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TEACHERS IMPACTED BY TRAUMA AND HOW DISTRICT AND SCHOOL
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BY THE COMMITTEE CONSISTING OF

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Dedication

Getting a doctorate is a team effort, and I would not have been able to do this without the love, encouragement, and unrelenting support of my family and friends. I dedicate this to my children, Christian, Elisabeth, and Lucas. I hope they always know there is no end to learning and no matter what life throws at them, they can do anything. I also want to dedicate this to my parents who taught me that hard work and determination can take you as far as you want to go. I would be remiss if I didn't also thank my siblings who have always supported me, challenged me, and never failed to make me laugh. I would also like to say a special thank you to Carla Young who pushed me to do this program in the first place and was with me every step of the way, reminding me that I could do this, and I had as much right to it as anyone else. And to Jason, who loved me first, and gave me the name that practically forced me to pursue this endeavor. I love you forever.

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Abstract

Teachers, like all members of society, face instances of trauma, including but not limited to childhood, personal, secondary, collective, and institutional. Additionally, teachers face the most difficult working conditions the profession has ever seen. Districts routinely examine ways to support and retain teachers in the face of a massive teacher shortage. This study seeks to show how teachers' trauma impacts their ability to do their job effectively and how district and school administrators can support their teachers in times of trauma and mental health concerns. Using a General Inductive Qualitative Model, this study used journal prompts and semi-structured interviews of 10 high school teachers from the Oklahoma City metro area to examine teachers' responses to trauma, how it impacted their job performance, and how their district and school administration supported them. It covers current available resources and provides insight into what supports teachers feel would benefit them.

Chapter One: Introduction

Numerous studies have explored the link between school leadership efficacy and teacher satisfaction (Baptiste, 2019; Cansoy, 2018). One of the areas that has been explored is school climate and its impact on teacher attrition and how school leadership can play a significant role in building a supportive and positive school climate (Cohen et al., 2009). An area warranting further research is how various types of trauma experienced by teachers—personal, institutional, or secondary—affect the overall school climate. In this context, there is an opportunity to examine how district and school administration can support teachers who experience trauma, by looking at what needs teachers who experience trauma and other mental health issues have.

Current working conditions for teachers are at an all-time high for inducing stress, burnout, compassion fatigue, and secondary trauma (Ford et al., 2019; APA Task Force, 2022; Lee, 2022). With the increased emphasis on high-stakes testing, the routine decrease in resources, the mass exodus of qualified personnel, the continued threat of violence and school shootings, and the near-constant criticism of the profession by the public, it is no wonder that more teachers are leaving the profession than ever before (Ford et al., 2019; National Council of State Education Associations, 2019; National Education Association, 2022; Farmer, 2020; Ferguson, 2019). Teachers are experiencing panic attacks, increased feelings of anxiety, depression, anger, and more, all of which make it more difficult for teachers to do their jobs (Noonoo, 2022; Lee, 2022). In addition to their mental health, teachers are also expected to attend to their students' mental health needs, often with little to no training and while experiencing their levels of trauma (Blitz et al., 2016). As teachers struggle more with mental health concerns, their physical health is also in jeopardy. Teachers are routinely exposed to infectious illness, unsafe working conditions, poor indoor air quality, and aged buildings that

cause exposure to lead and mold (National Education Association, 2022b). More teachers are missing work than ever before, contributing to the problem (Boudreau, 2019; Cardoza, 2021; Cerulla, 2021). Because of the lack of substitutes, more teachers are covering classes during their planning periods which compounds the stress and anxiety teachers feel. This environment is not sustainable as teachers are expending every available resource they possess.

Impact of Trauma in the Workplace

Given the impact of trauma on every facet of a person's life, there is little doubt that trauma, and the mental health implications related to it, also affect how people can do their jobs. In 2019, the Society for Human Resources Management (SHRM) indicated that 61% of workers said mental health struggles impacted their productivity. That same report revealed that employers spent 10% more on expenses related to mental health than in previous years. These expenses were related to depression, anxiety, and addiction (Agovino, 2019). However, the effects of trauma on the workforce do not stop at benefit expenses, but also in reports of increased absenteeism, tardiness, intentions to quit, and costly errors (USDHS, 1999). Additionally, there is research to show that people who have experienced trauma are more susceptible to work-related stress (Agovino, 2019; Perry & Winfrey, 2021; Van Der Kolk, 2015).

Teachers are especially vulnerable to workplace issues in that they experience job stress at the same rate as nurses and doctors (Lever et al., 2017). When surveyed, teachers who have experienced trauma reported the following as it related to their work: emotional numbing, loss of enjoyment, lack of energy, physical and mental exhaustion, a feeling of cynicism, increased instances of physical illness, aches and pains, increased absenteeism, greater problems with relational boundaries, and difficulty making decisions (Lever et al., 2017). Several of these

behaviors were especially problematic considering the nature of teachers' work. Teachers are often expected to cultivate meaningful relationships with students to mitigate students' trauma (Darragh &Petrie, 2019; Sondel et al., 2017), but when teachers' trauma prevents them from forming appropriate boundaries, this can be disastrous or ineffective. To take it a step farther, teachers, despite their trauma, are often "tasked with mediating the relationship between youth and the public sphere" (Sondel et al., 2017, p. 182). This includes helping students make sense of their role in the world beyond school, including helping them navigate their trauma and lived experiences in the greater community (Sondel et al., 2017). This task is a heavy burden for someone who is facing the same trauma response as the students they serve might be feeling. Lastly, the structure of a teacher's workday is often not conducive to healthy coping responses. Generally, teachers are givers, giving of their time, energy, and resources, for the betterment of their students. Teachers feel an inordinate amount of guilt when prioritizing their needs over those of their students and colleagues (Gearhart, 2022). Additionally, the structure of teachers' work lives is not conducive to participating in activities that prioritize their needs, such as activities related to self-care. This lack of flexibility exacerbates the stress they already feel, adding to how under-resourced they already are, compounding the problem, and adding to the trigger response (Gearhart, 2022).

Problem Statement

As the world of education evolves, so does the role of the teacher. Teachers are expected to play the part of parent, counselor, educator, provider, and in some cases, protector to the students in their care. The demand for teachers is at an all-time high, and as a result, educators are leaving the profession in record numbers (National Education Association, 2022). In addition to the intense nature of the profession, teachers also face trauma in their everyday lives. While

this is not a new phenomenon, adding this to the ever-pressing demands of the profession and the level of trauma can become too much for teachers to endure (Ferguson, 2019). Adverse Childhood Experiences (ACE) scores, self-care, and trauma-informed practices are all buzzwords in the latest movement in education: "trauma-informed schools." While this is a huge move in the profession, a much-needed acknowledgment of the important impact trauma has on learning, most of the research focuses on teachers' understanding of students' trauma and responding accordingly. This is a valuable conversation, to be sure, but questions remain regarding how trauma impacts teachers and their ability to do their jobs and how administrators can support teachers who experience trauma. As teachers become more fluent in identifying and addressing student trauma, the opportunity for teachers to trigger their past or current trauma can arise (Collie et al., 2012; Conti, 2021). Additionally, as they develop more life experience, there also becomes more chance for trauma to affect their daily lives. Trauma can come in many forms and is felt in many ways (Perry & Winfrey, 2021; Van Der Kolk, 2015). However, because of the emotional component of education, teachers encounter trauma in multiple ways; personal circumstances, institutional trauma, and secondary trauma. Like their students, they bring that trauma with them to their practice, and they need support to help manage it.

Trauma has been defined as an emotional response to a terrible event (American Psychological Association, 2021). As more is understood about the brain and how it processes trauma, the definition has been expanded to include any event that causes a strong emotional response (Krouse, 2022). In addition, it results in an overwhelming amount of stress that makes it exceedingly difficult for one to cope (Figley, 2012). By this expanded definition, most people have experienced some level of trauma. These trauma scenarios can be broken down further into big "T" or little "t" trauma experiences (Barbash, 2017; Taylor, 2021). Big "T" trauma is an

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extraordinary and significant event that leaves one feeling powerless and hopeless. One big "T" event is enough to cause severe distress and disruption (Barbash, 2017). Examples of this would be consistent with the original meaning of trauma: natural disaster, a violent crime, a debilitating accident, war, etc. Little "t" trauma is more nuanced and dependent on the person experiencing the trauma events. Little "t" trauma would be stressors that accumulate to exceed one's capacity to cope and cause a disruption to emotional functioning. It is not inherently life or bodily threatening but still leaves individuals with a sense of helplessness (Barbash, 2017; Taylor, 2021). Not all people are influenced by little "t" traumas in the same way, but the experiences can still be significant and alter the way one functions in their day-to-day lives. Examples of little "t" trauma would be interpersonal relationship issues, financial stressors, health problems, job, or food insecurity, and more (Barbash, 2017; Taylor, 2021). Teachers are impacted by either big "T" trauma or little "t" trauma regularly. Teachers experience the loss of loved ones, the struggles of financial woes, health scares, relationship issues, and more, just like other members of society do. Not only that, but they are regularly impacted by the constant societal criticism of educators as not being competent, not working hard enough, not caring about their students, and more (Pressley, 2021). They are often on the front lines of hearing their students' stories of abuse, homelessness, drug and alcohol abuse, and self-harm (Crisis Prevention Institute, 2022; Shevrin Venet, 2019; Whitfield & Kanter, 2014; Yeo, 2021). They experience all of this and more. According to an article from *The Guardian*, 84% of teachers feel "stressed" and one-third of teachers have experienced a mental health-related issue in the past year (Ferguson, 2019). Statistics like these are leading to a teacher shortage crisis across the world.

School administrators are the front lines of defense for addressing and supporting the needs of teachers. Supporting teachers, in their trauma, is as essential as supporting students.

School administrators who foster a positive and inclusive school climate create environments that positively impact every stakeholder within the school community (Collie et al., 2012). One aspect of cultivating a positive school climate is establishing a bond of trust between school administration, staff, students, and other stakeholders (Ford et al., 2019). An important aspect of supporting teachers through mental health concerns also involves trust (Lee, 2022). One way to build that trust is to have transparency and consistency with policies, including how to access resources related to mental health (Camacho et al., 2021).

Purpose of the Study

The purpose of this general inductive qualitative study is to further understand how school and district administration can support teachers who experience trauma and mental health. This study aims to identify what supports teachers who have experienced trauma need and evaluate how school and district administrators make those supports available. The intent is to provide research for district and school administrators to utilize to ensure their teachers are supported and able to thrive even in the face of traumatic situations or other mental health issues. I studied a purposive sample of high school teachers from various high schools in the Oklahoma City, OK metro area. Trauma, as defined above, is an emotional response to a terrible event and can be expanded to include any event that causes a strong emotional response (Krouse, 2022). Institutional trauma refers to "the psychological and emotional effect of harmful, yet normalized, systems, policies, and norms within organizations" (Doxie, 2021). Secondary trauma is the outcome of a person hearing the firsthand account of another person's trauma (Walker, 2019).

Research Question

To better understand how school administrators can support teachers who experience trauma and other mental health issues, the central question for my study is:

- How does trauma (personal, institutional, and/or secondary) affect teachers' job performance?

I will be looking at these secondary questions to expand on the data gathered:

- What assistance is available to support teachers' mental health needs, and how is it utilized?

- How does school administration support teachers who experience traumatic events or other issues related to mental health?

Significance of the Study

As public education continues to see a mass exodus of qualified professionals, school districts continue to look at ways to keep teachers in the profession. The increase in teachers who experience some form of mental health issue because of their job is alarming, and the data are still relatively new (APA Task Force, 2022; Lee, 2022). While there have not been significant studies to support a causation between mental health and the teacher shortage, there is enough data to indicate that mental health issues are a contributing factor to teachers leaving the profession for good.

This study hopes to explore options for school districts to keep experienced applicants in their buildings. Admittedly, everyone's experience with mental health is personal and unique to them, but providing resources that offer support to people is still a worthwhile endeavor. In a study by the American Psychological Association in 2022, 49% of teachers are considering

leaving the profession altogether (APA Task Force, 2022). This is not only an expensive endeavor for school districts, but it is also concerning as there is a significant decrease in the number of teachers coming out of education programs in college (Ford et al., 2019; Noonoo, 2022). School districts need to continue to evolve how they support their employees, not only for the employee's sake or the students' sake but also for their own survival and ability to continue to thrive.

While the research on how trauma affects learning for students has been significant, there has been much less done on how trauma impacts teachers. Only because of the COVID-19 pandemic has there been an increase in the literature on teacher trauma and mental health (Crosby et al., 2020; Daly and Chovaz, 2020; Diliberti et al., 2021; Doxie, 2021; Finstad et al., 2021). Additionally, literature exists that focuses on trauma in helping careers, such as nursing, social work, and psychology (Gray et al., 2017; Greenway, 2005; Herman, 2015). However, a dearth of literature focuses on how trauma impacts teachers and their ability to continue in their work. This study aims to present school districts and site administrators with information to use to support teachers' mental health and create school climates in which teachers feel they have the support needed to continue in their jobs and address their mental health needs.

Rationale

This study followed the general inductive qualitative model (GIQM). Based on the nature of the research being done, qualitative research was the most logical fit for the study based on Yin's (2016) definition of "qualitative research [being] a situated activity that locates the observer in the world." As indicated by the research questions, this study aimed to explore the impact trauma, in its various forms, had on teachers in their everyday lives as educators. This study depended not only on the researcher's interpretations of the data but also on the

participants' individual understanding of their firsthand experiences. Using the GIQM allowed the researcher to move fluidly from questions to data, to analysis, and back again was necessary to fully understand the issues being studied. Additionally, the focus on interpretive data yielded codes and themes that provided analysis. The goal was for this analysis to be applied to cross-populations of educators as the overall issue of mental health continues to be an issue.

Lastly, throughout the study, the data collected and analyzed came from the participants' own words in the form of interviews conducted by the researcher and journals completed by the participants. Because of the questions being asked, the participants were purposefully chosen and were willing to share their experiences as they felt comfortable. As I do not have mental health therapy training, the questions, and data were more focused on the perceived impact trauma had on their jobs rather than on the trauma itself.

Definition of Terms

The following terms were used throughout the study.

*Mental Health***.** Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we manage stress, relate to others, and make choices (MentalHealth.gov, 2017).

*Trauma***.** Trauma has been defined generally as an emotional response to a terrible event (American Psychological Association, 2021). However, as more is understood about the brain and how it processes trauma, the definition has been expanded to include any event that causes a strong emotional response (Krouse, 2022).

*Big "T" Trauma***.** Big "T" trauma is an extraordinary and significant event that leaves one feeling powerless and hopeless. One big "T" event is enough to cause severe distress and disruption (Barbash, 2017).

Little "t" trauma. Little "t" trauma is more nuanced and dependent on the person experiencing

the trauma events. Little "t" trauma would be stressors that accumulate to exceed one's capacity

to cope and cause a disruption to emotional functioning. It is not inherently life or bodily

threatening but still leaves individuals with a sense of helplessness (Barbash, 2017; Taylor,

2021).

PTSD. Post-traumatic stress disorder (PTSD) is a mental health condition you may develop after

experiencing traumatic events (mind.org, 2020)

Compassion Fatigue. Compassion fatigue occurs when one person takes on the emotional or

physical suffering of another person's trauma. Compassion fatigue is a concern for people in

"helping professions" such as nursing, psychology, and more. (Hoffman et al., 2007)

Burnout. The multidimensional theory of burnout includes emotional exhaustion,

depersonalization, and reduced personal accomplishments. Additionally, it can be brought on by

six dimensions of mismatched job to person: work overload, lack of control, insufficient reward,

breakdown of community, absence of fairness. Experiencing burnout leads to the generalized

effect of feeling emotionally and/or physically exhausted and overwhelmed, specifically because

of work-induced stress. (Maslach, 1998; Ford et al., 2019)

Institutional Trauma. Institutional trauma refers to "the psychological and emotional effect of

harmful, yet normalized, systems, policies, and norms within organizations" (Doxie, 2021).

Secondary Trauma. Secondary trauma (also referred to as Secondary Traumatic Stress or

vicarious trauma) is the outcome when a person hears about the first-hand account of another

person's trauma (Walker, 2019).

School Climate. School climate, at its most basic, is the feeling and attitude of the school (Slay et

al., 2019; Collie et al., 2012).

Trauma-informed care. Trauma-informed care (TIC) is an organizational framework that shifts the conversation from 'what's wrong with you?' to 'what happened to you?' (Center for Health Care Strategies, 2018; Perry & Winfrey, 2021; Wolf et al., 2013).

Emotional intelligence. Emotional intelligence is "considered as the capacity of the individual to identify and understand his own emotions and skills to interact with others" (Cui, 2021, p. 1).

Assumptions of the Study and Researcher Positionality

As is typical of the pragmatic epistemological stance, I believe that people's understanding is dictated by their experiences. I came to this study as a middle-aged, middle-class, former classroom teacher. I have experienced poverty, the unexpected deaths of a spouse and other close family members and have been a single parent. I deal with anxiety and depression, both of which have impacted my ability to do my job. I bring that background into this study. In the spirit of self-reflexivity, I utilized a journal to identify my own biases and experiences to keep them separate from collected and analyzed data.

Limitations of the Study

Because this study was conducted with only high school teachers from the Oklahoma City Metro area, the study may be somewhat limited in scope. One possible perceived limitation may include the self-reported examples of trauma, in that they might not reach the definition of trauma that others expect. However, because of the rich data collected from this purposive sample, the data was still meaningful and useful as a baseline of information related to mental health and teacher effectiveness. To expand the data related to this topic, future researchers might consider a larger sample, more frequent journal prompts, different grade levels or specialty, or a more focused exploration of the different types of mental health impacting teachers.

Chapter Two: Literature Review

Like all people in society, teachers experience trauma that impacts their ability to do their jobs effectively. Because of the relational nature of education, when teachers experience trauma there can be far-reaching implications. School and district administrators should continue to work to support teachers who struggle with trauma and other mental health needs to keep good teachers on their staff.

Theoretical Lens

Trauma theory, like most frameworks, has evolved as more is understood about how trauma impacts people. Initially, trauma was seen as a woman's ailment, described as hysteria by psychologists Bruener, Janet, and Freud (Ringel, 2019). This view was solely somatic and attributed to the perceived weakness of women's minds. Freud went on to discount it as an uncomfortable association with aggression toward sex, but Janet maintained that it was a condition felt by women who had experienced some form of sexual assault (Ringel, 2019). However, it was, at this time, a physical manifestation and not considered something that happened in the mind (Ringel, 2019).

