessary which causes social/emotional difficulties in the school setting (Kretchmar, 2024).

Attachment theory is also applicable when analyzing the development of social emotional competence among young children, particularly where sporadic or deleterious engagement between the child and caregiver is present (Yuniar, 2021). Attachment theory explains how relationships are formed and maintained and, like social learning theory, underscores the early developmental years as the critical period for establishing healthy connections (Yuniar, 2021). These initial connections are formed between the child and their primary caregiver and are initiated immediately after birth (Yuniar, 2021). Children who fail to form secure attachments with caregivers struggle to develop and maintain healthy relationships throughout childhood and into adulthood (Yuniar, 2021). This trajectory is supported by the literature which outlines the

relationship between poor attachments during a child's early years and social/emotional incompetence later in life (Yuniar, 2021).

### *Traditional Disciplinary Practices*

Educators' and administrators' strategies to manage behaviors in the school setting as well as the negative attitudes they possess toward offending students are other key themes to surface throughout the literature. Historically, the goal of discipline in school settings has been to deter undesirable behavior through punishment (Caldarella et al., 2021; Sedillo-Hamann, 2022). These traditional disciplinary approaches are rooted in an operant framework which entails the presentation of an unpleasant stimulus to decrease unwanted behavior (Caldarella et al., 2021). From a behavioral perspective, these disciplinary practices have the inherent objective of modifying behavior by pairing it with a negative stimulus (i.e., punishment). Educators and administrators embody this approach through their intent to extinguish problem behaviors by delivering reprimands, detentions or suspensions, removal from the classroom, or revoking privileges (Caldarella et al., 2021).

Reasons as to why teachers and administrators exercise punishment as a behavioral management tool and hold offending students in a negative regard can be further explained by attribution theory (Malle, 2022). Attribution theory is a psychological framework that refers to how people attempt to understand others' behavior (Malle, 2022). According to attribution theory, individuals tend to attribute behavior to internal traits rather than external forces (Malle, 2022). These traits may include one's personality, characteristics, or morals (Malle, 2022). Through this lens, a child exhibiting undesirable behavior may be perceived as rude, intentionally defiant, unruly, or unwilling to learn by their teacher, thus deserving of punishment. Viewing behavior from this perspective in the school setting engenders a negative outlook on

students and fails to take into consideration external factors that may be the catalyst for the behavior, such as trauma (Sedillo-Hamann, 2022).

In theory, the use of operant conditioning to minimize misbehavior in schools would mean that teacher reprimands and exclusionary discipline would effectively discourage a student from repeating the behavior. However, this is not the case (Caldarella et al., 2021). Frequent reprimands and exclusionary discipline may suppress behavior in the short-term but lead to an increase in that behavior over time (Caldarella et al., 2021). Despite the behavioral perspective that punishment will deter behavior, Polyvagal theory uses a biological perspective to offer an explanation as to why this doesn't work (Porges, 2022). Students perceive reprimands, loss of privileges, and exclusionary practices as adverse stimuli (Caldarella et al., 2021). Children who have experienced trauma may interpret these consequences as threatening or triggering, activating their autonomic alarm system which is perpetually poised to detect threats to safety and security (Porges, 2022). As a result, children may struggle to regulate their physiological and emotional responses to these types of punishment and react with verbal or behavioral aggression as a defense mechanism. In essence, traditional disciplinary practices that entail punishment and negative reinforcement may serve as an impetus for worsened behaviors.

### *Difficulty Developing Relationships*

The difficulty in relationship development among children that have experienced trauma is another recurring theme throughout the literature. Children with trauma histories have problems communicating with peers, engaging in appropriate play, making emotional connections, and navigating peer conflict (Hutchison et al., 2020; Santamaria-Villar et al., 2021). They are often rejected by peers in social settings due to their hostile and uncooperative nature (Ho et al., 2022; Ogelman et al., 2020). These challenges are likely due to underdeveloped social

emotional competence and their failure to learn appropriate social skills through parental modeling as explained by social learning theory (Kretchmar, 2024). Children's lack of trust in others may inhibit relationship development, which is further supported by attachment theory (Minne & Gorelik, 2022; Yuniar, 2021). These theories provide an ecological perspective on relationship building deficiencies by considering environmental factors such as poor attachments and inadequate skills modeling within the home, and how these factors inhibit children from developing the competencies needed to establish and maintain healthy relationships.

