# Student perspectives on how trauma experiences manifest in the classroom: Engaging court-involved youth in the development of a trauma-informed teaching curriculum

Shantel D. West [a,*], Angelique G. Day [b], Cheryl L. Somers [c], Beverly A. Baroni [d]

[a] Wayne State University, School of Social Work, 4756 Cass Avenue, Detroit, MI 48202, USA
[b] Wayne State University, School of Social Work, 303 Thompson Home, 4756 Cass Avenue, Detroit, MI 48202, USA
[c] Wayne State University, Department of Educational Psychology, 345 College of Education, 441 Education Building, Detroit, MI 48202, USA
[d] Clara B. Ford Academy, 20651 West Warren, Dearborn Heights, MI 48127, USA

## ARTICLE INFO

## ABSTRACT

This study explores how the lived experience of court-involved youth impacts learning and school culture, and solicits youth voice in creating a trauma-informed intervention to improve student educational well-being. Thirty-nine female students, with ages 14 to 18, participated in focus groups to describe externalizing behaviors that they have both witnessed and personally struggled with in the classroom, discuss the perceived causes of these behaviors, and their suggestions for improving school culture to reduce these behavior manifestations in the classroom. Two major categories of behavior were identified, including: "anger emotions" and "aggressive actions." Students described the causes of behavior as, "environmental influences" and "triggers." The most common solutions that students gave to reduce externalizing behaviors in school settings included "encouraging respect of others" and "improving behavior management to enhance student engagement." An additional solution suggested by the students included the "monarch room as support." The Monarch Room is an alternative intervention to traditional suspension/expulsion polices that provides students in need of specific emotional support an opportunity to redirect/de-escalate externalizing behavior or mood in the school setting. This study highlights the need for trauma-informed approaches in school settings, and the importance of the inclusion of a youth voice in developing and implementing these intervention models.

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## 1. Introduction & background

The challenges faced by court-involved youth are complex and widespread, as large portions of the youth population have had court contact, either as wards of the foster care or juvenile delinquency systems. The U.S. foster care system population reached 400,540 in 2011 with 31% of all children in foster care between the ages of 14 and 20 years (U.S. Department of Health and Human Services, Administration for Children & Families, 2012a). The juvenile justice system has encountered even higher numbers of youth, with over 1.3 million delinquency cases appearing in juvenile courts across the U.S. in 2010 (Office of Juvenile Justice & Delinquency Prevention, 2013), with 70,792 of these youth being court-ordered into an out of home placement (Sickmund, Sladky, Kang, & Puzzanchera, 2011).

Foster youth and other court involved youth, such as juvenile delinquents, often present with a documented history of being abused and/or neglected by their families of origin. These traumatic experiences of abuse and/or neglect impact the normal developmental trajectory, increasing the risk for emotional, behavioral, academic, social and physical problems (Cook et al., 2005). As defined by the Substance Abuse & Mental Health Services Administration (2012), trauma "results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being." Complex trauma, defined as "multiple or chronic and prolonged developmentally adverse traumatic events" (Wolpow, Johnson, Hertel, & Kincaid, 2009, p. 2), poses an even greater threat to youth. Types of traumatic events vary significantly, but generally include abuse or neglect, domestic violence, accidents or natural disasters, and terrorism or war (Griffin, 2011).

These experiences make them particularly vulnerable to negative outcomes including self-harm behavior, dating violence (Duke, Pettingell, McMorris, & Borowsky, 2010), delinquency and perpetration of violence (Bruce & Waelde, 2008), low educational attainment, homelessness, early parenting, working poverty, unemployment, dependence on public assistance, relationship difficulties (Lawrence & Hesse, 2010) and limited access to reliable transportation (U.S. Government Accountability Office, 2004). Traumatic childhood experiences have also been linked to increased risk of substance abuse, mental illness,

* Corresponding author.
E-mail addresses: shantel.west@wayne.edu (S.D. West), angelique.day@wayne.edu (A.G. Day), c.somers@wayne.edu (C.L. Somers), beverly-baroni@cbfacademy.com (B.A. Baroni).

physical health impairment, and sexually transmitted disease (Griffin, 2011). Youth who experience abuse generally begin exhibiting delinquent behaviors at earlier ages, have higher juvenile recidivism rates, and display higher risk of adult criminal behavior than their non-maltreated counterparts (Day et al., 2013).