From there, symptoms like those seen in hysterical women began to be associated with soldiers fighting in and returning from World War I (Jones & Wessely, 2007). These symptoms included bouts of outbursts, violence, sleeplessness, substance abuse, and other strange behaviors (Jones & Wessely, 2007; Ringel, 2019; van der Kolk, 2015). Again, though, it was attributed to men perceived as weak-minded and had a proclivity for psychological problems. Doctors did begin to see it as a problem with the mind but also maintained that it manifested itself in a somatic way. The claim was that removing the stress-inducing event (the war) would eliminate the symptoms and soldiers would be able to return to battle (Jones & Wessely, 2007). This

mindset continued into World War II. It was not until combat soldiers returned from Vietnam that veteran advocates and doctors began to explore a deeper understanding and explanation for what these men were experiencing (Jones & Wessely, 2007; Ringel, 2019).

In 1980, the American Psychological Association (APA) added Post Traumatic Stress Disorder (PTSD) to its diagnostic handbook. This original definition limited the experience to combat soldiers, which left out many people who experienced sexual assault, domestic violence, abuse, and more (Jones & Wessely, 2007; Perry & Winfrey, 2019; Ringel, 2018; van der Kolk, 2015). In 1994, the work of women's rights advocates expanded the definition to include these events (Ringel, 2019). This iteration was widely accepted but as more clinical studies on trauma were conducted, the definition of PTSD was expanded yet again to include natural disasters, accidents, and other potentially life-threatening experiences (Conti, 2021; Ringel, 2019; Van Der Kolk, 2015). Trauma theory evolved yet again as researchers began to look at symptoms of PTSD and evaluate experiences that were not life-threatening, but still elicited a strong stress response (Carlson & Dalenberg, 2000). Under this new expanded definition, trauma theory adjusted the framework to include events that met three criteria, being uncontrollable by the person involved, inducing negative feelings, and occurring suddenly before the respondent can cognitively adapt (Carlson & Dalenberg, 2000). This conceptual framework built upon the existing theories, but still limited the understanding of trauma and its impact on people.

Collective Trauma

Originally addressed in response to the Holocaust, collective trauma refers to the impact a traumatic event has on an entire society, not just the direct victims of the event (Hirschberger, 2018). Collective traumas are impactful because they shatter the worldview that was held by society to that point, and "expose them to the darker sides of human nature" (Hirschberger, 2018,

p. 3). After the terrorist attacks of September 11th, collective trauma became a more common refrain. As all Americans felt the impact of that event, psychologists and researchers began to explore how collective trauma-impacted people (Updegraff et al., 2008). Marginalized demographic groups and the trauma they face through targeted violence, systemic bigotry, and "persistent and protracted 'micro' or 'insidious' discrimination stressors can elicit negative consequences equivalent to those provoked by more severe events" (Matheson et al., 2019, p. 2). In addition to these forms of collective trauma, news coverage of events can also cause traumatic responses. Coverage of mass shootings, the Boston Marathon bombing, and other events can cause people to experience trauma event if they are not directly involved (Morin, 2020). Collective traumatic experiences shift how society deals with certain societal norms (Morin, 2020). School shootings have had this type of impact on how parents view sending their students to school, sending them "$200 bulletproof backpacks" (Ataria et al., 2016, p.353). The issue of collective trauma is currently ongoing as the effects of the COVID-19 pandemic are still being felt (Finstad et al., 2021).

The Evolving Nature of Trauma Theory

The current framework regarding trauma includes the recognition of both big "T" trauma and little "t" trauma and its effect on a person (Barbash, 2017; Taylor, 2021). The recognition of trauma as felt in both big "T" and little "t" ways illustrates the deeper understanding that mental health professionals have regarding trauma (Barbash, 2017; Taylor, 2021). Trauma is an individualized ailment that cannot be succinctly defined. In *The Future of Trauma Theory,* by Buelens, Durrant, and Eaglstone (2013), trauma is described as "a knot tying together representation, the past, the self, the political, and the suffering" (p. 4). Trauma may be challenging to define, yet it is increasingly recognized as a significant issue. This recognition

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includes accepting that most people have experienced some form of trauma. Supporting

individuals effectively requires acknowledging their trauma through the implementation of

trauma-informed care.

Trauma-Informed Care

At its most basic, trauma-informed care (TIC) is an organizational framework that shifts

the conversation from 'what's wrong with you?' to 'what happened to you?' (Center for Health

Care Strategies, 2018; Perry & Winfrey, 2021; Wolf et al., 2013). According to the Center for

Health Care Strategies (2018), TIC seeks to realize the widespread impact of trauma, recognize

the signs and symptoms of trauma, integrate knowledge about trauma into daily practice, and

actively avoid re-traumatization. TIC requires organizational change to be effective and should

be implemented across the entirety of an organization (Center for Health Care Strategies, 2018;

Kusmaul et al., 2015). While expensive and time-consuming, the benefits of a TIC organization

increase cohesiveness and collaboration while reducing turnover and violent events (Kusmaul et

al., 2015; Wolf et al., 2013). TIC is originally built on five dimensions from the Harris and Fallot

model; safety, trustworthiness, choice, collaboration, and empowerment (Hales et al., 2016;

Kusmaul et al., 2015; Wolf et al., 2013). Later the attention to cultural/historical/gender issues

was added to make sure that organizations were aware of the value of being sensitive to those

issues for employees (Centers for Disease Control and Prevention, 2022).

While some proponents of TIC believe that safety is the priority, studies show that, in

practice, all the dimensions are interconnected and when change occurs in one dimension, it

occurs in the rest as well (Hales et al., 2017). For example, without safety, organizations run the

risk of re-traumatizing anyone associated with that organization. Safety and trust go hand in

hand. Without safety, there cannot be trust and without trust, safety cannot exist (Wolf et al.,

2013). The two dimensions work in concert with each other. Without safety, a sense of fear pervades the organization, and that fear becomes "a contagion that can inflict … and weaken the resolve of the organization … " making it "ripe with hostility and contention" (Wolf et al., 2013, p. 112). To combat this, policies and procedures should be centered around collaboration, empowerment, and choice (Wolf et al., 2013).

For trust to be established, leadership must invest in resources, flatten their role, and embrace the perspectives of all stakeholders, making all team members equally valuable influencers of organizational culture (Kusmaul et al., 2015). While the dimensions of TIC are the goal, consistently, the most important aspect of implementation is training for staff and stakeholders (Brown et al., 2022; Eyal et al., 2019; Kusmaul et al., 2015; Rahimi et al., 2021; Wolf et al., 2013). Training should be ongoing, extensive, diverse, interactive, experiential, and multidisciplinary (Kusmaul et al., 2015).

As student needs evolve, there is sometimes the expectation for teachers and school staff to serve essentially as first responders to the students in their care (Brown et al., 2022). Because many of the students who experience traumatic stressors lack resources, access, or motivation to get treatment, teachers have become the gatekeepers for their students' mental health in addition to their already burgeoning workloads (Eyal et al., 2019). However, studies show that teachers routinely feel "woefully unprepared to deal with the social and emotional needs of the students they serve" (Rahimi et al., 2021, p. 81). When teachers do not receive adequate, appropriate, and ongoing training and care related to the complex childhood trauma that their students experience, they are at a higher risk of experiencing secondary traumatic stress (Brown et al., 2022). Secondary trauma, also known as vicarious trauma or secondary traumatic stress, is the outcome when a person hears about the firsthand account of another person's trauma and internalizes that

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trauma (Eyal et al., 2019; Walker, 2019). The potential outcome of secondary trauma on teachers is withdrawal, disengagement, increased sleep issues, and more (Eyal et al., 2019). Teachers need not only ongoing training but also ongoing support from their employers to deal with the effects of teaching students with trauma (Brown et al., 2022; Eyal et al., 2019).

Human Resources Frame

The human resources frame is defined as being "centered on what organizations and people do to and for one another." (Bolman & Deal, 2017, p. 113). This frame looks at organizations as peopled and that the strength and vitality of the organization come from the people within. It contends that people have a basic hierarchy of needs and for employees to work to the best of their ability, they need those basic needs met by their organization. That hierarchy of needs, while including basic needs like safety, shelter, and sustenance, also includes "the desire for respect, satisfaction, and a sense of accomplishment." (Bolman & Deal, 2017, p. 122).

Theories in Human Resources

Emotional Intelligence

Good leaders possess a high emotional IQ (also called emotional intelligence) (Lynch, 2012). Emotional intelligence (EI) is "considered as the capacity of the individual to identify and understand his own emotions and skills to interact with others" (Cui, 2021, p. 1). Put another way, it also refers to the ability to "manage one's own emotions while being sensitive to the needs of other people" (Gray, 2009, p. 1). Having a high EI allows one to be more attuned to others' emotions, an important trait for leaders who are looking to establish supportive environments within an organization. Some studies link the level of EI with the effects of workplace ostracism (Zhang & Shi, 2017; Hutchinson & Hurley, 2012). This

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relationship creates a fine line of distinction within organizations that want to encourage autonomy, another indicator of EI. Isolation within the workplace can lead to exhaustion, job-related stress, and decreased job performance (Zhang &Shi, 2017). Therefore, leaders need to monitor their workforce and help manage the existing relationships to encourage autonomy while preventing isolation.

Psychological Contract

Within the context of the human resources frame, as presented by Bolman and Deal, some variations directly relate to the field of education and how schools and school districts operate. School districts are distinctly peopled organizations that are built on the notion of relationships. The importance and expectation of building relationships with students, parents, and other stakeholders is an example of a psychological contract as explained by Denise Rousseau. A psychological contract is "the perception of an exchange between oneself and another party" (Rosseau, 1998, p. 665). While not a legal contract, it can be interpreted within the context of the law to be binding, if there is a reciprocal exchange that is mutually understood. While there is some pushback on the validity of the psychological contract, Rousseau explains that evidence shows that disregarding the psychological contract can cause unrest and dissatisfaction for employees leading to the same implications detailed by Bolman and Deal and discussed above (Mike & Rousseau, 2015). This dissatisfaction is an important aspect to consider. Education is a field where "people are less focused on legal contracts and more concerned with managing through relationships … their thinking is less, what am I obligated to do and more about what is appropriate to maintain constructive relationships" (Mike & Rousseau, 2015, p. 244). Relationships, not income, are the driving

force behind teachers going above and beyond, providing considerable evidence that the psychological contract is a real motivator for many educators.

Subtractive Change

And finally, Rousseau also advocates for a practice called subtractive change. Subtractive change is when "the transformed state has fewer components than the original state." (Rousseau, 2021, p. 428). Implementation of subtractive change would be a welcome practice in the field of education. So often, new mandates are given to educators with no discussion on what to do about previous endeavors. With subtractive change, leadership is mindful and attentive to tasks, policies, or other values that are no longer in sync with the organizational goals and removes them from operation (Rousseau, 2021). More commonly, we see additive change, also called scope creep, which adds to the burden that employees feel. This burden becomes problematic because "human bandwidth is finite, the energy and attention needed to deal with a situation can exceed capacity … Performance quality erodes when our pursuits of addition disregard capacity and bandwidth" (Rousseau, 2021, p. 429). This phenomenon is seen in education as more responsibilities are added to teachers' already full plates (National Education Association, 2022). Therefore, companies should consider subtractive change as it can conserve bandwidth and other resources, allowing those resources to be utilized elsewhere (Rousseau, 2021). However, not all subtractive change is equal. Virtuous subtraction involves reflection, attention to outcomes, and updated values and goals. Exploitative subtraction is more common, consisting of subtracting from resources or even the workforce in the form of layoffs. Many companies struggle with subtractive change because reflection is the key, but the payoff can be more productive workers (Rousseau, 2021).

Prosocial Change

Adam Grant contends one reason employees will utilize the bulk of their resources is that they see their jobs as a calling. He calls this prosocial difference, the act of positively impacting the larger community through the job that one does (Grant, 2007). Prosocial change is an aspect of relational job design that emphasizes that interpersonal connections "shape employees' job experiences in important ways" (Grant, 2007, p. 395). In this job design, Grant contends that interpersonal relationships are vital to motivation and enhance employees' motivations, opportunities, and resources at work (Grant, 2007). Interpersonal relations play a part in job motivation, as does task significance in that employees measure the degree to which an employee's work affects the health and well-being of other people (Grant, 2007). Managers looking for new ways to motivate a struggling workforce can examine how jobs can be relationally structured rather than task-structured. In the current educational climate, teachers are consistently given additional tasks that take time away from building their relationships (e.g., testing, prescriptive lesson planning, paperwork), which results in a loss of the prosocial change and relational outcomes the field espouses. Instead of time to build relationships, high-stakes testing has turned teachers into "deskilled workers" as they are now teaching to a test, taking away the incentive and other resources to focus on the more rewarding aspects of the job (Grant, 2007; Wong, 2006).

Employees of all kinds, not just those in education, look for their work to be meaningful on some level (Grant, 2013). Grant (2013) asserts that to get the most out of employees, employers need to appeal to the worker's identity, both the social identity and the structural role identity. To do this, employers need to influence meaningfulness by engaging in meaningful working practices that change what the employees do and engaging

in meaningful work practices that shape the context within which the work is performed, in other words, provide visionary leadership, and remove obstacles to reach goals (Grant, 2013). According to Grant (2013), organizations that do not engage in either practice are most likely to foster employee alienation while organizations that engage in both practices have the potential to be transcendent in that employees know they are involved in something bigger than themselves.

Emotional Regulation

Lastly, a practice that Adam Grant fervently advocates for is emotional regulation training for organizational leaders and employees (Grant, 2013). For companies to be successful, employees need awareness and training in effective strategies for managing emotions. Employees' actions and effectiveness are shaped by emotional states, and how they manage those emotions (Grant, 2013). Employers see positive change when employees use their voices to express ideas, highlight concerns, and offer suggestions for improvement. However, speaking up can be a "risky endeavor for employees as it challenges the status quo" (Grant, 2013, p. 1703). Often, fear is employees' overriding emotion when it comes to voicing their opinions, as they are afraid to speak up. Suggestions made from anger, frustration, or other negative emotions are viewed as complaints rather than constructive criticism (Grant, 2013). Negative emotions increase the frequency of employee voice but decrease the effectiveness (Grant, 2013). Emotional regulation training can teach employees how to "marshal sufficient levels of frustration, anger, or dissatisfaction … to express their suggestions in a constructive manner." (Grant, 2013, p. 1704) One invaluable skill employees can engage in is emotional labor (Park et al., 2019). Deep-acting emotional labor refers to modifying emotions one feels or experiences to produce a desired outcome (Grant,

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2013; Park et al., 2019). Surface acting is modifying the emotions one expresses or displays

to produce the desired result (Grant, 2013; Park et al., 2019). Emotional labor is valuable

because it is relevant to both internal and external emotional experiences and expressions.

Deep acting is a result of emotional intelligence. Surface acting requires control over more

than emotions, but also body language, facial control, and vocal tone. Employees with lower

emotional regulation skills tend to be evaluated lower, so employers can increase emotional

regulation skills by offering training (Park et al., 2019).

Mental Health

Big "T" and Little "t" Trauma

Trauma can best be defined as an emotional response to an intense event (van der Kolk,

2015). Over time, as more is understood about the brain and how it processes trauma, the

definition has been expanded to include any event that results in an overwhelming amount of

stress that makes it exceedingly difficult for one to cope (Figley, 2012). By this definition, many

people have experienced some level of trauma. These trauma scenarios can be broken down

further into big "T" or little "t" trauma experiences (Barbash, 2017; Taylor, 2021). Big "T"

trauma is an extraordinary and significant event that leaves one feeling powerless and hopeless.

One big "T" event is enough to cause severe distress and disruption (Barbash, 2017). Examples

of big "T" trauma would be consistent with the original meaning of trauma: natural disaster, a

violent crime, a debilitating accident, war, etc. Little "t" trauma is more nuanced and dependent

on the person experiencing the trauma. Little "t" trauma would be stressors that accumulate to

exceed one's capacity to cope and cause a disruption to emotional functioning. It is not

inherently life or bodily threatening but still leaves individuals with a sense of helplessness

(Barbash, 2017; Taylor, 2021). Not all people are influenced by little "t" traumas in the same

way, but the experiences can still be significant and alter the way one functions in their day-to-day life. Examples of little "t" trauma would be interpersonal relationships, financial issues, health problems, job, or food insecurity, and more (Barbash, 2017; Taylor, 2021). Big "T" and/or little "t" trauma regularly impact teachers. Teachers experience the loss of loved ones, the struggles of financial woes, health scares, relationship issues, and more, just like other society members.

Other Types of Traumas

In addition to understanding trauma as big "T" and/or little "t," trauma is also classified as acute, complex, or chronic. Acute trauma occurs after a single event. Chronic trauma refers to multiple, long-term exposure to traumatic events over a prolonged amount of time. Complex trauma is the exposure to varied and multiple traumatic events or experiences (Conti, 2021; Crisis Prevention Institute, 2022; Morton, 2021; National Council of State Ed Associations, 2019; Perry & Winfrey, 2021; Shores, 2021; Sprang et al., 2017; van der Kolk, 2015). To further understand trauma, as experienced by teachers, the categories of secondary trauma, collective trauma, and institutional trauma must be discussed. Secondary trauma refers to the change in emotional and mental well-being because of "empathetic engagement" with other's reports of traumatic experiences (Hoffman et al., 2007; Lander, 2018; Nikischer, 2018; Whitfield & Kanter, 2014). As teachers hear about their students' experiences and evaluate the mental health of their students, they run the risk of developing secondary trauma responses. Collective trauma is indicated as the psychological effect shared by a group of any size where the results impact societal norms (Hirschberger, 2018). As a result of the COVID-19 pandemic, teachers have been subjected to the collective trauma that the world experienced. However, there remains pressure from parents, school boards, and districts, for teachers to return to work as usual (Diliberti,

Schwartz, & Grant, 2021). Lastly, institutional trauma is characterized by the actions or inactions of an institute following a traumatic event (Pyke, 2014; Smith & Freyd, 2014). Teachers are routinely asked to put themselves in harm's way, for example during instances of gun violence, natural disasters, or the recent challenges of the COVID-19 pandemic (Diliberti et al., 2021; Gaffney, 2019; Greenway, 2019). This expectation, coupled with the prevalent societal criticism directed toward teachers, indicates our educational institution does not protect teachers' mental or physical health (Gaffney, 2019; Greenway, 2005; National Council of State Education Associations, 2019; Pressley, 2021).

Trauma Response vs. Stress Response

Stress-response, in the strictest sense, refers to the physical manifestation of what happens when one experiences a trauma (Conti, 2021). However, that simplification does nothing to explain the more nuanced meaning of traumatic stress response. Separating the terms stress response and trauma response is nearly impossible, as they contain the same reaction within the body as to be virtually synonymous. A more accurate and widely used term is traumatic stress response, which encompasses the broader understanding of what a person experiences when facing a trauma (Conti, 2021; Richter-Levin & Sandi, 2021; Shors, 2021).