### *Lack of Teacher Preparedness*

Another key emerging theme is the lack of preparedness teachers have when working with children who have experienced trauma and managing its effects in the classroom. More specifically, the literature reveals that teachers lack an understanding of the concept of trauma and how it impacts children, and they feel they are not properly trained in behavioral management strategies from a trauma-informed perspective (Phung, 2022). Limited professional development is a primary reason for these skill deficiencies and may occur for a number of reasons (Phung, 2022). Although continuing education is a requirement for teachers to maintain employment and a current teacher certification, training is costly and is not always covered by the district (Sims & Fletcher-Wood, 2020). Teachers are therefore often limited to accessing training programs that are provided in-house at the discretion of administration which may include a narrow selection of subject matter (Njenga, 2022). For teachers to obtain education in content areas not available during district professional development days, they must find the time and funds to attend ancillary training on their own which hinders teachers from enriching their knowledge base (Njenga, 2022).

Additionally, educators' attitudes on the parameters of their roles may dissuade them from taking courses on trauma and its impacts, particularly if they do not feel that responding to students' traumas in the school setting is within their purview (Sun et al., 2024). A cognitive perspective is useful in examining educator decision-making surrounding their selection of continuing education programs. Through a cognitive lens, behavior is not exclusively motivated by external stimuli and reinforcers; rather, a person's thoughts and emotions are factors to consider when seeking to understand actions (Wallsten, 2024). Adult learning theory underpins this perspective and posits that adult learning is motivated by self-interest and utility (Njenga, 2022). Different from children, adult learners prefer to learn information that connects to and enhances their current knowledge base, is beneficial to them, and offers skills or strategies that can be implemented right away (Njenga, 2022). Through the application of this theory, teachers choose continuing education programs that they perceive to be useful, such as curriculum implementation or classroom instruction strategies. Childhood trauma may be considered outside of a teacher's scope and therefore non-essential to incorporate into their knowledge base.

### *Teacher Burnout*

Teacher burnout is another theme that emerged frequently throughout the literature. Burnout rates among teachers are exceedingly high and can be attributed to a variety of factors (Chan et al., 2021; Tirrell-Corbin et al., 2023). In the case of elementary school educators, the manifestation of trauma in the classroom is a primary source of job stress for teachers (Aragon et al., 2024). Externalizing behaviors, specifically those related to dysregulation, are exceptionally difficult to redirect and occur frequently (Paulus et al., 2021). Behaviors and conflict among students cause regular disruptions to classroom routines and force teachers to pause instruction to intervene, infringing upon the time available for teaching and adding to teachers' workloads

(Aldabbagh et al., 2024). Teachers are also vulnerable to secondary or vicarious trauma when working with traumatized students which aggravates symptoms of burnout (Sun et al., 2024). Lastly, teachers' reported lack of preparedness to manage these problems reduces their sense of competency and increases feelings of overwhelm (Aragon et al., 2024).

From a cognitive perspective, burnout is an emotionally exhausting syndrome that results from chronic stress and subsequently influences behavior (Tirrell-Corbin et al., 2023). The social exchange theory is supported by a cognitive framework and further explains why teachers experience burnout. This theory proposes that past interactions serve as the basis for how much a person is willing to invest in those exchanges in the future (Edu-Valsania et al., 2022). If the interactions are reciprocal and mutually beneficial, they are positively reinforced and likely to continue (Edu-Valsania et al., 2022). However, if a person feels as though their input in the exchange is not reciprocated via an equitable investment, they are disinclined to re-engage (Edu-Valsania et al., 2022). In the case of educators, if they perceive themselves as putting in large amounts of effort to fulfill their job responsibilities and their students or administrators are not reflecting that effort through their behavior, school performance, or support, teachers are unlikely to maintain those efforts and reinvest in their role. According to this theory, the subsequent decrease in morale and increase in fatigue can cause or contribute to burnout.

### *Importance of Early Intervention*

Another prominent theme throughout the literature is the importance of early intervention for children with trauma as well as the implementation of TIPs in schools. The impacts of traumatic experiences are pervasive and yield various short- and long-term negative outcomes related to school performance, self-regulation, social competence, and physical and mental health (Felitti et al., 1998; Hutchison et al., 2020; Paulus et al., 2021; Puchner & Markowitz, 2023).