### 1.1. Academic issues of court-involved students & the school response

Achieving school success is generally contingent on the ability to effectively meet a combination of demands. Attention, memory, organization, comprehension, and self-regulation of behavior are but some of the abilities needed for successful classroom learning (Massachusetts Advocates for Children, 2005). For youth dealing with trauma, this can be very difficult to accomplish. Early trauma has had a demonstrated effect on youth self-regulation of behavior and attachment (Cook et al., 2005), as well as brain development (Anda et al., 2006; Black, Woodworth, Tremblay, & Carpenter, 2012). Dysfunction in these areas undoubtedly affects youth behavior in the classroom. Acute or persistently stressful events can create problems with a youth's ability to effectively communicate, memorize, organize information, and form positive peer and adult relationships (Massachusetts Advocates for Children, 2005).

Trauma can also impair a youth's ability to pay attention, establish appropriate boundaries, cognitively process information, as well as control anger, aggression, and other impulses (Cook et al., 2005), which may result in acting out and other externalized behaviors in the classroom (Office of Juvenile Justice and Delinquency Prevention State Training & Technical Assistance Center, 2013). This may be due, in part, to traumatic reminders or triggers, which are regular references to previously traumatic experiences that exist in the youth's environment, such as smells, sounds, or the anniversary of the traumatic event. Although youth are not always cognizant of their triggers, their external behavior may be negatively affected as they subconsciously struggle to cope with the internal anxiety and concerns of safety that trigger their production (National Child Traumatic Stress Network Core Curriculum on Childhood Trauma Task Force, 2012; Pynoos, 1993).

Shonk and Cicchetti (2001) found that youth who had experienced maltreatment were less likely to become engaged in school, display appropriate social skills, and generally demonstrated more externalizing and internalizing behaviors than non-maltreated youth. Findings suggest that court involved youth are more likely to fail a grade (Burley & Halpern, 2001; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Courtney, Terao, & Bost, 2004; Pecora et al., 2005). They are also assigned to special education services with greater frequency (Macomber, 2009; Shin & Poertner, 2002; Smithgall, Gladden, Howard, Goerge, & Courtney, 2004) and have higher discipline referral rates and instances of school suspensions and expulsions than non-court involved youth (Burley, 2010; Courtney et al., 2004). Furthermore, exposure to violence has been linked to lower GPA's and higher school absence (Hurt, Malmud, Brodsky, & Giannetta, 2001), lower high school graduation (Grogger, 1997), and lower IQ's (Delaney-Black et al., 2002).

Schools can play an important role in linking traumatized students to the appropriate resources (Ko et al., 2008), as well as providing a trauma-sensitive learning environment to assist students in focusing on their academic success (Wong et al., 2007). This would include creating and maintaining safe and supportive learning environments, where student emotional responses can be managed and redirected toward more positive behavior (Bath, 2008).

### 1.2. Importance of youth voice

Generally, the focus of residential care has been on safety and permanency for foster care youth (Casey Family Programs, 2005) and reducing recidivism in the case of juvenile delinquent youth (Lawrence & Hesse, 2010). Little has been documented on the perspectives of court-involved youth placed in residential settings on school climate and educational well-being. Some studies have addressed student

behavioral issues in relation to attachment (Moore, Marlene, & Holland, 1997; Penner & Wallin, 2012). Still, the perceptions and educational experiences of youth living in residential care remains unchartered territory, and can be useful in understanding how to address the challenges faced by traumatized students in the classroom. Indeed, adults who lack trauma-informed knowledge can easily misinterpret the experiences of traumatized youth and its impact on behavior (Richardson, Coryn, Henry, Black-Pond, & Unrau, 2012). School personnel may incorrectly assume that youth trauma responses are an indicator of other mental health disorders (Cook et al., 2005; Massachusetts Advocates for Children, 2005), as symptoms of both often appear similar (Griffin et al., 2011).