Determining the differences between stress and trauma is a challenge, even for experienced people in the field of therapy. In *Trauma: The Invisible Pandemic* (Conti, 2021)*,* Conti discusses how trauma is "something that we only recognize once the symptoms get out of hand" (p. 12). This interpretation indicates that stress symptoms can compound on each other to develop the same response as trauma. Additionally, *Everyday Trauma: Remapping the Brain's Response to Stress, Anxiety, and Painful Memories for a Better Life* (Shors, 2021) indicates that while the terms stress and trauma are difficult to differentiate, they come down to three things:

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length, intensity, and response during and after. Even this distinction is nebulous and subject to exception. Consequently, without a uniform distinction, much of what therapists and counselors focus on is individual people's responses and how best to address their needs (Conti, 202; Richter-Levin & Sandi, 2021; Shors, 2021).

Effects of Trauma

Psychological and Emotional Effects of Trauma

"Traumatic experiences do leave traces … on our minds and emotions, on our capacity for joy and intimacy, and even on our biology and immune systems" (van der Kolk, 2015, p. 1). Trauma has long-reaching implications that can influence a person far beyond the initial response. People who have undergone any trauma feel the impact of it in their everyday lives. In the case of accidents, natural disasters, or health-related trauma, these effects might be obvious. However, for some people, the trauma effects are internalized and can be harder to identify and associate with the trauma experience. Some of the psychological and/or emotional responses to trauma can include self-harm, suicidal thoughts, depression, increased anxiety, mood swings, sleep and eating disorders, low self-esteem, and boundary issues (Dalvie, 2021; Herman, 2015; mind.org, 2020; van der Kolk, 2015; Woodhouse, 2021).

Moreover, there can also be withdrawal from friends and/or family, feelings of irritability and anger, an inability to focus, anxiety, and an over or under-vigilance regarding the safety of self or others (Barbash, 2017; Lander, 2018; Parker and Henfield, 2012; Pressley, 2021). All of these can vary based on the person but can look like self-destructive or risky behavior, experimenting with drugs and/or alcohol, seeking out physical altercations, or withdrawing completely from interacting with people. These behaviors are individualized to the person but

can have far-reaching implications in relationships, work life, and physical health (mind.org, 2020; Morton, 2021).

Physical and Mental Effects of Trauma

While the initial response is to think of trauma as a psychological ailment, the fact is that trauma has physical implications as well. In *You're Not Broken: Break Free from Trauma and Reclaim Your Life (2021),* Woodhouse states simply, "Our feelings are experienced in our bodies" (p. 132). Woodhouse's assertion reiterates the sentiments in *The Body Keeps the Score* (van der Kolk, 2015), that our bodies physically tell the story of how trauma is processed. Trauma can affect the limbic system, resulting in hyperarousal. Hyperarousal is "the body's way of remaining prepared" (Center for Substance Abuse Treatment U.S., 2014, p. 65). Hyperarousal denies the body time to process information, which can result in chronic health issues (Center for Substance Abuse Treatment U.S., 2014). Research shows repeatedly that trauma and chronic stress lead to several health conditions that include, but are not limited to, heart disease, diabetes, cancer, hypertension, obesity, addiction, and others (Conti, 2021; Perry & Winfrey, 2021; van der Kolk, 2015).

Additionally, trauma can lead to sleep issues, eating disorders, and other behaviors that can cause significant physical health conditions (Center for Substance Abuse Treatment U.S., 2014). Not only can trauma impact a person's emotional, psychological, and physical well-being, but their mental capacity as well. Research shows that people dealing with trauma (either directly or indirectly) show increased lack of concentration, inability to make decisions, brain fog (or inability to "see clearly"), mental disconnect, inability to remember simple tasks, and lack of motivation or concern for the task at hand (Conti, 2021; Herman, 2015; Morton, 2021; Perry & Winfrey, 2021; Shors, 2021; van der Kolk, 2015; Woodhouse, 2021). The impact of trauma has

more complex consequences than simply the emotional or psychological toll but can also damage one's physical and mental self as well.

Trauma Response and Being "Triggered"

In her book, Dr. Woodhouse (2021) indicates people who have experienced trauma (big "T" or little "t") have a trauma response when triggered. This trauma response can be destructive or empowering and depends on the person. How someone responds to past trauma can influence how trauma affects the body (van der Kolk, 2015; Woodhouse, 2021). Everyone has coping responses to different influences. People who have healthy coping responses are empowered. However, people who have experienced trauma can develop dysfunctional coping responses, i.e., traumatic coping, which "is reactive, uncontrolled, and disempowering" (Woodhouse, 2021, p. 132). It is not a healthy response to a trigger. A trigger is "something in our environment that reminds [someone] of [their]traumatic event and causes [them] to have a deep, emotional reaction" (Morton, 2021, p. 184). The workplace is full of triggers, especially for teachers. Triggers can include criticism, hearing about a traumatic event that happened to someone else, being yelled at by students or parents, or witnessing a violent act like a fight between students, among others (Crisis Prevention Institute, 2021). These are obvious and can lead to dramatic trauma responses from teachers. Conti (2021) and Perry and Winfrey (2021) agree that hunger, anger, loneliness, and tiredness (collectively known as HALT) are less obvious but more common. These are quite common in the everyday lives of teachers, often leaving them under-resourced. Under-resourced people are quicker to be triggered into their coping responses (Morton, 2021; Woodhouse, 2021).

Impact of Trauma in the Workplace

Given the impact of trauma on every facet of a person's life, there is little doubt that trauma, and the mental health implications related to it, also affect how people can do their jobs. In 2019, the Society for Human Resources Management (SHRM) indicated that 61% of workers said mental health struggles impacted their productivity. The same report revealed that employers spent 10% more on expenses related to mental health than in previous years. These expenses were related to depression, anxiety, and addiction (Agovino, 2019). However, the effects of trauma on the workforce do not stop at benefit expenses but also in reports of increased absenteeism, tardiness, intentions to quit, and costly errors (Alonso, 2022; Gray et al., 2017; USDHS, 1999). Additionally, there is research to show that people who have experienced trauma are more susceptible to work-related stress (Crisis Prevention Institute, 2021; Perry &Winfrey, 2021; Shors, 2021; van der Kolk, 2015).

Teachers are especially vulnerable to workplace issues because they experience job stress at the same rate as nurses and doctors (Lever et al., 2017). When surveyed, teachers who have experienced trauma reported the following as it related to their work: emotional numbing, loss of enjoyment, lack of energy, physical and mental exhaustion, a feeling of cynicism, increased instances of physical illness, aches, and pains, increased absenteeism, greater problems with relational boundaries, and difficulty making decisions (Lever et al., 2017). Several of these behaviors were especially problematic because of the nature of teachers' work. Teachers are often expected to cultivate meaningful relationships with students to mitigate students' trauma (Crisis Prevention Institute, 2022; Darragh & Petrie, 2019; Sondel et al., 2017), but when teachers' trauma prevents them from forming appropriate boundaries, this can be disastrous or ineffective. To take it a step further, teachers, despite their trauma, are often "tasked with

mediating the relationship between youth and the public sphere" (Sondel et al., 2017, p. 182).

This expectation is a heavy burden for someone who is facing the same trauma response as the

students may be. Lastly, the structure of a teacher's workday is often not conducive to healthy

coping responses. As a rule, teachers are givers, giving of their time, energy, and resources, for

the betterment of their students. With this in mind, teachers feel an inordinate amount of guilt

when prioritizing their needs over those of their students and colleagues (Gearhart et al., 2022).

Additionally, the structure of teachers' work life is not conducive to participating in activities

that prioritize their needs, such as activities related to self-care. This lack of opportunity for self-

care exacerbates the stress they already feel, adding to how under-resourced they already are,

compounding the problem, and adding to the trigger response (Gearhart et al., 2022).

Trauma in Education

Teachers, like all people in society, are impacted by either big "T" trauma or little "t"

trauma regularly (Barbash, 2017). Teachers, like others, face various personal challenges

including grief from losing loved ones, financial difficulties, health concerns, problems in

relationships, and housing insecurity, to name a few. These challenges encompass both big "T"

and little "t" forms of trauma. Also, teachers are regularly impacted by the consistent societal

criticism of educators as not being competent, not working hard enough, and not caring about

their students (Pressley, 2021). They are often some of the first to hear the stories of their

students including abuse, homelessness, drug and alcohol abuse, and self-harm (Crisis

Prevention Institute, 2022; Shevrin Venet, 2019; Whitfield & Kanter, 2014; Yeo, 2021). These

experiences are taking a toll on teachers as 84% of teachers feel "stressed" and one-third of

teachers have experienced a mental health-related issue (Ferguson, 2019). Statistics like these are

leading to a teacher shortage crisis across the world.

Developing a Positive School Climate

Leadership is a prominent issue that can "influence teachers' experiences and work-life" causing teachers to reconsider their working environment in favor of something better (Baptiste, 2019, p. 4). For teachers to thrive, they are looking for "empowerment, authenticity, engagement, self-efficacy, and motivation," all of which require a certain amount of trust (Hughes and Pickeral, 2013, p.1). Trust becomes an important factor for teachers when considering school climate, especially when considering traumatic experiences.

Without a level of trust, school climate can be severely impacted negatively. One measure of success in teachers' classrooms is relationship-building and rapport. This same measure extends to school administration and their teachers. When schools foster an environment of relational trust, they create and maintain positive school climates, leading students to achieve (Fullan, 2003; Gray et al., 2017; Kahn, 2019). Relational trust consists of respect, competence, personal regard for others, and integrity (Fullan, 2003). Schools thrive when these are in place and developed by school administrators. Therefore, school administrations that invest resources in relational trust and school climate will find more committed teachers. Just like students who feel supported and understood, teachers also seek a workplace that will make them feel supported, appreciated, and understood. Teachers in school climates that do this will stay in the profession longer than their more disgruntled colleagues (Vail, 2005).

That support, appreciation, and understanding can come in many forms: resources for curriculum, assistance with classroom management, and reinforcement with parents, for example. These are very typical responses of leaders who want to support their teachers. However, as the conversation has shifted to a more comprehensive social-emotional learning

environment for students, teachers are finding they need mental health resources, self-care opportunities, compassion, and empathy from their supervisors (Gray et al., 2017). As discussed, there is both a physiological and psychological response to how people process trauma. Sometimes, this trauma can stick with people for years and resurface decades later (van der Kolk, 2015). As a result, teachers need ongoing access to mental health resources. As teachers are expected to take on more responsibility, address their students' trauma, defend their profession, and live their lives, they create the potential for triggers, anxiety, and symptoms of trauma to occur (Greenway, 2005). School administration can assist in minimizing the effect of these triggers. There is a need for school leaders to acknowledge their responsibility to the teachers who are taking on this work. In their article, "Preventing Secondary Traumatic Stress in Educators," the authors break down the lack of information that is provided to teachers, including identifying the differences between trauma and burnout (Hydon, et al., 2015). They also identify the clear need for school administrators and pre-service teachers to be educated in techniques that encourage self-care and assistance resources.

School Leadership

As society evolves, so must the skills needed to be effective. Leadership, especially school leadership, continues to be impacted as the role of schooling changes. As an institution, education is now a global endeavor, where stakeholders are expected to compete globally (Thompson & Abowitz, 2016). While school administrators do still need to maintain the traditional skills associated with being a principal, namely the focus of school administration to improve students' academic prowess and establish American education ability on a global scale, research indicates that leaders who create and communicate a shared vision, establish and maintain positive climates, empower and encourage stakeholders, and also improve and monitor

instruction are seeing greater success in teacher retention, as well as student achievement (Fullan, 2003; Trinidad Sanchez-Nunez et al., 2015). The common denominator in accomplishing all these components is high emotional intelligence. EI refers to the ability to "manage one's own emotions while being sensitive to the needs of other people" (Gray, 2009, p. 1). Throughout the literature, much suggests that EI is a pivotal skill in educational leadership (Aguilar, 2018; Berkovich & Eyal, 2018; Finnigan & Maulding-Green, 2018; Gray, 2009; Patti et al., 2018). Leaders should be driven by a clear vision and communicate that vision in a way that inspires others (Ryan, 2009), Inspiring others to action is a defining characteristic of leaders (Sinek, 2009). Effective leaders engage in five common practices: "modeling a path forward, inspiring a vision, challenging the process, enabling others to act, and encouraging [passion]" (Nicely et al., 2003, p. 4). Additionally, leaders need "to be more human than ever," meaning they operate from a place of empathy, working to build trust, listening, and acting on the needs of others (Bunker, 2012). These are all aspects of emotional intelligence.

Increasingly, teaching is an emotionally charged profession, with teachers and staff balancing their students' emotional health as well as their own. School environments contain a multitude of stressful situations, and educators take the brunt of that stress in a myriad of ways (Farmer, 2020). School administration needs a way to manage not only their stress but the stress and anxiety their teachers are facing. Administrators who understand their emotions can create an environment where "emotions matter," there is a culture that supports stakeholders "socially and emotionally," and a customary practice includes "self-reflection," and "self-care practices" are encouraged and prioritized (Patti et al., 2018). Additionally, when school administrators emphasize these practices and are authentic, they develop an environment of trust, respect, and empathy (Moore, 2009).

School administrators with highly developed EI are more effective at developing a culture of empowerment, collaboration, and achievement (Moore, 2009). Through empirical research it can be argued that "leaders high in emotional intelligence may be more skillful in influencing, inspiring, intellectually stimulating, and growing their staff" (Moore, 2009, p. 21). Because of the intense emotions facing educators presently, there remains a need for leaders adept at maintaining composure and professionalism at all times (Finnegan & Maulding-Green, 2018). Effective school administrators should be able to connect with their stakeholders using careful practice, empathy and concern for others to help build positive emotions (Gray, 2009). This connection requires skill and understanding where those emotions come from, which is the foundation of EI (Finnigan & Maulding-Green, 2018). EI is essential in developing a safe climate (Goleman, 2006; Gray, 2009; Moore, 2009). Climate and culture remain a vital part of any school's success. Schools with a climate of cooperation, communication, and positive interactions saw higher instances of student success and achievement (School Climate Improvement | Safe Supportive Learning, 2022). Leaders who develop a climate based on relationships are more effective and help teachers and students learn more efficiently (Goleman, 2006).

School Administration's Role in Teacher Support

School administrators are the front lines of defense for addressing and supporting teachers' needs. EI and TIC are crucial in supporting teachers in their trauma (Arundel, 2022; Gray, 2009). As the conversation has shifted to a more comprehensive social-emotional learning environment for students, teachers are finding they need support in mental health resources, self-care opportunities, compassion, and empathy from their supervisors (Lander, 2018). Trauma is not always defined as a big, life-altering event. While teachers are experiencing big "T" trauma

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such as the death of loved ones, natural disasters, and physical and emotional abuse to name a few, they regularly experience little "t" trauma such as divorce, financial troubles, legal issues, and more (Barbash, 2017; Taylor, 2021). School administration can assist by acknowledging their responsibility to the teachers who are taking on this work (Hughes & Pickeral, 2013). By providing extensive training on handling complex childhood trauma, self-care, and other issues around being trauma-informed, school administration can support their teachers (Brown et al., 2022; Eyal et al., 2019).

Resources and Requirements at the District and School Levels

To truly be a trauma-informed school, districts need to provide technical and humanistic resources that speak to the six dimensions of TIC; safety, trustworthiness, peer support, collaboration, empowerment, and cultural/historical/gender issue sensitivity. In *What Happened to You?* by Perry and Winfrey (2021), it is asserted that "relationships are the currency of change" (p. 285). Building and maintaining strong relationships is at the core of building true TIC in schools (Arundel, 2022; Williams, 2017). Part of relationship building is to provide the time and space for meaningful collaboration. (Arundel, 2022; National Education Association, 2022; Guarino & Chagnon, 2018). Not only is it important to build relationships within the school, but there is also an emphasis on building meaningful partnerships with community members and groups, with the hope of "extending the village so that teachers aren't feeling like they single-handedly have to figure it all out" (Arundel, 2022, p.3). As Hales et al., (2016) mentioned, when one dimension is changed, all dimensions change. By building relationships, trustworthiness, safety, and collaboration become improved as well (Williams, 2017).

To help leaders instill a trauma-informed mentality across all stakeholders, some resources need to be in place to help teachers. A key change that schools can explore is

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increasing staffing. A common job-related stressor that can be a trigger for teachers dealing with trauma can be the ever-increasing workload they face, especially in the wake of the COVID-19 pandemic. Increasing the number of teachers would decrease the class size for teachers, allowing them to build more meaningful relationships with their students, as well as increase their opportunities for collaboration with other teachers (Najarro, 2022; National Education Association, 2022; Guarino & Chagnon, 2018). In addition to increased staffing, it is important to reduce turnover within schools. Part of building trust is creating stability. Decreased teacher turnover is one way to build stability and continuity (Gross, 2020).

Creating Inclusive Environments

With increased staffing, districts should attempt to ensure inclusive environments for teachers of underrepresented demographics. Districts need to support teachers of color, teachers who are part of the LGBTQ+ community, and other underrepresented groups. Many from these groups report bias, microaggressions, and other discriminatory practices from colleagues and administration. Districts need to prioritize policies that promote a culturally responsive and inclusive environment, provide ongoing training around implicit bias and social justice initiatives, allow marginalized group members to participate in the development and implementation of curriculum, and create opportunities to diversify leadership roles. (Gross, 2020; National Child Traumatic Stress Network, 2017; National Education Association, 2022).

In addition to creating inclusive policies, districts should work to provide meaningful training for teachers that addresses policy change and issues specific to trauma-informed care. Teachers feel underprepared to address student trauma and need more training about trauma response and how to be trauma-informed. Training will build trauma literacy, helping educators and administrators familiarize themselves with the continuum of trauma, as well as how to

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recognize trauma response, techniques for de-escalation, and cultural responsiveness (Brown et al., 2022; National Education Association, 2022; Guarino & Chagnon, 2018). Additionally, it means training on how to recognize trauma responses and/or feelings of burnout in teachers themselves along with techniques in self-care and building resilience (Boogran, 2020; Perry & Winfrey, 2021; Williams, 2017). Self-care is vital to trauma-informed care because "if you don't give back to yourself, you simply will not be effective as a teacher" (Perry & Winfrey, 2021, p. 284). TIC has historically been focused on students' needs, but "If [schools] help the children but don't meet the needs of the adults, [the]work will have little impact … [districts] have to help the frontline adults who will be working with the children and youth" (Perry & Winfrey, 2021, p. 284).

In addition to training teachers, school administration should have targeted training in trauma-informed care. Studies show that leadership style predicts teacher retention (Baptiste, 2019). Districts should take time to ensure that leaders are trained in culturally responsive techniques and TIC (National Education Association, 2022; Guarino & Chagnon, 2018). Well-trained school administrators can improve working conditions and foster nurturing and inclusive environments (Guarino & Chagnon, 2018; National Child Traumatic Stress Network, 2017; National Education Association, 2022).

Additionally, quality leaders who take time to develop relationships with their staff model the type of environment that teachers should emulate in their classrooms with students (Gross, 2020; National Education Association, 2022). Districts should also provide training to leaders that assists in developing EI, building resilience, and developing culturally responsive policies (Building Trauma-Informed Communities | Blogs | CDC, 2022; Guarino & Chagnon,

2018). Building relationships not only helps administrators be trauma-informed but also inspires trust, which is the foundation of safety.