From a trauma-informed perspective, it is in society's best interest to mitigate these effects and intervene early (Dineen et al., 2022; Peterson et al., 2023). The sooner targeted support can be provided to children who have experienced trauma, the less likely they are to experience poor outcomes (Tabone et al., 2020). Early intervention minimizes the severity of the impacts that trauma has on child development by preventing the establishment of maladaptive brain circuitry, assisting children with emotional processing, and providing children with coping strategies to manage their physical and emotional responses (Tabone et al., 2020). Conversely, in the absence of early intervention, the impacts of trauma may compound and perpetuate problems (Tabone et al., 2020). By approaching this issue from a trauma-informed perspective and providing support to children early, many adverse effects of trauma can be curtailed and their associated problems within the school setting averted (Ho et al., 2022).

### **Ethical Implications**

The literature underscores the importance of making efforts to ameliorate the effects of trauma, particularly among young children. The ethical implications of failing to implement TIPs in elementary schools are significant. Students not given the opportunity to engage in TIPs are deprived of essential support and are at risk of continuing to underachieve academically, engage in disruptive or unsafe behaviors in the classroom, and experience social and interpersonal problems (Avery et al., 2021).

A primary concern of disregarding this issue and one which is foundational to other ethical implications is the perpetuation of trauma-related problems in the school setting and beyond. Of these problems, interminable externalizing behaviors are of utmost concern given their pervasive and pronounced adverse impacts on students and staff (Paulus et al., 2021). Children exhibiting trauma-driven behaviors suffer academically, experience sleep disorders,



struggle to develop close relationships with others, and are more likely to experience familial dissolution through parental break-ups or divorce (Ogundele, 2018). A reciprocal relationship exists between these outcomes and the presence of trauma-driven behaviors whereby behaviors cause adverse effects, and those effects in turn worsen behavior (Ogundele, 2018). Furthermore, the negative impacts to classroom peers and the violence and aggression directed toward staff impair other children's achievement and take a toll on teachers (McMahon et al., 2024; Petersen, 2024).

The impacts that trauma-related challenges have on school climate raise additional ethical concerns and increase the urgency to address these needs (Finch et al., 2023). If schools are derelict in tackling these challenges in a trauma-informed way, school climate will be negatively affected which begets additional problems (Finch, et al., 2023). Elementary schools with negative climates engender low levels of job satisfaction and fulfillment, decreased self-efficacy, and high rates of burnout among educators (Aragon et al., 2024). Specifically, teacher burnout rates are exceedingly high in schools where behavioral problems are prolific (Chan et al., 2021). The negative effects of teacher burnout such as degraded student-teacher relationships and increased use of harsh discipline practices exacerbate the effects of trauma among children in the school setting (Aragon et al., 2024; Caldarella et al., 2021; Chan et al., 2021). Teachers with burnout are also at risk of leaving the profession altogether, which raises considerable concern given the current teacher shortage in the United States (Koch, 2024). A persistence or worsening of this shortage will lead to increased workloads and stress among existing educators, lowered student achievement, and increased economic burdens on school districts and communities (Koch, 2024).

Traditional discipline practices in elementary schools, such as teacher reprimands, exclusionary discipline, and revocation of privileges, present additional ethical implications associated with a failure to address this problem (Caldarella et al., 2021; Sander et al., 2024; Sedillo-Hamann, 2022). Punitive approaches which exclude students from the regular classroom and ostracize them from positive peer interactions further disadvantage children impacted by trauma by inhibiting their social/emotional development and reinforcing negative self-image (Ho et al., 2022; Sanders et al., 2024; Santamaria-Villar et al., 2021; Sedillo-Hamann, 2022). Of exceptional ethical concern is that traditional approaches to discipline, particularly reprimands delivered in sharp tones or by raised voices, risk re-traumatization by triggering children with paralleled traumas which prompt a dysregulated response and precipitate additional adverse outcomes (Caldarella et al., 2021; Puchner & Markowitz, 2023; Sanders et al., 2024).