Some resources are available to assist with implementing attachment and trauma-related practices into classrooms (Casey Family Programs, 2013; Massachusetts Advocates for Children, 2005; Wolpow et al., 2009); however, student perspectives is largely absent from the development of these resources. The successful implementation of trauma-informed training and practice in schools depends on the adoption of sustainable practices and strategies as well as the development of a trauma-aware organizational culture that includes students and school personnel as equal stakeholders (Hummer, Dollard, Robst, & Armstrong, 2010). A large part of establishing this new culture includes creating engagement opportunities for traumatized students to share their thoughts and experiences with policymakers, educational administrators, teachers, and other school personnel. The phenomenological approach can be especially powerful in capturing this voice, as it explores a particular phenomenon, uncovering the lived experience of an individual through their sharing of thoughts and experiences (Palmer, Larkin, de Visser, & Fadden, 2010; Smith, 2004).

Interventions designed to improve school climate and instruction methods should be guided by empowering youth strategies, culturally relevant applications, varied teaching methods, sufficient dosages, theory-driven choices, positive relationships, and appropriate timing, and they should include well-trained professionals to ensure that youth are ready to learn (Coyne, Carnine, & Kame'enui, 2010; Nation, 2003). Understanding the school climate of K-12 institutions that serve students in residential care from the perspective of its students can provide much needed insight into how to best improve their educational well-being. Creating a classroom intervention informed by the views and ideas of students can improve its efficacy, as acquiring input from service users is an imperative step in improving services (Head, 2011). Using an empowerment perspective and youth participation to address problems in the classroom means creating opportunities for collaboration with youth (Zimmerman, 2000) encouraging students to identify what problems exist, and including youth voice in creating solutions (Checkoway & Richards-Schuster, 2003). This empowering process can impact students in several ways, including promoting individual and social development, demonstrating the importance of student rights (Head, 2011), promoting youth connection, increasing confidence, and enhancing decision-making skills (Checkoway & Richards-Schuster, 2003).

### 1.3. Present study

This exploratory study uses phenomenology (Palmer et al., 2010) to examine student perspectives of educational well-being. It directly addresses the absence of voice of court-involved students living in residential care in the current literature. This study provides insight into the description of externalizing and internalizing behaviors that are either directly experienced or witnessed by court-involved youth in the school setting and identifies potential causes of these behaviors. This study also utilizes an empowerment perspective through its use of youth voice to inform the development of a trauma-informed training intervention for teaching personnel to effectively work with court-involved youth to reduce the occurrence of these behaviors in the school setting. While the voice of these personnel is also imperative, and will be captured in an

upcoming paper, the focus of this paper is student perspectives. Our primary research questions are: (1) What student behaviors do court-involved youth see displayed in the school setting? (2) What experiences do court-involved youth in residential care have that lead to these kinds of behaviors? and (3) What suggestions do court-involved students have for teachers to improve the learning environment?

## 2. Methods

### 2.1. Sample

All participants in the study were enrolled between September 2012 and June 2013 at a public charter school, co-located on the same campus as a large child welfare placement agency for girls in a Midwestern city in the United States. This school works exclusively with female, court-involved students, who generally have a history of abuse and neglect and were subsequently placed in residential treatment. In fact, approximately 90% of the youth residents on-campus have a mental health diagnosis. The school strives to treat, heal, and educate its students by following a school discipline system that incorporates the students' treatment goals and strategies. Its emphasis is on reducing student disciplinary issues by providing an effective social–emotional learning environment, teaching self-regulation and social skills to students, and helping them to control their emotions, make more responsible choices, and get along with others. The vast majority of students served (86%) were current residents, while some (14%) are young women who have returned to community living, but continue to attend the on-campus school.