Building Quality

Historically, teachers have always been concerned about health issues related to teaching. Issues related to the building quality, like exposure to mold, lead, poor air quality, and more, were already concerns that educators faced (National Education Association, 2022). During the COVID-19 pandemic, the demands of the public for teachers to return to school drowned out the concerns that teachers felt for their health and that of the health of their families (Gross, 2020). Teachers existed in a near-constant fear of contracting COVID-19 (Cardoza, 2021). School districts should work diligently to eliminate health issues like lead, mold, and air quality by investing in building initiatives and by developing policies protecting employee health regarding exposure to infectious diseases and illnesses (Guarino & Chagnon, 2018).

In addition to the threat of infectious illness, school staff also deal with the ongoing threat of school shootings and other violence-related episodes (Gross, 2020). During COVID, 60% of teachers were impacted by school violence in the form of verbal or physical assault (Kamenetz, 2022). These statistics may seem shocking, but for many educators, they are commonplace. Incorporating social-emotional learning and trauma-informed practices can lower the rates of violent incidents in schools (Kusmaul et al., 2015; Wolf et al., 2013). A comprehensive safety plan regularly reviewed, updated, and vetted by staff and other safety professionals is essential in creating a safe and healthy workplace (National Education Association, 2022; Guarino & Chagnon, 2018; Gross, 2020).

Employee Assistance Programs

Another resource that teachers benefit from is ongoing access to mental health supports. District human resources departments should work to ensure access to affordable health insurance that "does not impede access to mental health services" as well as provide access to "employee assistance programs that are robust and easy to use" (National Education Association, 2022, p. 3). Providing access to online and technology-based resources, like the Calm app or telehealth mental health counselors also profoundly supports employees. Additionally, districts and school sites should put mentorship, coaching, and other groups in place for teachers, so they feel like they have an ongoing team of people in their immediate proximity for support (Guarino & Chagnon, 2018). Lastly, making on-site counseling available through building-level mental health counselors that students and teachers can use can help eliminate some of the convenience issues related to seeking mental health treatment (National Education Association, 2022).

Finally, districts and sites can look at internal structures to see if there is room for change, including restructuring the workday. At its most basic, educators need more time. There is not enough time to accomplish all the required tasks throughout the day, leaving teachers overwhelmed, exhausted, and burned out (Farmer, 2020; Ferguson, 2019; Hydon et al., 2015; Lander, 2018). Feelings of guilt and being overwhelmed can be a trigger of trauma for teachers, causing them to withdraw and shut down completely. On average, teachers spend 10-14 hours a week outside the school day to complete the administrative tasks associated with teaching such as planning, grading, contacting parents, and more (Najarro, 2022). Some solutions to providing more time include adjusting bell schedules, increasing staffing to offering more planning hours during the day, allowing for co-teaching classes and offering year-round schooling (Guarino & Chagnon, 2018; National Education Association, 2022). Districts should work with collective-

bargaining groups on school structures that help teachers manage their workload (National Education Association, 2022).

Legal implications of trauma

As more is understood about trauma specifically, and as the stigma of mental health concerns continues to abate, there have been legal protections put in place for employees of all types. These legal protections ensure that employees are protected under the law if they experience a traumatic experience. As more is understood about the long-term effects of trauma, a more concerted investment has been made globally. The World Health Organization (WHO) is implementing a Comprehensive Mental Health Plan to shine a light on the need to invest heavily in mental health plans worldwide. Despite the increased attention to the need for more mental health coverage, effective care remains low (WHO, 2022). In the United States, the treatment of mental health concerns continues to be an ongoing debate. The Centers for Disease Control and Prevention (CDC) has put together statistics on how mental health issues impact Americans. In a recent data brief published by the CDC, the trend shows a steady increase in the number of adults who have experienced a mental health issue and have sought treatment (Terlizzi & Schiller, 2022). The CDC advocates a trauma-informed approach to interacting with the world, acknowledging that statistics show that most people have experienced some form of trauma (Building Trauma-Informed Communities | Blogs | CDC, 2022). As a result of the increased discussion of the number of people who have experienced trauma and/or are dealing with a significant mental health issue, there has been a movement to acknowledge mental health on all fronts, including how it should be treated in the workplace. According to the Equal Employment Opportunity Commission (EEOC), anyone suffering from "depression, PTSD, or another mental health condition [is] protected against discrimination and harassment at work … [has] workplace

privacy rights and may have a legal right to accommodations that help [them] perform and keep a job" (U.S Equal Employment Opportunity Commission, 2016). Reasonable accommodations could include alternate work schedules, a quiet and orderly environment, changes in supervisor methods, and permission to work from home, for example. These accommodations would be accessible if the mental health condition would "substantially limit" the employee's ability to participate meaningfully in any major life activity (U.S Equal Employment Opportunity Commission, 2016).

Americans with Disabilities Act

The Americans with Disabilities Act (ADA) grants protections enforced by the Equal Employment Opportunity Commission (U.S Equal Employment Opportunity Commission, 2016). The ADA does not list specific disabilities but contains a general definition of disability that individuals must meet on a case-by-case basis (Heise, 2022; Kleinman & Egan, 2001). A person must be unable to perform a major life activity to meet the criteria of a disability. Regarding PTSD and other mental health concerns, an individualized assessment will result in the determination of a disability (Heise, 2022; Kleinman & Egan, 2001). Some examples of behaviors associated with PTSD include memory problems, lack of concentration, and absenteeism (Heise, 2022). Employees do not have to disclose a mental illness, and employers cannot terminate employment simply because an employee has a mental illness (Heise, 2022). If an employee needs support during a mental health episode, the Family and Medical Leave Act (FMLA) kicks in. FMLA provides job-protected leave for employees so they can address mental health conditions (U.S. Department of Labor, 2022; Nowack, 2022).

Family and Medical Leave Act

Elementary and secondary public and private schools are FMLA-covered employers (U.S. Department of Labor, 2022). FMLA requires employers to provide up to 12 weeks of FMLA leave a year, continue an employee's group insurance under the same conditions, and restore the employee to a comparable position at the end of the taken leave (U.S. Department of Labor, 2022). An eligible employee may take FMLA leave to care for a serious health issue, meaning an issue that requires hospitalization or the ongoing treatment of a health care professional (U.S. Department of Labor, 2022). Employers are prohibited from attempting to deny any FMLA right and should be proactive in offering FMLA leave when an employee is in distress or unaware of what kind of leave to ask for (U.S. Department of Labor, 2022; Nowack, 2022).

Occupational Safety and Health Administration

As issues related to trauma and mental health are protected cases under the ADA and FMLA, it is not impacted by the Occupational Safety and Health Administration (OSHA). The OSHA General Duty Clause, "states that an employer must provide each of its employees with a workplace that's free from recognized hazards that are causing or are likely to cause death or serious physical harm" (Ayers, 2020). The term "serious physical harm" frees employers of the responsibility to protect employees from sexual harassment, workplace violence, bullying, and other traumatic events. Other laws protect employees from those issues, but they do not fall under OSHA's purview. However, OSHA has developed a policy entitled Enforcement Procedures and Scheduling for Occupational Exposure to Workplace Violence, which provides that an employee who has experienced acts of workplace violence, "or becomes aware of threats, intimidation, or other indicators showing that the potential for violence in the workplace exists,

would have cause to put his employer on notice of the risk of workplace violence" (Ayers, 2020, p. 2). This policy opens the door to addressing the need for employers to protect their employees from psychological harm. However, that has not been codified into law yet.

Workers' Compensation

Another legal protection available to employees is workers' compensation. Workers' compensation laws are state-based and vary depending on what state employees live in. Public school employees are covered by workers' compensation laws in the state of Oklahoma. Currently, in Oklahoma, trauma treatment is only covered if the trauma was caused by an injury that occurred at work. An exception to this is if an employee is the victim of a violent crime that occurs at work (Oklahoma Workers' Compensation Commission, 2022). However, regarding OSHA and Workers' Compensation, the best practice is for employers to attempt to provide work environments that are safe and that benefit not only the physical health but also the mental health of their employees.

Employers have a moral motivation to provide resources to their employees and also a financial one (National Education Association, 2022). Employee attrition is an expensive endeavor for employers as hiring and training employees is a time-consuming process. As more is understood about trauma and the frequency of trauma-related experiences, employers are encouraged to instill a trauma-informed approach to their business models as a matter of not only compassion but of future success as well.

Synthetic Review and Conclusion

Teachers are leaving education in record numbers and the trauma they are experiencing is one of the very real reasons for that. Ultimately, when teachers leave, students pay the price. Employing genuine trauma-informed care to not only students but staff as well is one step to

managing this issue and offering teachers the support they crave. Additionally, the role of the school administration has a significant impact on how teachers respond when they are struggling with their trauma. Understanding, training, and an ongoing acknowledgment of teachers' needs are essential to developing and maintaining a positive school climate and keeping quality teachers in the classroom.

Chapter Three: Methodology

Research indicates current conditions in education contribute to negative mental health issues for teachers. Additionally, teachers need support when dealing with trauma in its many forms. The purpose of this general inductive qualitative study was to understand further how trauma impacts teacher job performance and how school administration responds to teachers who suffer from trauma experiences and how that response supports the teachers who report to them. This study aimed to identify what supports teachers who have experienced trauma need and evaluate how school district and site administrators can implement those supports. The intent was to provide research for district and site administrators to utilize to ensure their teachers are supported and able to thrive even in the face of traumatic situations or other mental health issues. I studied a purposive sample of 10 high school teachers from schools in the Oklahoma City, OK metro area.

Research Questions

As previously discussed, this study intended to explore the question:

- How does trauma (personal, institutional, and/or secondary) affect teachers' job performance?

I also looked at these secondary questions to expand on the data gathered:

- What assistance is available to support teachers' mental health needs, and how is it utilized?

- How does school administration support teachers who experience traumatic events or other issues related to mental health?

This study hopes to explore options for district and school administration to support better their teachers who need it and to keep experienced applicants in their buildings. School districts

need to continue to evolve in how they support their employees, not only for the employee's

students' sake but also for their own survival and ability to thrive.

General Induction Qualitative Model

In this orientation, the General (or generic) Inductive Qualitative Model (GIQM) is

especially situated to be an effective research design whose focus is on the outward words,

language, and individual experiences (Percy et al., 2015). Described as "a practical approach that

involves skillfully using qualitative methods to answer questions about relevant topics in a real-

world setting," GIQM is used when the topic does not fit within the traditional models (Kostere

& Kostere, 2022, p. 2; Caelli et al., 2003; Hood, 2007; Lui, 2016; Maxwell, 2013, Percy et al.,

2015). Like qualitative research models, the sampling is purposeful and usually includes a small

number of participants (Hood, 2007; Percy et al., 2015). The participants do not cover the

breadth of demographics but represent the phenomena being studied in some way (Lui, 2016).

Each participant is treated as an individual with the data consisting of their experiences as told in

their own words (Percy et al., 2015). In this model, data are derived from journals and semi-

structured interviews, with the more open and conversational interviews yielding more data from

which to draw (Hood, 2007; Lui, 2016; Percy et al., 2015). Once data are collected, the model is

inductive, meaning that conclusions are grounded in data, and the data of specific cases are

extrapolated to a more generic conclusion (Patton, 1987).

The GIQM is an evolutionary model in qualitative research, and studies done with this

model "have become quite common" (Caelli et al., 2003, p. 2). This model's lack of adherence to

the criteria of other models grants it flexibility that makes it a useful method (Lui, 2016). When

researchers establish research questions that do not easily adhere to a traditional model, the

GIQM offers an alternative to the rigid confines of said models, while providing tools that established methodologies offer.

The GIQM has been touted as a valid choice for applied research when the study does not easily fit into other traditional approaches, but this is not the only reason to pursue this research method. The advantage of the GIQM is also what makes it especially situated for applied social research (Caelli et al., 2003). GIQM research studies "epitomize the characteristics of qualitative research, but rather than focus on the [criteria of traditional methods], they simply seek to discover and understand a phenomenon" that exists within the everyday lives of people (Caelli et al., 2003, p. 2). Because other qualitative models emphasize the established methodologies and their criteria, there is the potential for the researcher to not invest adequate attention to the "substantive findings of social reality" (Lui, 2016, p. 129). Since applied social scientists aim to find solutions to everyday issues, a design model that aims to get to the crux of an issue would be an ideal fit. Because the GIQM is set up to be problem-oriented, it allows for a connection between the research objectives and findings (Lui, 2016).

While it does not adhere to the same criteria as the other traditional research approaches in the qualitative realm, it still has features that allow GIQM studies to meet the goals of research. The research questions should be descriptive, process-oriented, and interpretive (Hood, 2007; Lui, 2016). The sample is purposeful and can be either a priori or contingent (Lui, 2016; Percy et al., 2015). The goal is rich data collection. The research process should be inductive and cyclical, with questions, data gathering, and data analysis happening simultaneously (Hood, 2007; Kennedy, 2016). Data analysis should be done individually and focused on recurring themes (Percy et al., 2015). Memoing is critical and there may be many types (Hood, 2007; Lui, 2016). Data collection is ended when the data offers no new insights (Hood, 2007; Lui, 2016).

Design becomes more focused and narrower as the study continues (Lui, 2016). The presentation

of findings describes the themes that emerge from the data (Lui, 2016). And finally, the study

can offer generalizability to similar cases (Kennedy, 2016; Lui, 2016; Percy et al., 2016).

While there are benefits to the flexibility of generic qualitative research, there are also

challenges with the model. Caelli et al., (2003), in an attempt to create a more universal

understanding of the model, offered that generic qualitative research studies should include four

parameters to make generic qualitative research easier to review. The authors of that article

contend that generic qualitative research should include the theoretical positioning of the

researcher. Researchers are not "value-neutral observers", and the theoretical framework is an

important indicator of what subjective and prior knowledge they bring to the study (Caelli et al.,

2003, p.5). The next parameter is that there needs to be congruence between the methodology

and the methods. Methodology refers to the philosophical and theoretical frameworks that guide

how research is conducted. Methods refer to the tools and protocols used to gather evidence

(Caelli et al., 2003). These terms are often used interchangeably but are not the same thing.

Generic qualitative researchers should use the appropriate tools for the generic model. The third

parameter set forth by Caelli et al., (2003) is the intentional discussion of strategies to determine

rigor. These authors argue that qualitative researchers need to "1.) articulate a knowledgeable,

theoretically informed choice regarding their approach to rigor and 2.) select an approach that is

philosophically and methodologically congruent with their inquiry" (Caelli et al., 2003, p. 7).

Lastly, general qualitative researchers should explicitly indicate that their data will be analyzed

through a particular lens. The requirement for this explicit indication relates to the theoretical

positioning statement. Both the explicit indication and the theoretical positioning statement are

meant to clearly state why the researcher is pursuing a particular topic and how the researcher will engage with the data that has been collected (Caelli et al., 2003).

The GIQM is distinctive in its approach to data collection and analysis and how these elements interconnect with the research questions. In this model, the research questions, data collection, and data analysis engage in a simultaneous, cyclical relationship (Lui, 2016). Researchers collect data using semi-structured interview questions, which they develop based on the research questions. After conducting the interviews, the researcher begins coding and memoing, searching for patterns. This iterative process continues until reaching data saturation, the point at which no new data emerges (Kostere & Kostere, 2022; Caelli et al., 2003; Hood, 2007; Lui, 2016; Maxwell, 2013; Percy et al., 2015).

Setting and Participants

The study utilized the thoughts and feelings of 10 high school teachers from the Oklahoma City, OK metro area. Their average years of service totaled 10.3 years. The participants' ages ranged from 24-52. On average, the participants had served under 3.9 school leaders during their time in education. The subjects taught included English, history, Spanish, science, art, leadership, journalism, computer science, and special education. Each participant self-identified as having trauma. The types of trauma represented were personal trauma, childhood trauma, and institutional trauma.

I began the study by sharing my research questions with teachers. I provided a definition for each of the trauma types, including personal, secondary, and institutional. I then provided more information for anyone who wanted clarification or further details. I explained that I would do interviews related to how their work was impacted by the trauma they experienced and what support they received from their school and district leaders. In doing this, I wanted to be

sensitive to their experiences and ensure their willing participation by providing as much

transparency about the nature of the study as possible. I requested volunteers and then conducted

one-on-one conversations with each volunteer to explain the study's nature. This ensured they

understood what information they would need to share and confirmed that they felt they met the

criteria of having experienced perceived trauma. I wanted to ensure they were fully aware of

what the study entailed and what was required from them.

I submitted my study to the university's Institutional Review Board (IRB) and acquired

the appropriate permission upon review (See Appendix D). As this study dealt with human

participants, and their mental health and trauma, I wanted to be especially sensitive to the

confidentiality and the risks and benefits of their participation. Each participant received a

pseudonym by which they were referred throughout the study.

Methods

After the participants committed to the study, I gave them a journal prompt (see

Appendix A). This prompt asked them to describe their experience in as much detail as they

preferred. It specifically requested a timeline of their experience, including when they returned to

work, the type of trauma they believed they experienced, and a personal account of their return to

work. Additionally, I developed questions for semi-structured interviews with each participant,

detailed in Appendix B. These interviews, conducted face-to-face, lasted about 1 to 1.5 hours. I

recorded both video and audio of these interviews and took notes in real-time, followed by more

detailed note-taking immediately after each session. Following each interview, I used a third-

party software called REV to create transcripts, which were then shared with the participants. I

authenticated the transcripts of their interviews and using the data from the interview and the

journal responses, I began to code and identify themes. Using the GIQM, I returned to interviews

and journal prompts often to clarify and validate the data. Additionally, I maintained a research journal to address any bias or changes in my train of thought as the study continued.

Data Analysis

To establish data accuracy, my initial step involved listening to each interview while reviewing its transcript for any necessary corrections. After receiving the journal entries, accurate interview transcripts, and my onsite notes, I commenced the data analysis process, employing thematic inductive analysis.

Familiarizing myself with the data was crucial. I thoroughly read and reread the journal entries, interview transcripts, and my notes for each participant. This deep dive into the data helped me understand each participant's personal definition of trauma, a key step in qualifying their experiences and assessing their perceived trauma level for the study.

Next, I meticulously examined my notes, the journal entries, and the interview transcripts line by line. During this phase, I highlighted key words and phrases pertinent to my research questions and the concepts of "trauma," "mental health," "burnout," and "supports." I then open-coded the transcripts and journal entries, keeping my research questions in focus. Subsequently, I revisited the data to identify potential clusters, leading to the emergence of patterns. These patterns revealed five themes: trauma response, trauma-informed schools, administrative response, job impact, and self-care practice. I then related these themes back to the research questions and categorized the inductive codes accordingly.

Upon completing the study, I allowed participants to review the findings and propose corrections. For instance, one participant corrected the number of school administrators she had worked under, which I adjusted for accuracy.