The causal and predictive relationship between the impacts of trauma, primarily externalizing behaviors, and low academic achievement further supports the importance of implementing TIPs (Kulkarni & Sullivan, 2022; Zarei et al., 2021). Low academic achievement in school is correlated with many of the long-term negative outcomes of childhood trauma and places children at greater risk of experiencing unemployment, homelessness, and criminal justice involvement in adulthood (Kulkarni & Sullivan, 2022). If students are not supported by trauma-aware strategies that neutralize trauma effects and support improved school performance, they are likely to continue to underachieve academically and experience aggravated problems later in life (Jacobson, 2021; Kulkarni & Sullivan, 2022).

Trauma-related externalizing behaviors and their associated complications place children at risk of experiencing a plethora of challenges in adulthood such as poor physical and mental health, long-term unemployment, homelessness, substance abuse, criminal justice involvement,

domestic violence, and poverty (Ogundele, 2018). They are also at increased risk of abusing their own children (Ogundele, 2018). These challenges occurring later in life intersect and compound one another, impairing an individual's ability to function in adulthood and expose younger generations to adverse experiences, perpetuating a cycle of intergenerational trauma (Ogundele, 2018). Additionally, societal systems become overburdened by unaddressed trauma-related needs (Peterson et al., 2023). The various adverse physical and mental health outcomes associated with childhood trauma are costly to treat and overwhelm the healthcare system (Peterson et al., 2023). High unemployment rates create economic disadvantages that decimate already impoverished communities, exacerbate needs, and reinforce patterns of trauma exposure (Berger, 2019). Adolescents and adults that have experienced trauma and struggled from its effects in the school setting are at risk of engaging in criminal activity and being arrested, placing strain on the nation's overburdened criminal justice system (Berger, 2019; Offerman et al., 2022). The increased volume of people accessing and entering these systems inflates costs for other members of society, depletes resources, aggravates present needs, and continues the foundational issue of the prevalence of childhood trauma and its effects on the educational system (Berger, 2019; Peterson et al., 2023).

Childhood trauma and its negative effects are widespread and impact several facets of not only the individual's life but of society as a whole, emphasizing the importance of addressing it expeditiously (Berger, 2019; Peterson et al., 2023). TIPs aim to improve academic outcomes for children and decrease externalizing behaviors by encouraging the use of accommodations and equipping students with self-regulation tools (Ballin, 2021; Jacobson, 2021; Rishel et al., 2019). Through establishing a safe and strengths-based environment and equipping school staff with trauma-informed behavioral management strategies, these practices foster positive school

climates, reduce teacher burnout, and offer alternatives to punitive approaches to discipline (Puchner & Markowitz, 2023; Rishel et al., 2019).

School-based implementation of TIPs can prevent the long-term adverse outcomes of childhood trauma by facilitating early and evidence-based intervention for those most vulnerable to the effects of trauma yet have the most potential to dramatically change the trajectory of these outcomes (Avery et al., 2021). Schools' failures to address the problem of trauma-related needs through the implementation of TIPs inadvertently promote pernicious environments which adversely impact students and staff and enable trauma-related challenges to persist, worsening outcomes for trauma-impacted children, schools, and communities (Finch et al., 2023; Jacobson, 2021; Koch, 2024).

### **Policy Recommendations**

In the last decade, several government agencies and stakeholders in the United States have recognized the adverse effects that trauma has on young children and the ways in which they significantly impact their development and success during and beyond school (Phung, 2022). These entities have acknowledged the importance of utilizing universal trauma-informed approaches to address challenges related to trauma in the school setting and have taken steps to identify solutions to this problem (U.S. Department of Education, 2022). Policy recommendations which promote the implementation of TIPs in elementary schools and support students affected by trauma are provided to advance these initiatives.

Given the lack of rigorous research available on TIPs and their outcomes, policy recommendations to address this problem include expanding the research to build upon existing literature and provide more context for their efficacy (Mullin et al., 2024; Phung, 2022). Enhancing the breadth and quality of empirical data would standardize terminologies related to

TIPs, enable consistent implementation across the country, and provide clear guidance to school educators and administrators on the use of these practices (Mullin et al., 2024; Phung, 2022; Thomas et al., 2019). Lastly, expanding the research available on TIPs and their outcomes will support the development of an evidence-based and universally applicable framework (Thomas et al., 2019). The codification of federal legislation directing the U.S. Department of Education and its subdivisions to conduct ongoing research on TIPs and allocating additional resources for this endeavor would facilitate these objectives (Campaign for Trauma-Informed Policy & Practice [CTIPP], 2023; Mullin et al., 2024).