The young people who participated in the focus groups ranged in age from 14 to 18 years old. Consistent with the rates of foster care youth placed in the mid-west United States, over 40% of the participants in the study were African American (U.S. Department of Health and Human Services, Administration for Children & Families, 2012b). The racial make-up of this population is also consistent to national prevalence rates for the disproportionate amount of court-involved youth of color in residential placements (Office of Juvenile Justice & Delinquency Prevention, 2010). As the school operates under a single gender classroom philosophy, all of the students who participated were female. Approximately 44% of participants were court-involved due to juvenile delinquency and the other 56% were placed as a result of abuse and neglect petitions. These data, taken together, indicate that these youth have had a variety of exposures to one or more traumatic events and/or complex trauma, as defined above.

For additional participant and school demographic information, see Table 1. Chi square tests demonstrate the representative nature of our sample when compared to the racial and grade level demographics of the high school population as a whole.

**Table 1**
Characteristics of student participants versus high school population (N = 39).

| | Studysample | | Total high school population | |
|---|---|---|---|---|
| | Frequency | Percentage | Frequency | Percentage |
| Total | 39 | 100 | 287 | 100 |
| Race | | | | |
| White | 9 | 23 | 61 | 21 |
| African American | 27 | 69 | 212 | 74 |
| Other | 3 | 8 | 14 | 5 |
| Grade level | | | | |
| 9th grade | 7 | 18 | 75 | 26 |
| 10th grade | 18 | 46 | 117 | 41 |
| 11th grade | 8 | 21 | 63 | 22 |
| 12th grade | 6 | 15 | 32 | 11 |

Race $\chi^2 = .765$ (2), P = .68.
Grade level $\chi^2 = 1.946$ (3), P = .58.

### 2.2. Description of intervention

The intervention consisted of a modified training curriculum of *The Heart of Teaching and Learning: Compassion, Resiliency, and Academic Success* (HTL). Trainings of teaching staff took place during two half day professional development sessions in August 2012, with booster trainings occurring monthly over 2 hour periods at staff development meetings between October 2012 and May 2013. A full curriculum description is given in Day et al. (under review). In addition to training, the school implemented the Monarch Room (MR) intervention, an intervention designed to provide an alternative to traditional school discipline policies to increase the amount of seat time in class.

The MR is a school intervention informed by literature that states that student suspensions and expulsions can be counterproductive (Greenwood, 2001; Griffin, 2011), and therefore was designed as an alternative to traditional school discipline policies in efforts to increase the amount of time students are in the classroom and learning. The MR is available throughout the school day and is managed by staff trained in counseling and trauma interventions to provide positive, nurturing support to students while attending school. In the classroom, when a student's behavior escalates to the point of interfering with the learning of others, the student may self-refer herself or may be asked by the school staff to go to the MR. Once in the MR, various intervention strategies, including problem solving, talk therapy, and sensory–motor activities are employed to assist students in de-escalating and regulating their emotions so that they may return to the classroom. Staff documents each visit, the reason or trigger associated with the visit, and all intervention strategies used to help the student to de-escalate. This process of assisting the student generally occurs within a short period of time, approximately 10 min, and upon return to the classroom, the student can demonstrate perseverance and emotional control, helping to create a safe and orderly environment where all students are free to learn. Data from staff documentation of student visits is collected and reviewed weekly with the administration. This data will be included in an upcoming paper. For students with high frequencies of MR use, more in-depth strategies and underlying issues are explored to assist the student.