Finally, I synthesized the data for each theme, creating a comprehensive analysis of the findings.

Limitations

Although the purposive nature of selecting the participants is intentional and provides for rich data collection, the fact that they only represent high school teachers from one regional area presents a limited perspective regarding trauma experiences. More research should be done in various settings to see if these findings bear out across school types. Additionally, allowing participants to self-identify instances of trauma may be seen as a limitation in that it might not meet others definition of trauma. And lastly, researcher bias is a limitation of the study. My own experiences with trauma can impact my interaction with the data as well as the nature of the study.

Researcher Reflexivity

As a post-positivist and a qualitative researcher, I hold that research is an interpretive activity. This study does not exist in a vacuum but is subject to the experiences and influences of my life. I am a teacher who experienced trauma while in the classroom. In my second-year of teaching, my husband was killed unexpectedly in a plane crash. This research study is born from that experience. Additionally, I am a member of the LGBTQ+ community. However, these are not the only aspects that influence my research interests. I have also been an educator for 23 years and have interacted with teachers who have been subjected to personal, secondary, and institutional trauma.

While my connection to this topic does inform my research, any biases or assumptions can be set aside and addressed in my reflexive journal. Additionally, I shared findings with my participants before publication to ensure that how I presented their stories was true to their intent.

Trustworthiness

Using a reflexive research journal functioned as a way for me to track my biases and thoughts as I conducted the study. Additionally, verifying findings with participants and seeking clarification on their meanings when needed ensured that the study was conducted with transparency and objectivity.

Ethical Considerations

Because I am sensitive to how discussing trauma can cause harm to participants, I wanted to be clear and upfront about the purposes of this study. I acquired informed consent documentation, assigned pseudonyms to each participant, and submitted the study through the university's IRB process. The IRB reviewed the study, the informed consent documents, and my journal and interview protocols and determined the study was exempt from institutional review (Appendix D). Additionally, I wanted to express to my participants that I only want them to share what they are comfortable with. I also wanted to ensure their privacy and their confidence in me to be trustworthy. In the findings chapter, I used pseudonyms and omitted details-such as school name, room number, or physical descriptions-that might have identified the participants. I was also transparent about my process as I handled the journal entries and recorded interviews, assuring them that all artifacts would be destroyed once the study was complete.

Summary

In this Qualitative General Induction Method study, I actively gathered data through journal prompts and semi-structured interview questions. This approach aimed to understand how trauma affects teachers' work performance and identify support strategies from school administrators for teachers facing personal, secondary, or institutional trauma. I will present this data in the following chapter.

Chapter Four: Findings

This study aimed to explore how teachers' trauma experiences impacted their ability to do their jobs and how school and district administration can support teachers who have experienced trauma whether personal, secondary, or institutional. The study consisted of 10 high school teachers from the greater Oklahoma City, OK metro area who were purposively chosen based on their self-identified experience with trauma. This generic inductive qualitative study consisted of semi-structured interviews and journal entries from all 10 participants describing their traumatic experiences in their own words and sharing the responses from their district and school administrators. The study hoped to provide insight to district and school administrators on how to support teachers better and what resources could be implemented. The research questions at the core of this study were:

- How does trauma (personal, institutional, and/or secondary) affect teachers' job performance?

- What assistance is available to support teachers' mental health needs, and how is it utilized?

- How does school administration support teachers who experience traumatic events or other issues related to mental health?

The Role of the Researcher

As the sole researcher, I conducted all interviews with the participants and read their journal entries. I also took onsite notes as I interviewed each participant. As a person who has experienced the sudden death of a spouse while teaching, the exploration into other people's trauma was, at times, difficult for me but also highly rewarding. I struggled with maintaining an objective presence during the interviews as my nature as an empath is to be comforting. I worked

diligently to keep the role of researcher ever-present. However, I did find myself, once alone, getting very emotional about the stories I heard throughout this study. I utilized a research journal to work through some of those difficult sessions to help me refocus on the research questions. Additionally, I took several days between the interviews and the data analysis to put some distance between my feelings about the participants' experiences and the data.

Participants

This study consisted of journal entries and interviews with 10 participants. I purposively selected each participant, who taught at an area high school and self-identified as having experienced trauma in some capacity.

Pseudonym	Age	Race	Gender	Years Teaching	Trauma (by textbook definition)
Dylan	34	White	Female	11	Personal
Julia	51	White	Female	29	Institutional
Harley	31	White	Female	10	Institutional
Anastasia	25	Biracial	Female	3	Institutional
Art	25	White	Male	3	Institutional
Britney	27	White	Female	4	Personal
Abigail	31	Native American	Non-Binary	9	Personal
Charlotte	36	Native American	Female	5	Institutional
Harper	42	White	Female	19	Personal
Tatum	37	White	Female	10	Personal

Table 1 Participant pseudonyms, age, race, gender, years teaching, and type of trauma experience

Dylan:

Dylan is a 34-year-old, White female who has been teaching for 11 years. She currently teaches student council and leadership and previously taught English. All her experience has been at her current school. She has approximately 120 students each year and has worked under four different school administrators.

Dylan says that trauma is "something that changes and shapes who you are and there are a lot of different types of trauma; childhood trauma affects how we develop and grow, but adult trauma isn't talked about enough." She asserts that "trauma is such a personal thing; I don't think we can even begin to label all the types." Dylan experienced childhood trauma that still impacts her and how she does her job, in some good and some negative ways.

Dylan's father was a verbally and emotionally abusive drug and alcohol addict. Her parents were divorced when Dylan was young, and because of the inconsistency in her father showing up, she took on the role of caretaker for her younger brother. This responsibility developed into a "I have to do it myself or it won't get done" mentality. When in her father's care, Dylan and her younger brother were often left alone in his car while he went into bars or clubs until late at night. When she was old enough, she had to be an advocate for herself and her brother. She learned to stick up for herself. In her adult life, this often translates to her being seen as "mouthy, a lot, too much, or too aggressive."

Julia:

Julia is a 51-year-old, White female who has been teaching for 29 years. She currently teaches freshman English, journalism, yearbook, and photography. She has taught at her current school for 25 years. Julia has approximately 140 students and has worked under seven different school administrators.

Julia understands trauma to be "the aftermath of a negative experience that affects the brain's neural pathways and creates various long-term effects." She recognizes that consequences from trauma can be physical, emotional, or mental. Julia has experienced various forms of trauma; she taught during the Oklahoma City Murrah building bombing, the 9/11 attacks, student deaths, a teacher walkout, and the COVID-19 pandemic. Additionally, during

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her teaching career, she has suffered through the cancer diagnosis and subsequent death of her sister, as well as the death of her father. All these events caused trauma for her, but the experience she shared is "[her] story of isolation and a loss of support and leadership."

In 2021, at the beginning of her 26th year teaching, Julia found out two days before school started that her teaching schedule would no longer include teaching journalism and yearbook, but rather exclusively freshman English. This development shocked her, as she had been teaching journalism classes for the previous 8 years. Julia had no warning of the schedule change. When she asked about it, Julia was told that she had not done enough to grow the journalism program. They were no longer offering it as a class, but she still needed to run it as a club. The school did not provide her with the resources or time needed to develop lesson plans for the school year starting in two days. She felt betrayed and set up to fail because the school administration did not offer her the necessary resources and supports.

Harley:

Harley is a 31-year-old, White female who has taught for 10 years. She currently teaches Spanish I and II. She has been at her current school for 5 years. She has approximately 130 students and has taught under four different school administrators.

Harley believes that trauma is "the result of a negative experience or event that significantly impacts a person and the lasting emotional and physical effects change a person's perspective moving forward." During her third year of teaching, Harley took her classes to the school computer lab where a group of boys would frequently ask ordinary questions about the assignment, how to use the computer, and things going on at school. She later found out from other students these boys took pictures from up her skirt and posted them to social media. When

she went to her administration for help, they declined to help her, stating that "something like this could ruin these boys' lives."

Harley was then subjected to gossip and questioned about why she did not realize what the boys were doing and stop them. She was told by her school administration that she needed to get over it and help the boys pass her class so they could stay eligible for football. She felt violated and isolated, and her feelings were ignored and minimized.

Anastasia:

Anastasia is a 25-year-old, Biracial female who has taught for 3 years, all at her current school. She teaches AP World History and U.S. History and has approximately 120 students. She has worked under two different school administrators.

Anastasia thinks that trauma is "the result of a distressing event that alters the way an individual reacts or perceives situations." Anastasia grew up with her grandparents because her mother had mental health issues and was not consistently around to care for her. Her father was not involved in her life at all. As a result, she has experienced bouts of anxiety and depression throughout her life.

In her second year of teaching, Anastasia encountered a student who consistently failed to submit assignments. Following district policy, she recorded a score of 50% for each missing assignment. Despite multiple contacts with the student's mother, a substitute teacher in her building, she received no response until the basketball season began and the student's grades were failing. At this point, the student's mother insisted that Anastasia accept all late work, to which Anastasia agreed. The student submitted some assignments late and demanded immediate grading. When Anastasia couldn't comply due to her teaching schedule, even the basketball coach pressured her to update the grades by day's end.

The following day, the student's mother confronted Anastasia during class. She berated Anastasia, calling her a terrible and lazy teacher, and unjustly accused her of jealousy and bias against the students. Following this incident, the grade-level principal asked Anastasia to adjust the student's grade but did not address the substitute teacher's inappropriate behavior. Following this incident, the substitute was allowed to continue working in the building, leaving Anastasia anxious about potential further confrontations and the substitute's influence on other students.

Art:

Art is a 25-year-old, White male who has been teaching for 3 years, all at his current school. He has coached baseball, taught history, and is currently teaching computer apps and computer programming. He has approximately 100 students. Art has worked under two different school administrators.

Art says that trauma is the "psychological response to an event or events." He believes that the response to trauma can vary based on severity. During Art's first year of teaching, he served as an assistant baseball coach. During a practice, where the head coach was not present, Art noticed a student baseball player messing around in the weight room and not doing the required weight program. Art addressed the student and told him to finish his reps before the head coach came in. The student replied with "Make me, p****." Art responded that the student could take that up with the head coach. The student again called Art the derogatory term and then charged him, punching Art in the right jaw. Art went down, and the student jumped on him and began punching him in the body before other coaches and players pulled the student off.

When Art reported the incident, he was asked what he did to provoke the student. Art was told the student would remain in baseball pending the completion of a full investigation. The investigation deemed that the student attacked Art, and the student was removed from the

baseball team. However, the student was also enrolled in Art's history class. Art was told that there were no other sections available and that at the end of the student's suspension, the student would remain in Art's class. Art was discouraged from pressing charges and the student remained in Art's class for the duration of the year. Art felt on edge, wondering if the student was going to attack him again, knowing he could do nothing to protect himself.

Britney:

Britney is a 27-year-old, White female who has been teaching for 4 years, all at her current school. She currently teaches AP English, English III, and teen leadership, as well as coaches cheerleading. She has approximately 125 students. She has worked for three different school administrators.

Britney identifies trauma as something that "alters our brains and informs the way we move in the world." She believes that trauma, while hurtful at the onset, can make people more empathetic and allow people to grow in ways they would not be able to otherwise. Britney carries with her childhood trauma that was caused by the neglect of her parents.

Her mother worked three jobs and her father would show up "randomly and out of the blue." At age 10, she began staying home alone, watching her little brother until late into the night. She had to learn how to manage cooking dinner for her and her brother, doing homework, bathing herself, making sure her brother bathed himself, and putting him to bed. Her mom would provide a list of things to do and ways to stay safe, but she lived in a constant state of fear and anxiety. She worried that something would happen to them, that she would forget to do one of the things on the list, or that her mom would not come home. One night, while making dinner, she spilled boiling water on her chest and legs, resulting in second-degree burns. The injuries

caused her to miss enough school that she was behind for that school year, trying to catch up but never being able to do so.

As a result of this event, Britney carries high anxiety. She is constantly working to be perfect in everything she does, to not make any mistakes that might make her fall behind or not accomplish a task set out for her.

Abigail:

Abigail is a 31-year-old, White and Native American, non-binary teacher. They have taught for 9 years all at their current school. They teach art at all levels. Abigail has worked under four different school administrators.

To Abigail, trauma means "the memories you can't erase, the dreams you can't escape, and the horror you can't keep from reliving." In 2018, during the Oklahoma teacher walkout, Abigail was planning to walk with a group of students from her school to the Oklahoma State Capitol when they received a call from their brother. Their mother had died unexpectedly overnight. Their mother was a constant in their life, watching their children, helping with their classroom, and more.

Dealing with both the professional life disruption with the teacher walkout and the personal life disruption with the death of their mother fundamentally changed Abigail's worldview. They became more anxious, suffered from depression, and became more careless about what was happening around them. Because of this overwhelming change in their life, Abigail no longer took the same care they normally did in their classroom. They were not as interested in the details that made their classroom run smoothly, efficiently, and with the same level of care and concern as before.

Charlotte:

Charlotte is a 36-year-old, American Indian female. She has taught for 5 years, 2.5 of which have been at her current school. Charlotte has had four different school administrators. Charlotte teaches Special Ed, specifically working with Emotional Disturbance classes. She currently has 22 students on her caseload.

Charlotte believes that trauma "truly shapes your brain and behaviors and sets you on a specific course in life without you really knowing it." She believes that trauma accounts for many learned behaviors and reveals one's true character.

In her first year of teaching, Charlotte taught a middle school class of 20 emotionally disturbed students. On a seemingly normal day, one student was particularly disruptive and unresponsive to Charlotte's efforts to calm him. The situation escalated when the student attacked Charlotte, pinning her against a wall and choking her. Unable to breathe, Charlotte heard her assistant frantically calling for help over the walkie-talkie, fearing for her life, before she lost consciousness.

About ten minutes later, Charlotte regained consciousness in another room, surrounded by her teaching assistant, the school nurse, and a school resource officer (SRO). Unable to speak, she learned that another SRO had intervened, rescuing her from the student. When the principal arrived to inquire about the incident, the nurse insisted that Charlotte needed an ambulance. However, the principal refused, citing potential negative attention to the school, and advised Charlotte to seek medical attention on her own if necessary. Unable to drive due to her shaken state and pain, Charlotte waited for her wife to pick her up from school. The principal also expected her to return to work the next day because they were short-staffed.

Charlotte felt her school leader was indifferent to her ordeal, leading her to feel paranoid and scared. She became extremely cautious around her students, maintaining a distance and

grappling with trust issues and anxiety towards her students and school administrators. This profoundly affected her interactions with her students, significantly impacting her teaching approach.

Harper:

Harper is a 42-year-old, White, female. She has taught for 19 years and has been at her current school for 2 years. She previously taught chemistry and is currently an instructional coach. She has worked for five different school administrators.

Harper believes that trauma is "the result of an event or situation that occurs in a person's life that is extremely stressful."

Harper recently went through a difficult divorce after an 11-year marriage filled with emotional and mental abuse from her ex-husband. He consistently belittled, sexually pressured, manipulated, and threatened her and their children. The divorce process was further complicated by his refusal to adhere to Oklahoma's state divorce requirements.

During the marriage and the divorce proceedings, Harper's ex-husband was aggressively intrusive and refused to agree to divorce terms. He unexpectedly showed up at her house, demanded money, and verbally abused her to wear her down. He frequently called and texted her with derogatory remarks and blamed her for destroying their family.

Amidst these challenges, Harper tried to maintain her professional life. However, her husband's behavior led her to become isolated, often hiding in her office and struggling to perform her duties. When she disclosed her situation to her school administrator, he acknowledged her distress and sympathized but also noted her reduced job performance, resulting in a lower evaluation. This reaction made Harper reluctant to share further and adopt an outwardly "aggressively happy" demeanor. Striving to seem normal, she became short with

colleagues, started missing work, and did only the minimum required, leading to a growing disdain for her job and herself.

Tatum:

Tatum is a 37-year-old, White female. She taught for 10 years and was at her last school for 5 years. She taught special education and reading. She had 20 special education students and 25 reading students. She has worked for five different school administrators.

Tatum believes that trauma is "any significant occurrence, physically, mentally, or emotionally, that causes unnecessarily high stress, anxiety, or physical complexities to a person."

After about 18 months of infertility treatments, Tatum and her husband were thrilled to discover they were pregnant. However, at 20 weeks, what should have been a routine ultrasound tragically revealed no heartbeat, indicating the loss of their baby boy. Tatum underwent surgery two days later to remove the affected tissue.

This loss plunged Tatum into a deep depression and exhaustion. She informed her administrative team about the situation. While they initially asked about her well-being and reminded her to log her absences as sick days, their follow-up was limited to inquiries about her return to work. Tatum felt that her grief warranted bereavement leave. She eventually returned to work after being granted 5 days of bereavement leave, but she struggled to function, feeling physically drained and disengaged from her students. Her teaching assistant stepped in to lead the classroom.

When Tatum sought guidance and resources from her school leader, his response was unhelpful, suggesting she could use her sick days but offering no further support. His actions left her feeling misunderstood and uncomfortable discussing her situation with him. She described

the rest of that year as "existing in a fog," adding, "If it was not for my assistant, my students would not have learned anything." When that school year ended, Tatum quit teaching.

Themes

Trauma Response

Figure 1 Trauma Response theme cluster

When discussing their experiences, all participants indicated they had some trauma response to the trauma that impacted their lives. Additionally, in some cases, these responses led to increased instances of burnout and isolation, leading to reliance on coping mechanisms to get through their days. The trauma experiences continue to play a prevalent role for all participants in various ways.

Emotional Response

When discussing how the participants experienced trauma, many of them recognized that they had some emotional response. These responses ranged from guilt to anxiety to depression. Tatum, Julia, Harper, Abigail, and Charlotte felt depressed and withdrawn after their experiences. Harley, Anastasia, and Art felt anxious and on edge because of their traumatic experience. Dylan and Britney both said they have trust issues and control issues because of their childhood trauma. Abigail, Harper, and Tatum discussed feeling guilty most of the time. Art discussed feeling angry when he was triggered. Julia said when she is struggling, she "just can't

find any joy. Everything is blah and I just feel nothing." Harley said when she is not doing well, she feels an "overwhelming sense of dread that consumes [her]." Depending on the situation, the feelings can come on quickly or ease in over time. Harper said, "When I feel this way, the feelings become debilitating, and I can't handle it."

Physical Response

In addition to the emotional response, the participants discussed their physical responses. Tatum, Anastasia, Harper, and Julia talked about feeling exhausted, and just wanting to sleep all the time. Harley and Abigail talked about not having an appetite at all, while Britney, Dylan, Charlotte, and Art discussed having an overactive appetite. Britney described her response as "wanting to eat everything in sight." Charlotte referred to it as "stress eating" and Dylan called it "feeding my trauma." Nine of the 10 participants discussed sleeping issues, either too much sleep or not getting enough sleep. Julia discussed feeling achy, while Britney indicated that when she struggles with her trauma triggers, she gets a cold "almost every time." Dylan jokingly referred to her eye twitching but said it can cause major headaches if it twitches too long. Harper, Tatum, Harley, and Abigail complained about headaches as a result of being triggered.