As more rigorous data on TIPs is made available to inform their development and implementation in schools, states may consider developing a policy that mandates school districts to develop TIPs implementation plans for their elementary schools (CTIPP, 2023). These plans would be unique to each district and would detail either their current use of TIPs and evaluative measures or plans to integrate TIPs if not already established. State-mandated implementation plans would hold schools accountable and provide oversight of their adherence to this initiative (CTIPP, 2023).

Potential drawbacks to implementation plans involve the challenges unique to each school district that may cause this mandate to have the opposite effect (Phung, 2022). Developing and executing an implementation plan may overwhelm schools of limited means and discourage the adoption of these approaches (Phung, 2022). A lack of guidance and support available to school leadership related to TIPs and their implementation may also exacerbate these challenges (CTIPP, 2023). To combat this, states may bolster or create subdivisions within their Department of Education dedicated to providing technical assistance and consultation to schools

in need of guidance to draft implementation plans and effectively incorporate TIPs (CTIPP, 2023).

Access to financial resources necessary to implement TIPs varies wildly across school districts, and these resources on a federal state level are not consistently available (National Council for Behavioral Health, 2022). Funds dedicated to the expansion of TIPs in schools can be worked into local, state, and federal budgets to ensure that financial resources are available to support this initiative (Government Finance Officers Association, 2024). More federal and state grant monies may also be generated and made accessible for districts that require additional funding to support their efforts to integrate TIPs so that policies necessitating their implementation do not place hardships on already overextended districts (National Council on Behavioral Health, 2022). Finally, states may consider incentivizing schools to adopt these practices by allocating ancillary funding to those districts who are actively using or are taking steps to incorporate evidence-based TIPs into their curriculums and school protocols (Center for Health Care Strategies, 2020).

To provide clarity to districts on the types of TIPs to incorporate and increase the likelihood that they will adhere to these expectations, states should identify specific practices and protocols that schools are expected to incorporate into their implementation plans or current practice (Jacobson, 2021). For instance, given elementary schools' current failure to consistently identify students in need of trauma-related support, states may require districts to screen for needs early and provide them with access to a number of valid and reliable assessment tools at no additional cost (Dineen et al., 2022; Splett et al., 2023). School districts can also partner with outside agencies, such as county case management units or local intermediate units, to access professionals qualified to perform these screenings which would alleviate any district concerns

related to the costs or staffing associated with this protocol (Brennen et al., 2020). It is also recommended that schools revise their disciplinary procedures to substitute reflections and redirections for reprimands, limit the use of exclusionary practices, and respond to behaviors by adding support rather than solely revoking privileges through incorporating restorative justice approaches into their implementation plans (Rafa, 2020; Sedillo-Hamann, 2022).

Providing schools with a selection of empirically supported and user-friendly frameworks is a way for states to ensure that schools will follow through with implementation plan development and executive (Mullin et al., 2024). Despite an overall lack of research on the subject, many well-studied and effective practices and frameworks are recommended for use and are already in place in various states across the country (Elrod et al., 2022). States should advise districts on where to access these curricula, assist schools in choosing frameworks best suited to their needs, and provide ongoing assistance and funding as schools integrate them into their protocols (Mullin et al., 2024). Making mental health professionals more accessible to school staff for consultation and student support is another recommendation to address trauma-related needs in the school setting and provide direction for teachers (Berger et al., 2023). Schools can assuage this problem by bringing mental health professionals such as school social workers on staff if feasible, initiating interagency collaboration with outside providers where in-house support is impractical, and providing teachers with a navigable process through which they can connect students to services or seek guidance for themselves as they make efforts to embody a trauma-informed approach in the classroom (Berger et al., 2023; Brennen et al., 2020).

In addition to feeling unsupported and uncertain on how to access support, there is a nationwide consensus that elementary teachers feel unprepared to work with children with trauma and are ill-equipped to implement TIPs (Aragon et al., 2024). A key reason for this is a

lack of training in these areas (Phung, 2022). Recommendations to address this include providing greater opportunities for continuing education on trauma and TIPs (Garay et al., 2024; Reddig & VanLone, 2023). This might entail creating more paid professional development days for staff, providing teachers with stipends to put toward training programs that are not included during in-house professional development, or requiring staff to dedicate a certain number of their required continuing education hours to training related to trauma or TIPs (Berger et al., 2023; Reddig & VanLone, 2023).