### 2.3. Procedures and data collection

The Institutional Review Board at Wayne State University approved the study. Informed consent/assent to participate in the focus groups was obtained during school registration. Six focus groups were conducted in partnership with researchers from a local university. The purpose of these focus groups was to understand the lived experiences of students who have been exposed to trauma and how that has impeded learning in the classroom. During each focus group, students were asked to respond to three open-ended questions: (1) Describe behaviors you see in yourself or others that are displayed in the classroom/on school grounds? (2) What kinds of experiences do you think the girls who have come to residential care have had that lead to these kids of behaviors? and (3) If you were principal for a day, what advice would you give to teachers to work with students like yourself? Students who preferred not to verbalize their comments during the focus group were offered blank paper and encouraged to share their responses with the researchers in writing. Information collected from the focus groups was used to inform curriculum developers, educational administrators, and researchers about ways to improve the educational environment. The students were encouraged to share their ideas about the types of interventions that could be developed within the school to assist teachers and other school personnel reduce the impact of trauma on their educational well-being.

Three focus groups were held in September 2012 and three focus groups were held in June 2013. The information collected from the first three focus groups was used to inform the development of a trauma informed training curriculum that was implemented during the same

academic year. The second set of focus groups, held in June 2013, was conducted to further explore the experiences of students and to gather additional student recommendations to refine the curriculum, which was an adapted version of the curriculum designed by Wolpow et al. (2009). Students were recruited to participate in these focus groups via a random selection process, and had the choice to decline participation at any time. Of the 45 students who were randomly selected, 39 participated, as 5 were absent from school on the day that focus groups were held and 1 student declined participation. Each focus group included between 6 and 8 students and deliberated for approximately 1 h. All focus groups were convened at the school building, and were facilitated by independent researchers.

The focus groups were audio-recorded and transcribed verbatim. Although not as common to phenomenological approach, literature supports the careful use of focus group data with phenomenology when subject matter, group interactional context, and group language is considered during the analysis of data (Palmer et al., 2010), which was accounted for in this study. Focus group methodology was selected because the data can uncover specific shared experiences, elicit new perspectives as group members confirm or deny each other's experiences, while also providing rich inter-group interpretation of data (Bradbury-Jones, Sambrook, & Irvine, 2009).

### 2.4. Data analysis

Transcripts from the focus groups were uploaded into NVIVO (Q. S. R. International, 2008) and content was analyzed for themes using constant comparison methods to look for commonalities, differences, and main ideas (Dye, Schatz, Rosenberg, & Coleman, 2000). Because In Vivo coding uses the direct language of the participants as codes rather than researcher-generated words and phrases (Saldaña, 2009), the analysis is grounded in the voices of the young people who participated in the focus groups.

Four researchers trained in qualitative methods coded the transcripts independently. Their codings were compared and thematic categories were developed through consensus. Interpretive disagreements were resolved by presenting supportive evidence and operational definitions for main themes. The results were reviewed by a subsample of six students who participated in the focus groups as a check on the validity and interpretation of the data.

## 3. Findings

There were 16 total behaviors identified by the students. Students also identified 23 likely causes for those behaviors and provided 20 recommendations for improving policies and practices in schools. Finally, students discussed 11 other themes related to general school culture. Table 2 identifies the seven most prevalent themes that emerged from the focus groups, along with their prevalence rates, as indicated by number and percentage of students who commented on each theme. These themes were commonly reported among both the focus groups held in September 2012 as well as those in June 2013, demonstrating similar experiences and needs being present during each time period. Findings from the September 2012 focus groups provided specific guidance for the building of the trauma-informed training intervention experienced by teachers and school staff.

### 3.1. Theme 1

Students identified that they have displayed or observed externalizing behaviors including anger emotions in the classroom/on school grounds. These emotions are described as frustration, irritability, stress, and pressure, and are common feelings that influence behavior and learning in the classroom. These findings are encapsulated in the following quotes:

"To me, I think a lot of girls here got a lot of stress so they don't know how to deal with it and they be angry, stress and stuff like that so they act out.""Like the kids, like they come to school mad and it like completely ruins your day cause they take their anger out on you.""You already got the anger and the frustration and the stress and the pressure that build up inside you…"

Overall, students reported having strong feelings about responding to peer and teacher interactions around these emotions and that these emotions impacted their ability and readiness to learn.