Burnout

All participants indicated they had experienced burnout and considered leaving the profession. Burnout, as defined for this study, is the generalized effect of feeling emotionally and/or physically exhausted and overwhelmed, specifically because of work-induced stress (Ford et al., 2019). It also includes Maslach's (1998) multidimensional theory of burnout which includes emotional exhaustion, depersonalization, and lack of personal accomplishment. It was the aspect of personalization that the participants experienced, as well as a lack of personal accomplishment. Eight of ten participants described their burnout as not caring or simply not

wanting to do their jobs. Harley said that she "just dreaded going to work. I just couldn't make myself care about to get up and go." In addition to not caring about their jobs, four of 10 participants indicated that they felt like they were unproductive or not making enough effort. Julia discussed "on Sundays, I would sit and think about how to tap dance hard to be more engaging, but it never was effective because I just didn't care." This lack of care and the feelings of inadequacy was the participants' indicators that burnout was a very real problem. A consistent response to burnout was isolating themselves and limiting interactions with their family, friends, and work. Eight out of 10 participants felt this way. Art said that when he was burned out, he smoked a lot more marijuana and worked out more. Tatum and Charlotte both said they overextended themselves during workouts, trying to overcome the burnout. Harper and Anastasia also drank and smoked more when they felt burned out. Eight out of 10 participants took sick days because of burnout. In these cases, burnout led to escapist behavior such as binge-watching TV, excessive reading, increased drug and alcohol use, increased exercising, and sometimes unsafe interactions with others. None of the participants knew how to combat burnout and felt that they were still somewhat experiencing it. Britney said "You know how like with COVID, they say once you have it, you're more susceptible to long COVID? Burnout is like that. Once you've experienced it, you're more likely to get it again and worse the next time."

Isolation

Isolation is a typical trauma response for the participants in this study. They all mentioned some instances of wanting to be alone and not interacting with work or their families. Their desire to isolate themselves resulted in taking days off work. Additionally, it resulted in anxiety, feeling withdrawn, and longer bouts of depression. Tatum talked about how she hated being alone but also could not deal with other people, including her husband. Harper talked

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about staying in her office at work when she did go to school and not answering the door or phone because she did not want to talk to anyone. Julia talked about when her son would ask her why she was not talking and if she was not going to eat dinner with them. She said, "I felt shame for being upset, which led me to withdrawing and isolating myself." Abigail talked about feeling guilty because they had to isolate themself from their dad and brother after their mom died because they were grieving, and the family was so needy. Art talked about missing three days of work in a row because he wanted to be alone. After Harley's situation, teachers and other principals stopped talking to her, which made her feel alone. She also stayed in her classroom as much as possible because she did not want to see the boys who assaulted her. Harley talked about how the only living thing she could deal with was her cat, and even that was a lot to manage. Isolation was a common trauma response among the participants.

Coping Mechanisms

All 10 participants discussed what they used to help them cope with their trauma. Some coping mechanisms were innocuous, but others could be dangerous or damaging. Britney and Dylan both said they use humor as a coping mechanism. Dylan says "Doesn't everyone? If not, they should. It's the best way to deal with this shit." Britney said, "I didn't set out to be a funny person, but I found that I could make my brother laugh and that made me feel better and less alone, so it just sort of became my schtick. I'm funny." Exercise was a coping mechanism for Tatum, Charlotte, and Art. Tatum discussed how she was able to work through frustrations and anger by "sweating it out." While exercise is usually seen as a good thing, Charlotte talked about taking it to the extreme, "I would work out for hours at the gym. My wife would ask when I'd be home, and I would stay gone for two more hours. It became excessive and honestly, dangerous." Food was another coping mechanism. Abigail, Julia, Harley, and Britney discussed their

unhealthy relationship with food. Julia discussed how she would not be able to sleep so she would eat instead. "After the situation happened with my classes, I would struggle to stay asleep. So, I would just eat popcorn, my son's lunch snacks, sandwiches, dinner leftovers, whatever. I gained like twenty pounds from August to October that year." Harper, Art, and Anastasia all admit that their drug and alcohol consumption is a coping mechanism. Harper says "I drink. A lot. Too much. I try to cut back, but when my kids are with their dad, I convince myself it's ok. It's a vicious cycle." Coping mechanisms are part of the trauma response and can be simple or can have negative consequences.

Trauma-Informed Schools
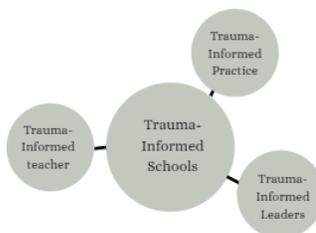
Figure 2 Trauma-Informed Schools theme cluster

One path of discussion was on the philosophy of teachers and school administration being trauma-informed. Most participants had heard of this movement, but few felt like they were well-versed in it. The participants who were aware of it understood it generally meant to acknowledge that everyone has experienced some kind of trauma and to try to respond to situations as such. Universally, participants did not feel that school or district administrators were trauma-informed or that their current school was a trauma-informed workplace.

Trauma-informed Teacher

Most of the participants had a basic understanding of what it means to be trauma-informed but did not feel like they were trained in being trauma-informed officially. Eight

participants understood it to mean that as a teacher, you have an understanding that your students have had adverse experiences that could lead to negative reactions and could cause students to be triggered. Other than that basic understanding, participants discussed how they try to approach their classroom. Dylan said that she tries to remember that sarcasm can be triggering for students and therefore tries to keep her sarcasm limited. She was also the only participant who had any professional development in trauma-informed practices, saying that was where she learned about Adverse Childhood Experience (ACE) scores. She discussed when she learned about ACE scores, she realized how much childhood trauma she had. She also expressed that while ACE scores were helpful, they do not address the trauma that adults face and the needs adults might have. Julia discussed having read about trauma-informed practice but struggles to consider herself a trauma-informed teacher. She talked about growing up in the "suck it up era" and how she has to consciously choose to acknowledge her students might be going through something as her first reaction is to want them to "get over it and move on down the path." Charlotte made the point that as a trauma-informed teacher, there is "an obligation to give your students a voice and be their advocate to those who may not understand they have had trauma." While all the participants want to be sensitive to their students' needs and experiences, they do not always know how to do that. They feel there should be training specifically on what it means to be trauma-informed.

Trauma-informed Practices

When talking about trauma-informed practices and whether their schools were trauma-informed, all 10 participants quickly said no. Two participants, Art and Anastasia, had never heard the term before. After having explained it to them, they both quickly said that no, their schools were not trauma-informed at all. All 10 participants felt being trauma-informed was

something that could definitely benefit them and their students. All participants discussed the trauma that their students face, such as experiencing abuse, homelessness, poverty, and more. Harper, Harley, Julia, and Abigail all mentioned their desire to be trained in dealing with secondary trauma and accessing resources for their students.

There was also a universal consensus that schools should be working toward being trauma-informed as the participants were aware that other colleagues were not sensitive to students' needs. Additionally, all 10 participants felt being trauma-informed should be extended to staff. Dylan talked about how she wished colleagues understood that sometimes their actions can be triggering. Harley discussed a time when a male colleague stood up and towered over her to yell at her about a student. That incident triggered a panic attack that caused her to leave work for the day. She felt that "if there was training on how to approach other teachers that you are in conflict with, you might help prevent situations like that."

Trauma-Informed Leader

While all 10 participants wished they could work in trauma-informed schools, they recognized that such an initiative might be beyond what districts can afford. Instead of fully trauma-informed schools, they all expressed an interest in working for trauma-informed leaders and thought that school administration should be trained in trauma-informed practices. When asked, all 10 participants indicated that no one from their school administration was trauma-informed and the participants wished they were. Anastasia said, "I wish they were more [trauma-informed] with staff. We all handle things differently, we respond to how things are said differently, if they understood people might respond out of trauma, they might rethink how they talk to us."

Charlotte and Britney both said that they feel the school administration lacks empathy for their staff. Charlotte said the "lack of empathy and support for staff is what leads school administrators to pile on more and more expectations on teachers, never considering how burned out they might be." Britney said, "To not show your staff empathy or compassion contributes to poor communication and a negative work environment." Tatum talked about how she thinks "if staff knew school administration was trauma-informed they might be more comfortable sharing what they are going through, allowing principals to be able to better support them." Harper, who is training to be an administrator, talked about how "as administrators, there is a lot more to learn about being trauma-informed and how to support your teachers." Art talked about how he wished school administrators would try to remember how hard it was to be a teacher, and how "it would be nice if they also considered that teachers are humans who bring their everyday lives to work with them." The participants were proponents of including trauma-informed training in administrative programs.

Administrative Response

Figure 3 Administrative Response theme cluster

Participants were asked about how they wished their school administration would respond to their trauma. This question was met with varied responses as not everyone was comfortable sharing their trauma with school administrators. That being said, all participants felt that school administrators could improve teachers' comfort levels by spending more time on relationship-

building with their staff and being mindful of how their responses make the participants feel minimized.

Minimizing

When participants were asked about how school administration responded to their experiences, a consistent refrain was that the participants felt like their feelings were minimized or invalidated. Britney described it like this:

> One of the biggest things I feel when I'm interacting with principals is that they don't recognize how big things can feel. Here I am feeling like this is a huge issue, and I'm really upset, and they are very much like, this is not a big deal, you're overreacting. I think that's infuriating and makes me not want to talk to them.

Dylan echoed this sentiment in her interview saying, "One principal will roll their eyes and say things like, 'Here we go' when I'm upset or concerned about something. My concerns and feelings are valid, and they sometimes act like I'm too much, which is triggering for me."

When Julia confronted her school administrator about taking on a new position after he changed her schedule with no notice, he laughed at her, said her feelings of frustration were ridiculous, and that as a veteran teacher, she needed to "get over it." After Charlotte's attack by a student, the school nurse told Charlotte and her school administrator that Charlotte needed to see a doctor. The school administrator said Charlotte did not seem injured and that they needed her back in the classroom. The school nurse insisted, and the school administrator told Charlotte she better bring back documentation that she saw a doctor if she decided to leave. Leaving Charlotte to "feel like she thought [Charlotte] was faking and overreacting." The school administrator also put the student back into Charlotte's class and told Charlotte to "be a professional and handle it."

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Her school administrator told Charlotte she "needed to just forget about it because it probably wouldn't be the last time, and she could not freak out every time it happened."

When Harley confronted her school administration about removing the boys who videoed up her skirt and shared it on the internet, her school administrator asked why Harley was "making a big deal about this and why she wanted to ruin these boys' lives." Because Julia's school administrator acted like changing her schedule was no big deal, Julia was embarrassed to share her frustration with her friends and colleagues. She just felt "so alone." School administration acting as though teachers' feelings equate to overreacting or acting as though teachers need to get over things is prevalent in the stories.

Relationship Building

Several of the participants discussed the need for school administration to take time to build relationships with their staff. Anastasia said "They harp on us to build relationships with our students, which is so important, but at what point do they build relationships with their staff? We know nothing about each other except for our job titles." Tatum reiterated this thought, saying "I understand that building rapport and relationships with your staff might not be a priority at the beginning of the year, but it should be. Just like it is for teachers with their students." Abigail believes that

> Admin[istration] needs to develop relationships with staff, so they know what all is on their plates. Knowing that might help them know what resources and supports might actually help. I wish they understood that their staff have ADHD, sensory disorders, anxiety, are on the Autism spectrum, and more and that these things affect how we operate.

Harper talked about the value of relationships, saying "Leaders build relationships, that's what they do. If you have a relationship, even if you don't know the details of what someone is going through or has gone through, you know what motivates them and supports them." Harley talked about how she wishes school administration "would acknowledge that teachers are under so much stress and sometimes it's OK to treat them as a human and not just as an employee, or worse, as a means to an end." Charlotte and Anastasia talked about visibility being crucial to relationship building. Anastasia says,

> the admin[istrative] staff doesn't seem to know what's going on in the building. They need to be more visible and aware of everyone in their building, including their teachers. I wish they knew me well enough to care that being yelled at makes my anxiety spike and makes me uncomfortable. If they knew that they might have supported me differently.

Charlotte talked about the value of admin being in classrooms to check in, which she feels could "greatly enhance school culture."

Administrative Reactions

All 10 participants acknowledged that their school administration could do better in responding to situations with their staff. Dylan said that while she has not had a traumatic event happen at school, she often gets triggered by her past trauma, and sometimes, her school administration is to blame. Harper talked about how her school administrator has made jokes about her slacking and acting like a "sad sack" which made her feel stigmatized for having a challenging time. Britney discussed an experience with her department chair, who expected Britney to consistently go above and beyond because she "never says no." Britney realized she needed to advocate for herself, especially after her school administrators admitted they always assumed she would agree to any task they asked of her. Charlotte said her school administrator

refused to call an ambulance when Charlotte was attacked because it would bring negative attention to the school and, according to the administrator, the "situation did not warrant all that." Art talked about how, after he was attacked, his school administrator joked about how surprised he was that Art showed some restraint because he thought he might be a "hothead."

Anastasia told a story about a student's mother who contacted the school administration about her student's grade. The school administrator interrupted her class, confronted Anastasia about it in front of the class, and did not allow Anastasia an opportunity to share her side of the story. Anastasia involved the local union so she could share her perspective, but only after she had been embarrassed in front of her classes not once but twice.

Art, Anastasia, Tatum, Charlotte, Harley, Britney, Abigail, and Julia commented on how no school administrators ever checked in with them after their traumatic experiences. Tatum says, "Taking time to say 'I'm thinking of you. I wanted to check in and see if you need anything. Here are some resources that might help.' Just being willing to be forthcoming as an administrator is a game changer." Art's take was more direct: "It would just be nice if they would've shown that I was somewhat important too."

Administrative Expectations

Based on the interviews with the participants, there seems to be a disconnect between what teachers wish school administration would do and what the administration is expected to do. Harley indicated she feels like school administration is told to be more focused on the public perception of the school and how parents feel. Art said his school administrators tried to brush his situation under the rug so that the school would not look bad. Charlotte also felt the negative publicity that might happen with her incident was more of a factor than her experience. Britney believes this disconnect stems from a lack of administrative training concerning trauma. "Even

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though they go to school to be principals, it feels like they aren't trained in how to actually deal with people." Julia says that from her perspective, "my district, as a whole, has not prioritized human resources, especially over data, so because it is not a district expectation to support teachers, most school administration will not prioritize it either." Harper, who is working toward a master's in educational administration, said "There's not a lot of talk about how to deal with teachers and how teachers react and how administration can support teachers in that. There is so much more to learn and many more conversations to be had." Abigail talked about the turnover at the administrative level and how it negatively impacts teachers, "You would think with as much turnover with teachers and with admin[istration], the district would start to look at how to best support their employees to keep them here."

Workplace Supports

Through the interviews, participants talked about how difficult it was to know what support was available to them, if any. Nine of the 10 participants said they did not feel adequately supported by their site school or district administration. Tatum talked about how difficult it was to navigate time off after her miscarriage, saying,

> I was struggling to focus on anything but my sadness and my physical pain after my D&C (dilation and curettage), and yet here I was trying to make sure I filled out the correct forms with no help from anyone in Human Resources or my school. It just added to my depression and my feelings of not wanting to come back.

Art and Abigail talked about losing respect for their school administrators because they did not feel supported. Art said "Because I got no support from admin[istration] after my situation, now I don't really acknowledge much of what they say. I mean, I do my job, but like the bare minimum and I won't do much more than that." Abigail talked about only getting five

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days of bereavement and how "that's barely enough time for the funeral. I asked but no one would help me. So, I quit asking [for help] and only do what I have to do." Britney talked about how frustrating it is that "there is no clear path of who to contact in the face of something going wrong, which just adds to the stress and anxiety I already am feeling." Julia says that it feels like, to her, that even the school administration does not know how to access supports, which makes them inconsequential, "what's the point of having any support when no one can access them?"

Job Impact
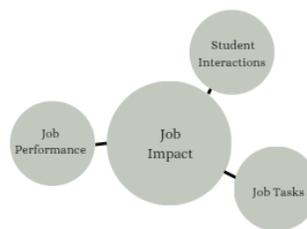
Figure 4 Job Impact theme cluster

The effects of the trauma on teachers' job performance were again varied, but what was consistent is that all participants felt their jobs were impacted by the trauma they experienced. Additionally, all expressed that their school administration's lack of concern for their experiences or feelings led them to be less concerned about doing their job to the best of their abilities.

Job Tasks

A common thread among the participants was that the traumatic experiences they had impacted their jobs in big and small ways. Most commonly, participants discussed taking days off work because they could not focus on lessons, interact with students, take care of routine tasks (like taking attendance), and more. Eight out of 10 participants admitted to taking sick days

so they could lie in bed, feeling they were dealing with depression. Half of the participants discussed being disinterested in doing the routine tasks of classroom management.

Abigail especially was impacted by their sudden trauma, recalling how before the death of their mom, they would arrive at work early each day to set up their classroom and ensure that supplies were ready for the lesson of the day. After the death of their mom, they said, "I no longer had it in me to care about the little things, things like setting up my room, creating engaging presentations, documenting issues in class, even working one-on-one with kids." Like Abigail, Britney talked about how when she was feeling the impact of her trauma she would struggle to "follow through on things like grading and recording grades, talking with counselors and administrators about student needs, taking attendance, everyday things that I should be doing." Anastasia mentioned that she was so anxious about parents confronting her about grades that she would not enter grades for anyone, "I would just let it sit there because I was too scared to enter it."

Dylan mentioned, "When I get triggered at work, I shut down and stop interacting with people, which isn't great for my job since I have to work with teachers, principals, and students to make sure people know what's going on." Withdrawing was a typical trauma response, resulting in loss of communication with colleagues, and students, and often in participants feeling more overwhelmed and stressed. Harper said

> [her trauma response] led to more stress and anxiety, feeling like a vicious cycle that I couldn't get out of. I couldn't do my job because I couldn't focus on anything but my divorce, but not doing my job led to guilt, which led to self-doubt, which led to stress and anxiety. The world's worst merry-go-round.

Tatum also discussed feeling self-doubt as her trauma of having a miscarriage led her to think she should not be a teacher. She stated, "I felt like if I wasn't able to take care of my own child, how could I be trusted to take care of the students." She found she was not following through on expected roles like taking an interest in them, being their advocate, or completing IEPs. This caused Tatum to feel "self-hatred because I wasn't a good teacher, and I wasn't a good mom." Tatum ended up leaving teaching after her trauma experience.