Trauma-focused professional development for staff should be collaborative and evoke teacher empowerment, and specific content should include practical strategies for behavioral management and the ways in which the effects of trauma manifest within the educational context (Berger et al., 2023; Koslouski & Chafouleas, 2022). Training programs facilitated by behavioral analysts or technicians would be especially useful for practical application and would support teachers in addressing externalizing behaviors (Berger et al., 2023; Garay et al., 2024). Providing teachers with more professional development opportunities on the effects of trauma and how to manage them in the classroom will boost efficacy, assuage burnout, and improve relationships between teachers and students (Garay et al., 2024).

Policies targeting the role of administrators in the implementation of TIPs are also recommended. Educator buy-in is crucial to the establishment of trauma-informed interventions and supports in schools and is heavily influenced by school leadership (Greig et al., 2021; Puchner & Markowitz, 2023). Requiring school leadership to attend regular trauma-informed leadership training will increase the likelihood of effective implementation of TIPs and will give administrators tools on how to evoke feelings of support and safety among staff as they modify



their practices (Greig et al., 2021). Additionally, administrator support prevents and alleviates teacher burnout (Minne & Gorelik, 2022).

Policies focused on supporting trauma-impacted children and their families early through targeted interventions and engagement in community-based social and mental health supports are also recommended (Phung, 2022). On a micro-level, school districts can promote early intervention for children with trauma-related needs by facilitating easier access to mental health services through hiring school social workers or mental health specialists, collaborating with local providers to ensure continuity of care, or establishing a standardized system through which staff can connect students and their families to services (Brennen et al., 2020; Ding et al., 2023). It is also recommended that schools engage and communicate with local agencies and service providers consistently to maintain involvement in the community-based care of students and promote a cohesive response to student need (Brennen et al., 2020). To accomplish this, schools may include multi-agency collaboration in their trauma-informed policies or their TIPs implementation plan (Brennen et al., 2020).

Lastly, policies enacted on a macro-level which concentrate on the prevention of childhood trauma can target the root of the problem (Lieberman & Ippen, 2024). Specific policy recommendations include drafting legislation that establishes or bolsters existing social programs that provide financial assistance, housing, education, and affordable healthcare for vulnerable and needy families (Lieberman & Ippen, 2024; Phung, 2022). Policies establishing community-based initiatives aimed at teaching caregivers skills related to parenting, emotional regulation, and stress management will decrease the incidence of child maltreatment and exposure to trauma (Branco et al., 2022). Any proposed legislation advancing prevention efforts should entail the

allocation of funding to community agencies and programs to support the implementation and sustainability of these services and programs (Branco et al., 2022).

## **Conclusion**

Childhood trauma is a pervasive issue in the United States and has increased in prevalence during the last five years (Pace et al., 2023; SAMHSA, 2024). Traumatic events entail witnessing or experiencing a distressing or harmful event and include physical, emotional, or sexual abuse, neglect, sudden loss, exposure to violence, life-threatening illness, or serious accidents (SAMHSA, 2024). A number of risk factors exist that make children vulnerable to experiencing trauma such as low socioeconomic status, high-crime communities, domestic violence, instability in the home, parental substance use, and parental physical or mental health problems (Hutchison et al., 2020; Jacobson, 2021; Skiendzielewski et al., 2024).

Trauma occurring in childhood has significant impacts on child development and is associated with the occurrence of behavioral and neurodevelopmental disorders, learning disabilities, and many adverse physical and mental health outcomes later in life (Cai et al., 2023; Crouch et al., 2021; Felitti et al., 1998; Mikolajewski & Scheeringa, 2022; Zarei et al., 2021). These children are likely to struggle with establishing positive relationships, have poor social skills, and lack social/emotional competence (Hutchison et al., 2020; Puchner & Markowitz, 2023). In the elementary school setting, children affected by trauma exhibit disruptive or dangerous behaviors that negatively impact school climate, isolate children from positive connections, contribute to teacher burnout, and prompt harsh disciplinary practices that often aggravate problems (Finch et al., 2023; Ho et al., 2022; Puchner & Markowitz, 2023; Sedillo-Hamann, 2022; Tirrell-Corbin et al., 2023) These children also underperform academically and

are more likely to repeat a grade or drop out of school in adolescence (Jacobson, 2021; Offerman et al., 2022).