### 3.2. Theme 2

Students identified that they have displayed or observed aggressive actions in the classroom/on school grounds. These externalized behaviors include verbal fights, aggressive posturing, and demonstrating an inclination toward violence as a means to address interpersonal problems. This theme is reflected in the following quotes:

"It don't even depends on who the person is—it just that the one person say something out the way—you automatically get mad and you wanna just attack them.""I was the type of person, soon as they [my peers] say something, I just hop up and just run over there and hit you…""So the other day me and [student X] was into it and it was this girl… So I knocked [student X]'s stuff off her desk. She ain't do nothin' she just came in there and picked that stuff up back up and I knocked it off her desk again…"

### 3.3. Theme 3

The students reported that these externalizing behaviors are caused by their environmental influences outside the classroom. These influences included peers, relatives, and other community members who role modeled negative behaviors and an aversion to school or education. The following quotes provide evidence of this theme:

"…hanging out with the wrong people and they put and they made it seem like it was ok to drop out and find a job instead of going to college and getting a career so….they made it seem like it was ok to flip money, they made it seem like it was ok to sell drugs and stuff like that so yeah that's what changed…""Sometimes I didn't want to go to school either because my brothers didn't go to school, my sisters not be in school and they be having fun and they be calling me in school, and I'd be like, I'm a just leave then, come get me or something like that or come get me out or something just to go be with them.""When I left the house, everywhere I went….somebody was smoking and everyday and it was the same people so I just got hooked onto it."

Students also reported ways that environmental influences inside of the classroom impacted their behavior. The negative behavior of their peers heavily influenced their own behavior.

**Table 2**
Major themes (N = 39).

| Theme | N | % |
|---|---|---|
| Observed student behaviors | | |
| 1. Anger emotions | 15 | 38.5 |
| 2. Aggressive actions | 12 | 30.8 |
| Causes of student behaviors | | |
| 3. Environmental influences | 13 | 33.3 |
| 4. Triggers | 9 | 23.1 |
| Student suggestions | | |
| 5. Encourage respect of others | 12 | 30.8 |
| 6. Improve behavior management to enhance student engagement | 10 | 25.6 |
| Other | | |
| 7. Monarch room as support | 6 | 15.4 |

"They [students] think: she went home and she cussed them [teachers] out and she at home now. So she out and she still cussin em out, so hey, maybe we'll get out if we cuss the teacher out.""When other people have attitudes and it kind of combine with your attitude, cause you're in the classroom full of kids that got attitudes, so it's even worse because now you got other people's attitudes and you got an attitude. So it's like well I'm going to make my attitude, you know, more bigger than everybody else's and then you start acting out and everything."

### 3.4. Theme 4

Student externalizing behavior is caused by triggers. Triggers are often manifested by exposure to trauma and stress, and have the potential to elicit strong emotional and physical responses from students, and therefore, impact behavior in the classroom. Identified triggers included certain sights, sounds, words, physical touch, and other types of interactions. This theme was encapsulated in the following quotes:

"…some people, I know certain words are really triggers or when people touch them without them knowing about it… that's a big trigger.""Or scents. Anything that reminds you of the past."

Students reported that triggers can affect a student's ability to focus, complete work, and generally be productive in the classroom.

"…we were in social studies class one day and we were just listening to songs—was something to help us write a poem or something like that—and just listening to this one verse in this song just brung back everything and I just put my head down on my desk and just bawled my eyes out.""…reminds you of a really hard time and it's hard to like come back and be able to focus on everything else."

They report that triggers can also impact student interaction with teaching personnel and other students, creating stronger aggressive responses and incidences of confrontational behavior.

"One of my triggers-one [of] my most major triggers is my family, like I hate when people talk about my family. That's something I don't like. If you say something about my family, whether you playing or not, I'm gonna snap."