Student Interactions

More telling than how the participants completed the routine tasks of their jobs, was how their experiences impacted their interaction with students. All the participants acknowledged they bring their trauma into the classroom with them, and it sometimes negatively impacts the interactions they have with their students. Julia, Harley, Britney, Tatum, and Harper all talked about how their trauma response is to withdraw and/or shut down. That would happen in the classroom, resulting in them not interacting with their students, instead giving them busy work so they would not have to talk with students. Charlotte, Harley, and Art all talked about not trusting students after being assaulted, leading them to keep their students at arms-length and not developing rapport with them. Charlotte discussed not being comfortable being alone with students, saying that it made her feel "panicky and not in control," which led her to not feel she could build relationships with certain students. Art said he felt "convinced another student was going to attack me and this time I didn't trust myself to not fight back."

Harley admitted being uncomfortable with male students, saying that she refused to be available to work one-on-one with male students, passing them off to other teachers. She discussed going into the bathroom at work and "having what I think was a panic attack" after a boy came to ask her for help during lunch and would not leave. She said that it bothers her

because she "tries to make everyone feel seen, but I know I treat certain students differently because I don't trust them, and I know that's not fair." After their mom's sudden passing, Abigail talked about how they became "harder on the outside, not caring about [my students], what I feel like are stupid problems my students have. I know I sometimes treat them that way. I feel bad. I just don't have it in me to care."

Besides how the participants interacted with individual students, these experiences impacted their classrooms. Anastasia discussed the fallout from the confrontation with her student and the mother, saying that the student became "increasingly disruptive because she would get mad and then continuously bring up how she would let her mom 'deal with me." This behavior made the class "so uncomfortable for my other students as they tried to navigate defending me and getting along with their classmate." Charlotte talked about how she struggled with her class, feeling guilty because "my students thought I could or would no longer protect them."

Job Performance

Overall, the participants knew that trauma was detrimental to their job performance but also felt that it was positive in some ways. Britney discussed how because she had experienced trauma, she was more conscientious about how she saw her students, especially her students who were dealing with several issues. Art and Charlotte discussed the importance of building relationships to help keep a calm head in a traumatic moment. Dylan and Julia both talked about how students are much more open about their feelings and mental health and can have conversations about how they are feeling, allowing teachers to be honest about their feelings as well. Charlotte discussed trauma, and how, if addressed and worked through, can "help you grow and become your most authentic self."

Tools and Resources
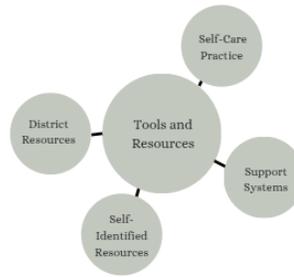
Figure 5 Tools and Resource theme cluster

Seven of the participants indicated they were aware of some district resources but did not know specifics. Eight of the 10 participants discussed their self-care practice and the role of their support system outside of school. Additionally, several participants discussed self-identified resources they pursued without help from the district or school administration.

Self-Care Practice
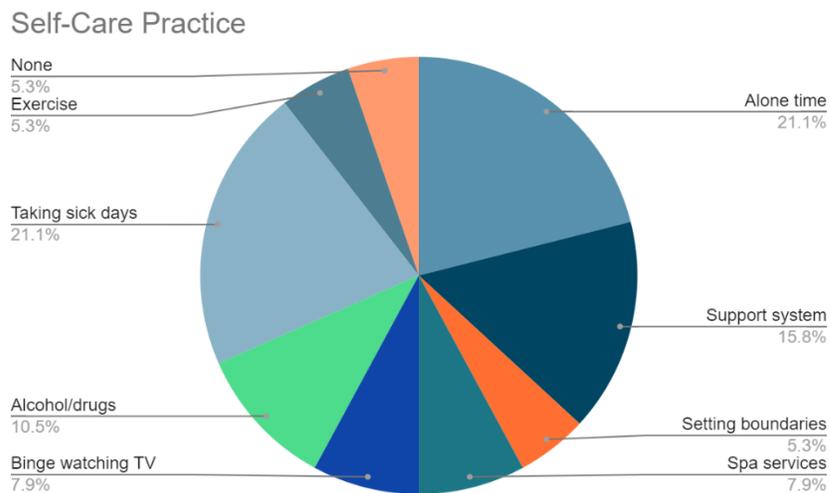
Table 2 Self-care practices for each participant

When asked about self-care, all 10 teachers were familiar with the phrase. I asked them to identify conventional self-care practices and most mentioned getting their hair done, pedicures, and bubble baths. Anastasia, Britney, and Dylan mentioned these practices as part of their self-

care practice. The other seven participants did not feel like these would constitute self-care for them. All 10 participants agreed on the importance of self-care and acknowledged the need to commit to it more robustly.

Abigail and Harper indicated they do not practice self-care. Abigail said, "There is no time for self-care because if I do anything for myself, I feel too guilty. Maybe when my kids are older." Harper said she does not feel able to "prioritize my needs over other people's now, especially my children. Since the divorce, they need me more than ever. When they are with their dad, I catch up on the things that slide while they are with me." Charlotte said she practices self-care, but only because her family makes her. She said "My friends and wife will say, 'You need to take some alone time. Go for a drive, go to the movies, go workout, do whatever you need to do, but it's time.'" The other seven participants try to practice self-care regularly. Julia and Harley talked about how their self-care looks like saying no to people who request their time, money, and energy. Julia discussed how "setting boundaries really was a game-changer. Once I realized I could say no to people who want my time, I felt a huge burden off my shoulders." Britney and Art both mentioned spending time with their dogs as self-care. Tatum talked about journaling and exercise as important parts of her self-care practice. Several people said they take sick days when feeling burned out and needing self-care. The most common form of self-care was spending time alone. Eight of the 10 participants indicated carving out alone time each day was vital to their mental health. Dylan said, "Sometimes I just need quiet. I fantasize sometimes about getting in my car alone and just driving away because I crave that quiet. My twenty-minute commute is a huge part of me being able to reset and be ok."

Support Systems

All 10 participants emphasized the value of their support systems. These support systems consisted of spouses, parents, friends, children, and even pets. Charlotte said she "would not be standing" without her support system, which consists of her friends, both at work and outside of work. Harper said that since her divorce, her mother has been "a lifesaver, helping with all of my kids' activities and just helping keep me sane." Tatum discussed how much she has leaned on her husband, not only through their infertility and miscarriage but also as she became disillusioned about teaching. She said, "He was so supportive about me leaving the profession, understanding that the trauma I was carrying made it impossible for me to be the kind of teacher I wanted to be." Dylan talked about how valuable her work friend group is, "They are safe places for me to vent, to cry. They are ready to go to bat for me and follow me into battle. They make me laugh and they make it worth it honestly." Nine of the 10 participants discussed their support systems are sometimes the only thing keeping them in their jobs.

Self-Identified Resources

Even though all 10 participants indicated that they could benefit from resources to help them with their mental health, only three participants are actively pursuing counseling. Anastasia, Julia, and Charlotte are working with a mental health therapist. They chose therapy independently and are using their insurance to cover the cost. Additionally, Anastasia and Julia take prescription medicine for depression and anxiety. Anastasia is concerned because she is reaching the end of her covered visits. Julia must be judicious in how often she sees her therapist for the same reasons. Charlotte, a Native American, accesses unlimited therapy visits through her tribe. However, these sessions require scheduling within the tribal hospital system, which can sometimes be challenging.

Four participants indicated they use alcohol and marijuana to help manage their mental health. Harper admitted that she is dependent on alcohol and wants to cut back. Tatum also said that a nightly glass of wine is 'essential to my mental health. Without it, I don't think I could face my days." Art and Anastasia said that they use marijuana "regularly" to help cope with their lives. Julia indicated that she uses marijuana gummies and wine as a way to "cope with my stress and trauma."

District Resources

When asked about district resources nine out of 10 participants were aware that there was "some kind of counseling through the district," but eight of the nine did not know how to access it. Charlotte knew how to access the district counseling, but only because of a separate issue where a colleague had used it. Others did not know how many sessions were available, where to get information, or what they needed to do to access it. Six of the participants knew about counseling availability through a flier in the hall but were unclear if it was for teachers or students. Tatum indicated when she was struggling after her miscarriage, an assistant principal told her counseling was available but also did not know how to access it or who to ask about it. Dylan was unsure if you had to qualify for counseling or how to acquire it. Julia, Harper, Harley, Abigail, and Britney were aware of a counseling program but were confused about the number of sessions, if there was a charge, or where to find answers to their questions. Julia said she thought the district teachers' union provided access to the Calm app. She was the only person who mentioned this though.

Harper mentioned her principal talks about work-life balance, but there are no resources available to accomplish this. Tatum expressed frustration over the poor communication regarding access to resources, including how to obtain counseling, pursue FMLA, and determine the

appropriate type of leave to take. Charlotte said few resources were made available to her, including details on how to file worker's compensation when she went to the hospital to get checked out after she was attacked Additionally, Charlotte, Art, and Harley shared that they were denied the right to press charges against their assaulting students because district school resource officers were instructed not to complete the necessary paperwork.

Conclusion

This study took place with 10 Oklahoma City, OK metro area high school teachers. The participants completed a journal addressing their definition of trauma and describing their traumatic experiences. Additionally, they participated in in-person interviews that asked more specifically how their experiences impacted their jobs and the extent to which they felt supported by their district and school administration. The participants' interview responses and journal entries indicated they experienced personal and institutional trauma. These experiences led the participants to feel isolated, minimized, and overwhelmed.

The participants felt that supports and resources were neither readily available nor easily accessible. All participants experienced burnout and understood the value of self-care, but only a handful had a robust self-care plan and practice. Additionally, the participants said their districts, schools, and school administration lacked proficiency in trauma-informed practices and felt that expertise in these areas would be beneficial. Many of the participants discussed the need for school administrators to take the time to build relationships and rapport with their staff. Overall, the participants did not feel supported by their district or school administrators, which negatively affected the participants' ability to do their jobs.

The participants experienced anxiety, depression, isolation, lack of motivation, and a reluctance to do more than the minimum job requirements, with some even struggling to meet

those. These experiences led to increased absenteeism, lack of trust in their colleagues and students, physical and emotional withdrawal, and other adverse behaviors that impacted the teachers and their students. The lack of support from their district and school administration led many participants to consider looking for jobs in other districts or quitting education altogether. This study illustrates school administrators' roles in influencing the job performance of teachers who have experienced trauma. The study also indicates teachers seek and need support from their school and district administration when dealing with trauma and other mental health challenges.

Chapter 5: Discussion of Findings

Summary of study

Teachers face a multitude of challenges, including the evolving nature of their roles, and the emotional toll of dealing with their trauma as well as that of their students (National Education Association, 2022; Ferguson, 2019). Understanding big "T" and little "t" traumas can highlight the additional stressors teachers face and how those stressors may impact their ability to do their jobs effectively (Barbash, 2017; Taylor, 2021). Mental health support for educators is becoming an increasingly important aspect of school leadership, and addressing teacher well-being is becoming as much a priority as addressing student mental health. Creating a school climate that helps teachers feel supported and willing to ask for help can reduce burnout and help keep teachers in their jobs (Collie et al., 2012). Ignoring teachers' mental health and the impact that trauma has on their lives is detrimental to the overall efficacy of schools.

This study explored how trauma impacts teachers' job performance and how school administration supports teachers who experience trauma. This issue is important in that teachers are feeling burned out and leaving education at alarming rates (APA Task Force, 2022). This study examined how personal and institutional trauma impacted teachers' ability to do their jobs, to hopefully provide districts with a road map for meeting their teachers' needs. It also explored how school administration helped or contributed to teachers' trauma. Lastly, it looked at district and site tools and resources and how teachers were utilizing those, and what more could be done.

The research questions for this general inductive qualitative model included:

- How does trauma (personal, institutional, and/or secondary) affect teachers' job performance?

Additionally, I explored these secondary questions to expand on the data gathered:

- What assistance is available to support teachers' mental health needs and how is it utilized?

- How does school administration support teachers who experience traumatic events or other issues related to mental health?

The study included 10 participants using purposive sampling. These participants consisted of high school teachers in the Oklahoma City, OK metro area. They all self-identified as having trauma and shared their experiences via journal prompts (Appendix A) and during in-person, semi-structured interviews (Appendix B). I transcribed the interviews using third-party software and then began the coding process using the journals, interview transcripts, and my notes from the interviews. After establishing my codes, I identified themes. Upon reaching data saturation, I started synthesizing the data into the corresponding themes. I also kept a research journal to identify researcher bias. This journal helped me work through my feelings as the participants shared their experiences with me.

Discussion of Findings

Through this study, the reasons teachers are leaving education became clear. Not only are they experiencing trauma, but their trauma is impacting their ability to do their jobs effectively. Also, there is a definite need for school administrations to better support their teachers. Not only do they need to better support them, but there is also data to show that teachers want their school administrators to take the time to build relationships with them.

Trauma Response

It was clear from the responses of the participants that trauma was impacting their daily lives. This finding is consistent with the research that "traumatic experiences do leave traces on our minds and emotions" (van der Kolk, 2015). The participants indicated they experienced both

emotional and physical manifestations of trauma, as discussed in Dr. Woodhouse's book, *You're Not Broken: Break Free from Trauma and Reclaim Your Life* (2021). The stress and burnout they feel daily is a trigger to their trauma and caused them increased feelings of isolation, anxiety, and a lack of motivation to go to work or do the little things. A common response to burnout was withdrawing from family and friends and craving time alone. In addition, their anxiety led them to second guess their decisions, not trust their students and colleagues, and in some cases ignore their school administration. This behavior indicates the participants' trauma is impacting their daily lives, as these reactions are common responses to trauma (Barbash, 2017; Lander, 2018; Parker and Henfield, 2012; Pressley, 2021).

In addition to the emotional response to trauma, the participants all indicated some physical manifestations of trauma as well. The responses ranged from no appetite to overeating, insomnia to sleeping for days at a time, and increased instances of illness, which are common physical manifestations of trauma response (Dalvie, 2021; Herman, 2015; mind.org, 2020; van der Kolk, 2015; Woodhouse, 2021). Sometimes, the physical response to trauma and stress resulted in missed time at work, a lack of attention to some of the administrative aspects of teaching, and in one case, departure from the profession. With all participants indicating they experienced burnout, and all of them admitting they regularly considered leaving the profession, school and district administrators should be concerned about how trauma exacerbates teachers' stress.

Perhaps the study's most alarming finding was the number of participants who engage in escapist behavior as a response to their trauma. Five out of the 10 participants discussed drug and alcohol use as a coping mechanism. Multiple participants coped with their traumatic experiences through food, with several lamenting weight gain following their trauma. As seen by the

participants, falling into destructive behaviors like this can impact relationships and motivation (mind.org 2020; Morton, 2021). Art and Anastasia said they do not trust their school administrators, their students, or other stakeholders. Tatum and Harper indicated they were unmotivated and would often "hide out" to deal with hangovers and other ailments related to too much drinking. Districts cannot police their employees' actions outside of school, but providing access to resources for drug and alcohol abuse and food-related issues could assist interested teachers in maintaining sobriety and minimizing problems associated with such behaviors.

Teachers and students are both impacted by their trauma response. Currently, while there seems to be a greater focus on addressing students' trauma needs, teachers also require similar consideration to help them process their trauma and remain as regulated as possible.

Trauma-Informed Schools

During the study, participants provided information about their knowledge of trauma-informed care (TIC) through both their journal entries and interviews. Many of them had a basic understanding that TIC meant to approach people as though they had experienced trauma before in their lives. Some of them went deeper, indicating they felt that to be trauma-informed meant to interact with others in a way to not re-traumatize them. While there was a general understanding of TIC, only Dylan had attended any training, consisting of one-half day of professional development. None of the participants felt they were trained in TIC, and they all felt strongly that their school administrators had not been trained in it either. TIC shifts the question from "What is wrong with you?" to "What happened to you?" (Center for Health Care Strategies, 2018; Perry & Winfrey, 2021; Wolf et al., 2013). It aims to integrate daily practices that recognize the widespread nature of trauma and ensure that people are not re-traumatized in the workplace or at school (Center for Health Care Strategies, 2018). The participants in this study indicated that

organizational change—something they believe the districts have not yet implemented—is required. All participants tried to create safe spaces in their classrooms to prevent traumatizing their students, but without proper training, they felt they sometimes missed the mark. This lack of training in knowing how to help their students caused them more stress (Greenway, 2005). Mostly, participants were aware of how they talked to their students, tried to minimize sarcasm, not raise their voices, stay calm, and use steady voices. Participants also advocated for their students, understanding that sometimes they were the only ones sticking up for students. All participants indicated they would love formal training on TIC and felt it would make them more effective employees and teachers.

All 10 participants agreed their school administration was not trauma-informed and felt, as a result, their schools were not safe, and the climate was, at best, negative and, at worst, toxic. The toxic environments included lack of support, unreasonable workloads, disrespect, and chronic stress leading to decreased energy, excitement, and productivity (Sleek, 2023). The participants spent most of their time discussing the trauma their students face, not mentioning their trauma until specifically asked about it. The participants agreed that while training for school administration would primarily enhance their students' lives, they also saw the value in working for a school leader who recognizes both teachers' needs and those of their students. Additionally, they all felt training could benefit colleagues who were less sensitive to the needs of students and who participated in behaviors that might re-traumatize students. Four of the 10 participants indicated they wished there was training specifically related to secondary trauma, as they sometimes struggled emotionally after hearing their students' stories. This training would improve their relationships with their students and also help the participants learn to deal with their feelings (Brown et al., 2022; Eyal et al., 2019). While participants acknowledged that

investing in TIC training could be challenging, they felt that doing so could be impactful and was worth the cost and time. The participants actively discussed how disheartening it was to work for school administrators who showed a lack of empathy towards teachers, treating them as mere bodies in a room rather than caring about them as individuals. Harper stated that TIC training was not addressed in administrative degree programs, adding there needs to be more training on how to support teachers in a social-emotional way. Many participants did not feel they worked in safe environments, indicating they felt their school administration did not care about their well-being, with Art saying he felt like he was just a "body in the room."

Administrative Response

Research indicates that district and school leadership are defining factors in whether teachers stay at their jobs or leave (Baptiste, 2019; National Education Association, 2022). Every participant in this study indicated they have considered leaving their districts and the profession regularly. All study participants expressed a desire for their school administration to invest time in building relationships with staff as a way to feel supported. The overarching theme to the question "What do you wish your site administrators did differently?" boiled down to school administrators taking the time to build trust and relationships. Universally, the participants did not feel that their school administration supported them in their time of trauma. This lack of support led to them feeling their issues were minimized and deemed unimportant or trivial. Schools that foster feelings of trust, support, and appreciation have more long-serving teachers who are more committed to their workplace (Hughes and Pickeral, 2013; Vail, 2005).

The participants believed if school administrators devoted more time to developing relationships with teachers, doing so would create a more comfortable environment for sharing personal traumas and needs. This practice would particularly impact how school administrators

interact with teachers, including the way they offer criticism, approach them during classes, and use jokes or humor at the teachers' expense. One participant was especially affronted when a school administrator joked about them being "a hothead" and "immature," saying that these terms were triggering as they reminded them of their childhood.