As the primary mental health service provider for young children in the United States, elementary schools are in an ideal position to target the effects of trauma and provide early interventions to at-risk students through the use of TIPs (Aragon et al. 2024). However, the problems associated with trauma overwhelm teachers and administrators and place strain on the educational system (Jacobson, 2021; Puchner & Markowitz, 2023). A lack of training, limited access to supportive resources, and challenges associated with implementing and sustaining TIPs exacerbate staff frustrations and inhibit educators and administrators from embracing these approaches, perpetuating the use of ineffective strategies to address trauma-related needs (Berger et al., 2023; Offerman et al., 2022; Phung, 2022).

As childhood trauma and its adverse effects draw the attention of policymakers and stakeholders nationwide, initiatives to devise solutions have gained traction and are focused on promoting trauma-informed schools through the implementation of TIPs (U.S. Department of Education, 2022). TIPs improve behavioral, emotional, social, and academic outcomes for students by promoting safe environments, providing teachers with effective strategies, and advancing students' self-regulatory capacities (Jacobson, 2021; Puchner & Markowitz, 2023). TIPs entail the use of evidence-based frameworks that support students and neutralize the effects of trauma (Rishel et al. 2019). Without these practices in place, students will continue to struggle to manage their trauma-related needs in the school setting, underachieve academically, and remain vulnerable to the many adverse long-term outcomes associated with trauma (Jacobson, 2021; Puchner & Markowitz, 2023). Failure to implement TIPs may perpetuate a negative school

climate, increase teacher burnout, re-traumatize children, and place burdens on communities and the greater society (Finch et al., 2023; Koch, 2024; Peterson et al., 2023).

Several themes emerge throughout the literature and illustrate the key concepts and the scope of the topic. The prevalence and effects of childhood trauma, problems associated with externalizing behaviors, student social/emotional incompetency, the negative impacts of traditional discipline practices, difficulty in relationship development among trauma-affected children, teacher burnout and unpreparedness, and the importance of early intervention are prominent themes that transpired from the research and provide context for the extent of this issue. These themes are best analyzed through the lenses of trauma-informed, ecological, cognitive, behavioral, and biological perspectives and can be further explored through the application of various theories including ecological systems theory, Polyvagal theory, social learning theory, attachment theory, attribution theory, operant conditioning, adult learning theory, and social exchange theory.

Policy development or augmentation is essential to effectively address the problem of childhood trauma symptomatology and promote the expansion of TIPs in schools. Policy recommendations for individual districts entail incorporating trauma-focused and behavioral management training into teacher professional development days, requiring school leaders to attend training focused on trauma, and collaborating with community-based service providers to implement a system through which staff can expeditiously connect students to services (Garay et al., 2024; Grieg et al., 2021; Reddig & VanLone, 2023; Brennen et al., 2020). State-driven policies which promote ongoing research on TIPs will yield a more comprehensive picture of their effectiveness and support the development of a formal implementation framework (Mullin et al., 2024; Phung, 2022; Thomas et al., 2019). Furthermore, policies requiring district-wide

TIPs implementation plans, establishing divisions dedicated to supporting schools throughout the implementation process, facilitating easier access to funding, developing and disseminating evidence-based TIPs frameworks and models, and making improvements to current social welfare policy to support families' various needs will further support TIPs implementation and decrease the incidence of childhood trauma (CTIPP, 2023; Lieberman & Ippen, 2024; National Council for Behavioral Health, 2022; Phung, 2022).

Despite the many adverse impacts that trauma has on young children in the school setting, states and school districts can continue to take steps toward addressing this issue and ensure better outcomes for their children and educators. Widespread implementation of TIPs in elementary schools is a key course of action to ameliorate many of the effects of trauma and the challenges they evoke through encouraging a trauma-informed approach to working with children. By promoting safe environments, emphasizing relationships, and supporting the wellbeing of students and educators, TIPs engender auspicious outcomes and lay the groundwork for healthier futures of trauma-impacted children and their families, schools, and communities.

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