Relationship building is an element of EI vital to effective leadership (Nicely et al., 2003). The participants actively discussed the importance of school administrators understanding the diverse neurodiversity, mental health, and personality traits of their staff. Abigail, for example, mentioned her ADHD, noting that long meetings with school administration often posed a challenge for her. The discussion about relationships included a focus on the need for school administrators to understand that teachers are not just employees, but individuals with lives, concerns, and stresses outside of work. Harper and Harley stated their school administrators mentioned work/life balance, but do not address the amount of stress that teachers face, nor do they take things off teachers' plates. Instead, school administration oftentimes added more responsibilities even though teachers were already overworked. For these participants, the perceived lack of EI in their school administrators, who did not seem to operate from a place of empathy, is corroborated by Bunker's findings (2012).

Most troubling was how these participants described their school administration's responses in times of struggle. Some participants were subjected to name-calling. Many participants faced ridicule, their feelings dismissed, and being told they were overreacting. All participants felt that their school administration did not respond in a way that supported them, causing a breakdown in trust. Participants consistently perceived that school administration prioritized public perception over the well-being of teachers. Participants also believed that analyzing data was prioritized over the human factor. They felt that since addressing teachers'

emotional needs was not a priority at the district level, it consequently was not emphasized at the site level either. All participants felt the school administration's responses influenced their interactions at school, leading many participants to withdraw and isolate themselves due to feelings of stigma and embarrassment caused by their treatment. As a result of these responses, the participants did not feel their own emotional well-being and mental health mattered. And, although there were mentions of self-care, it was not prioritized.

Job Impact

All 10 participants felt their trauma, past or present, impacted how they did their jobs. However, not all impacts were negative. The participants consistently discussed how today's students are more open about mental health issues, which helps participants cope with their trauma challenges. Participants agreed that while social media had vast negative repercussions, there was a positive in that it provided students and teachers alike with a more comprehensive vocabulary to talk more openly about mental health and trauma. That being said, the participants felt their trauma had negative implications on how they did their jobs. Most commonly, when triggered, participants would withdraw from their work colleagues, their students, friends, and family. This reaction is a common indicator of trauma (Eyal et al., 2019). Not only would participants withdraw, but most indicated they would take days off work because they could not face the stress of their work environment, spending time instead binge-watching TV, sleeping, and more. Absenteeism creates additional stress, as teachers often have to cover for their absent colleagues.

In addition to withdrawal and absenteeism, the participants discussed how they no longer felt engaged or compelled to do the little things to ensure that their school day ran smoothly, that their students had everything they needed, or that they were prepared to deliver lessons that were

effective or meaningful. Again, this is typical behavior, but not only did it make the participants feel like bad teachers, it increased their stress because they felt ineffective.

The most prevalent among these problematic issues was the participants' inability to make decisions. Anastasia discussed not being able to enter grades because she did not want to deal with the aftermath. Harley, Charlotte, and Tatum talked about not wanting to help students one-on-one or in small groups because they did not trust the students or themselves. Art talked about not wanting to coach anymore or confront students because he was worried about what would happen if a student attacked him again. As is typical with people who have suffered trauma, these participants no longer trusted their instincts and no longer trusted their environment (Lever et al., 2017; Perry & Winfrey, 2021).

Trauma had far-reaching effects on the participants in both small and big ways. Ultimately, Tatum left the profession because she no longer felt education was a safe space for her and it was causing ongoing physical and mental health issues. All participants indicated they think of leaving the profession every year, sometimes going as far as applying for jobs in the middle of the year as a result of how their trauma impacts them. Abigail says, "Sometimes I feel like I shouldn't be here anymore, like if I don't love it, it's not worth it."

Tools and Resources

The National Educators Association (2022) offers suggestions for how schools can actively support teachers who have experienced or are currently experiencing trauma. However, these supports are typically unavailable, or if they are, they are not widely publicized or readily available. For example, Tatum experienced a medical event that led to the loss of her baby. She did not receive guidance from her site or her district administrators on how to navigate that event, from what type of leave to use to how to access FMLA. This failure added to her trauma

because she had to process the logistics of what to do to keep her job immediately following surgery and the grief that came with her miscarriage. Likewise, Harley, Art, and Charlotte had grounds to pursue legal actions against the students who assaulted them, but school administrators did not provide resources and guidelines, and in Harley's case, denied access to her legal options. All the participants indicated they knew there was an Employee Assistance Program (EAP) but had no idea how to access it or what exactly was available to them. This lack of access to information is detrimental to teachers' mental health and making it more accessible is a straightforward solution for districts that could improve school cultures (Hydon et al., 2015).

Regarding self-care, most participants discussed taking time alone. Sometimes, even when they felt triggered, participants would not get that opportunity until the end of the day, as the school schedule is not structured so that teachers can typically step away from their classes to have alone time (Gearhart et al., 2022). Delaying self-care practice usually contributed to their stress. Support systems both within and outside of school were helpful tools for the participants. According to Dylan, access to friends and family who built her up and helped her get through hard times was a "game-changer" and "what keeps me going most days." However, teachers often face delays in accessing support systems, as their rigid schedules and commitments to extracurricular duties, classes, or meetings typically consume their free time.

A consistent theme through the interviews was that all 10 participants felt they could benefit from mental health counseling, yet only three were actively seeing a therapist. All three found a therapist independently and did not access district resources. While all 10 were aware of access to counseling through the district EAP, they indicated they would need more information on who to contact, how many sessions they were afforded, and when sessions were available.

They had more questions than answers about the program and did not seem inclined to follow up with it because, as one participant said, "it seem[ed] like a lot of work for not a lot of pay off."

Implications for Practice

This study confirms that school districts and school administrations are not meeting their teachers' needs. Teachers are experiencing trauma at alarming rates (Ferguson, 2019). These experiences and the continued stress that teachers face daily are leading to a massive teacher shortage across the country (National Education Association, 2022). Something must be done to support people who undertake this vital work, and currently, the districts represented in this study are not providing that support.

The first, pivotal step in this process is that school districts need to acknowledge that teachers' workloads have become unsustainable, and they need help managing everything on their plate. Instead of adding more job tasks each month, quarter, or year, school and district administrators should look at ways to subtract job tasks that are no longer relevant or best practices (Rousseau, 2021). Teachers are increasingly asked to take on more, and this is leaving them under-resourced which exacerbates their stress and can intensify their being triggered or succumbing to a traumatic stress reaction (Perry & Winfrey, 2021). By auditing job tasks with the aim of combing, eliminating, and possibly restructuring them, districts can start the process of supporting teachers through mental health issues and traumatic responses. School districts would be wise to spend time exploring organizational frameworks that center on human resources (Bolman & Deal, 2017). Because the greatest asset in school districts is their people, looking for ways to apply the psychological contract, subtractive change, emotional regulation, and emotional intelligence training would benefit their retention and the overall climate of their district (Grant, 2007; Grant, 2013; Mike & Rousseau, 2015; Rousseau, 2021).

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As the participants discussed, one glaring problem between teachers and school administrators is the lack of relationship building. Denise Rousseau advocates for the psychological contract, which plays on this idea of the value of relationship building and how, when dealing with peopled organizations, there is a perceived psychological contract, if not an explicit one (Rousseau, 1998). When this contract is violated because of a lack of relationship or a disregard for the relationship, research shows that employees become dissatisfied with their organization and begin to look for other opportunities (Rousseau, 1998). This effect is evident in the high number of teachers leaving the profession (National Education Association, 2022). In addition, Rousseau challenges organizations to utilize subtractive change (Rousseau, 2021). Subtractive change could be effective in helping districts to eliminate work overload associated with the mismatch job/ person dimension of burnout (Maslach, 1998). School districts should audit their existing programs to assess their efficacy, clearly communicating to school administration which programs are no longer effective and can be eliminated from teachers' job requirements. This assessment should be completed before introducing any new tasks to teachers' already overflowing responsibilities.

In addition, Adam Grant fervently advocates for a practice known as emotional regulation training for both organizational leaders and employees (Grant, 2013). For companies to be successful, employees need training in effective strategies for managing emotions. Employees' actions and effectiveness are shaped not only by emotional states but also by how they manage those emotions (Grant, 2013). Districts should want input from their stakeholders, including their teachers, meaning that teachers should feel comfortable expressing their views. However, teachers, like many employees, are afraid to speak up. When teachers complain, there can be backlash from students, parents, and sometimes school administration. Emotional

regulation training can help school and district employees at all levels know how to express suggestions constructively (Grant, 2013).

Another low-cost way to help teachers manage trauma and stress is to provide a comprehensive information packet detailing how to access legal and district resources. This packet would include contact information for human resources in the event of certain situations. It would provide detailed information on accessing the EAP, relaying the services that are partnered with the district, setting up sessions, session availability, and other pertinent information. Districts also need to make clear the legal supports that are available to all staff members including, but not limited to federal laws and protections such as FMLA, ADA, OSHA regulations, Workers' compensation laws and more. This packet would expressly communicate access and utilization of applicable federal and state laws. This packet would include a flowchart on who to contact with questions related to pay, leave, insurance, and more. The packet would be available digitally and physically to every new hire and every employee in the district so any employee would know who to contact in the event of an emergency or a trauma. This concept presents a low-cost or no-cost solution to the frequently mentioned issue among study participants regarding the lack of access to information. In addition to sharing detailed information about their resources, districts might provide a community partners directory, giving teachers access to resources and job support.

In addition to these very practical resources, districts should consider the benefits of training district and school administrations in EI and trauma-informed practices. But more than just providing training, districts need to emphasize the value of these practices and incorporate them into the matrix by which school administrators are evaluated. EI is a key factor in developing safe work environments, making schools less likely to trigger staff and students alike

(Goleman, 2006; Gray, 2009; Moore, 2009). EI can help school administrators lead with more empathy, more recognition of their staff's differences, and a deeper understanding of how to work with each of their teachers more productively. Trauma-informed practices can assist leaders in recognizing trauma responses in their teachers and have tools to help them navigate those situations. The school administrations in this study did not treat the participants with empathy or sensitivity to their trauma, causing the participants to feel minimized and distrustful of school administrators. In addition to training on EI and trauma-informed practices, school administration should participate in professional development related to mental health stigma, implicit bias, and other social justice initiatives to help develop a vocabulary for these issues and to support them in identifying and reflecting on where they need to improve to better support teachers and students.

Lastly, school administrators and teachers need professional development on trauma literacy, self-care, and burnout. This training should be easily accessible, ongoing, robust, and meaningful. There is inadequate understanding of the multidimensional theory of burnout and its impact on teachers. Additionally, terms like secondary trauma, big "T" and little "t" trauma, and traumatic stress response are not widely known or used. Teachers and school administrators need to understand these terms and the trauma continuum that exists for all people as they navigate their jobs and lived experiences. Teachers need training in secondary trauma and trauma informed practices as a way to alleviate their feelings of inadequacies as they try to address trauma with their students (Rahimi, 2021). These topics should not only be addressed by districts, but teacher training programs should also consider incorporating courses on teachers' mental health into their curricula. This action would help prepare incoming teachers for the significant stress and potential trauma they may encounter in the education field.

Beyond trainings, there is a need for teachers to continue to be supported in the emotional work they do. Access to mental health providers on campus, rooms on campus designated as spaces to process feelings and experiences, engagement experiences at recreational areas, opportunities for professional growth, more autonomy, access to emotional support animals, and more are all options to improve teachers work lives. Districts and school administrators need to get creative about how to meet teachers where they are and accommodate their emotional needs in order to continue to help them meet their professional needs.

Recommendations for Future Research

While this study has implications related to how school administrators can better support teachers in trauma, it does have limitations. The sample group consisted of secondary educators in the Oklahoma City, OK metro area. Future research can expand this sample to include teachers at the elementary level and/or teachers in rural or suburban areas. Additionally, these specific participants shared experiences of personal trauma and institutional trauma. There is more room to research the impact of secondary trauma. A more longitudinal study in which participants journal daily over a year about their feelings to see how trauma is impacting them consistently could provide powerful results worth examining. Not only could teachers benefit from this exploration, but having administrators journal about their trauma interactions with teachers could produce powerful insights, as well. Lastly, an area of study that should be explored in more depth is how teachers are experiencing systemic trauma as BIPOC or LGBTQ+ teachers and how school administration supports or contributes to teachers' trauma.

Conclusion

This study confirms that teachers struggle with trauma and administrative lack of support, leading them to consider abandoning the profession. This data, if extrapolated, suggests that

teacher trauma may be a contributing factor in the current nationwide teacher shortage. School districts and school administrators have an opportunity and a responsibility to offer more support and guidance when it comes to helping teachers through their trauma. Some of these supports come at no cost. Some come at a substantial initial investment, but research indicates it would save money in teacher retention. The first step is acknowledging that teachers need help, as the current teacher shortage indicates a low morale issue. Providing teachers with comprehensive information on district-level contact information, and how to access resources like district EAPs, FMLA, ADA compliance and more resources could drastically reduce stress and anxiety as teachers navigate traumatic situations in their lives. Districts need to impress on school administrators the value of taking time to build relationships with their staff, not treating them as just an employee. For more extensive and comprehensive help, districts need to invest in trauma-informed care training for their district and school administrators, emphasizing that trauma-informed practices need to be extended to their staff as well as their students. District and school administrators should look at scheduling and hiring practices to assess how to create more manageable workloads and more opportunities for teachers to practice self-care during the day. Addressing the needs of teachers is an important step in creating schools that thrive rather than simply survive.

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Appendix A: Journal Prompt for Participants

This journal prompt will be given at the outset of the study and will be used to help me determine which participants meet the criteria of trauma and which classification of trauma they experienced. It will be accessible by me only. I will also use these responses to help guide questions in the semi-structured interviews.

Journal Prompt

Thank you for your willingness to participate in my qualitative study. This study will be conducted through journal prompts like this one, as well as interviews. Currently, I am planning for one recorded interview lasting approximately 60-90 minutes. I will schedule these interviews with you at your convenience. These prompts and interviews will be read by me only and will be stored on a flash drive that is password-protected and stored in my home office. Pseudonyms will be used throughout the findings portion of my dissertation to protect your privacy.

Please respond to the following questions and prompts.

Name (please use your pseudonym):

Age:

Ethnicity:

Position:

Number of years taught:

Number of years in current school:

In your own words, what does trauma mean to you? If you believe there are different kinds of trauma, please indicate how they are different.

Prompts:

* In your own words, what does trauma mean to you? If you believe there are different kinds of trauma, please indicate how they are different.

*In your own words, describe an experience that you feel was traumatic and impacts the way you do your job. Include as much or as little detail as is comfortable for you. Please indicate, to the best of your ability, the timeline in which this event happened and your return to work.

Appendix B: Interview Protocol

All participants will participate in a semi-structured interview that will be visually and audibly recorded for accuracy and completeness. Additionally, the interviewer will be taking notes in her research notebook. The interviews will last approximately 60-90 minutes. Once they are completed, the researcher will transcribe them using a third-party software. Participants will have the opportunity to read over the transcript. Additional interviews may be set up for follow up and clarification.

Interview Script/Questions

Hello, I am Jill Slay and I am working on a qualitative study examining how teachers are impacted by trauma and how school leaders can support them. This interview is being recorded and will be transcribed later. The interview should last about an hour to an hour and a half and there may be a follow up interview if needed. Do you have any questions so far? (Allow time to answer questions.) Great. Let's begin.

1. Can you tell me your full name and what you teach?

2. How long have you been teaching?

3. How long have you been at your current school?

4. Tell me a little bit about your journey to become an educator.

5. What struggles have you encountered as an educator?

6. When I use the word "trauma," what does that mean to you?

7. What does the term trauma-informed mean to you?

8. What programs or activities are you aware of that your district has in place to address trauma in learners and/or educators?

9. Tell me about how you handle stress.

10. Self-care is a buzzword in education right now. What does that term mean to you?

11. How do you practice self-care?

12. What district or school programs are you aware of as a teacher to help you with stress and/or burnout? What does burnout look like for you?

13. Have you experienced what you would consider a traumatic event? Can you tell me a little about the event and how has that impacted you professionally?

14. Sharing as much or as little information as you feel comfortable, tell me about how you generally process trauma.

15. What types of resources have been helpful to you to help process trauma?

16. How have you generally accessed those resources?

17. What kind of expectations do you have for your administrator, especially as it relates to trauma and being trauma-informed?

18. Again, considering your school leader, what, if anything, do you wish they understood about your trauma in particular?

19. How do you think your experiences influence (if you think they do) your teaching style/rapport with students/patience, etc? If you don't think they do, why do you feel that way?

20. Is there anything else you would like to add?

21. Do you have any additional questions, concerns, or comments?

22. Do you mind sharing your thoughts on this process and how you feel about being a part of this study?

23. If needed, are you willing to be contacted again to complete a follow up journal prompt or interview?

Thank you so much for participating in this study. I will use a third-party software to transcribe this recording and I will share that with you as soon as I can. If you have any follow up comments or anything you would like to clarify, please reach out to me and we will set up another time to talk. If there is nothing you would like to add, this is the end of this recording.

Appendix C: Code Chart

Trauma response
- Emotional Response
- Physical Response
- Burnout
- Isolation
- Coping Mechanisms

Trauma-Informed Schools
- Trauma-Informed Teacher
- Trauma-informed Schools
- Trauma-informed Leaders

Administrative Response
- Minimizing
- Relationship Building
- Admin Response
- Admin Expectations
- Workplace Supports

Job Impact
- Job Tasks
- Student Interactions
- Job Performance

Tools and Resources
- Self-Care Practice
- Support Systems
- Self-Identified Resources
- District Resources

Impact of Trauma at Work

Appendix D: IRB Outcome Letter

The UNIVERSITY of OKLAHOMA

Institutional Review Board for the Protection of Human Subjects

Approval of Initial Submission – Exempt from IRB Review – AP01

Date: May 17, 2023   **IRB#:** 15918

Principal Investigator: Jill J Slay

Approval Date: 05/17/2023

Exempt Category: 2

Study Title: WHEN TEACHERS EXPERIENCE TRAUMA, WHAT IS THE ROLE OF THE SCHOOL LEADER: A QUALITATIVE STUDY

On behalf of the Institutional Review Board (IRB), I have reviewed the above-referenced research study and determined that it meets the criteria for exemption from IRB review. To view the documents approved for this submission, open this study from the *My Studies* option, go to *Submission History*, go to *Completed Submissions* tab and then click the *Details* icon.

As principal investigator of this research study, you are responsible to:
- Conduct the research study in a manner consistent with the requirements of the IRB and federal regulations 45 CFR 46.
- Request approval from the IRB prior to implementing any/all modifications as changes could affect the exempt status determination.
- Maintain accurate and complete study records for evaluation by the HRPP Quality Improvement Program and, if applicable, inspection by regulatory agencies and/or the study sponsor.
- Notify the IRB at the completion of the project.

If you have questions about this notification or using iRIS, contact the IRB @ 405-325-8110 or irb@ou.edu.

Cordially,

Lara Mayeux, Ph.D.
Chair, Institutional Review Board