### 3.5. Theme 5

Students recommend that teaching personnel encourage respect for others. Feeling disrespected evokes negative responses in students that can lead to reciprocated, disrespectful behavior. Students desire to feel respected by both peers and teaching personnel, suggesting that the school environment uphold polices and standards that require respect for teachers, staff, and students alike. This theme was reflected in the following quotes:

"I would tell the staff and the teachers if they need help treat them like you would treat the other people…. treat them like how you would like to be treated if you was in they shoes or something….""so if it was me—just treat the kids with respect, help them when they need help, and basically that's it."

### 3.6. Theme 6

Students recommended that teaching personnel need to improve their management of student behavior in order to enhance engagement in student learning. This included the development of responsible student behavior, as arguing, consistent talking in class, and other negative behaviors inhibit students from learning and decrease the teacher's

ability to effectively work with students. Overall, students indicated a desire for a productive learning environment, with teachers who feel comfortable addressing difficult behaviors that may threaten this atmosphere. The following quotes exemplify this theme:

"I would definitely tell all the teachers like, if you see someone's having a problem in class don't just let it happen, you know, try to solve the issue right then and there. Don't keep stopping and "okay you guys need to stop talking", you know, pull them aside and let them know you can't keep doing this. You gotta do something about it. You can't just sit there in class and talk all day.""I think it's more of, you know just having that consistency because there's some kids that will try to bend the rules… I'm not saying all of them, but most will try, but then the teachers don't—some of the teachers don't know how to handle that… Or they don't want to handle it, or they just try to let them [the students] do their own thing so they can get through with class—""…when the girls are cussing out the teacher and not letting the teacher speak…the teacher needs to, like, boss up [defend themselves] and put them [the disruptive student] out of class…"

### 3.7. Theme 7

Students recognized and appreciated other trauma-informed resources that were present in the school. They saw the MR, a school trauma-informed setting for escalated students, as a support for them in the school setting. This theme was reflected in the following quote:

"….it's a room like if you're having troubles in class or you just need somewhere to calm down or someone to talk to, or you need somewhere you can use your coping skills you can go there. There's a staff who sits in there, Ms. X, and I talk to her frequently because she's—like I have a trust built up with her and—if you don't really know her that well you might not speak to her but you can just like go in there, you know, sit. Like remove yourself from the situation so you can think clearly without, you know, the people in your face or like feeling like you're crowded in."

The following student describes the MR as having a dual purpose for both students and teachers. When students are becoming too frustrated (for whatever reason) to remain in the classroom setting, they are either sent to the MR for redirection/de-escalation or they choose to go to the MR on their own.

"It's more like, if you're like upset in class you can ask your teacher to go. If you let—if you're doing something in class that you're not supposed to be doing, like cussing out the teacher or messing with somebody the teacher may ask you…"

## 4. Discussion

Themes identified through this analysis suggest that students understand their own sensitivity to how previous experiences have impacted the classroom and school environment, they are very aware of their behavior and that of their peers, and they have specific ideas about how to create solutions. They also identified many triggers from their prior experiences that they believe lead to intense emotional and behavioral reactions. These reactions are not typically observed among those who have not had complex trauma exposure. The description of their experiences also indicated a need for greater trauma-informed teaching practices at school. Schools can benefit directly from these students' thoughts and perceptions of their learning environment as they make decisions on what interventions to implement.

Common in youth trauma literature are the linkages to poor self-regulation and social skills, difficulty with impulse control, and

externalizing behaviors (Cook et al., 2005; Griffin, 2011; Office of Juvenile Justice and Delinquency Prevention State Training & Technical Assistance Center, 2013; Shonk & Cicchetti, 2001). Our findings may be used to support these assertions about traumatized youth, and may demonstrate that students are cognizant of displays of externalizing behaviors in the classroom. The students also clearly articulated how these behaviors have impacted their ability to learn. Furthermore, students offered connections between current behaviors and their previous exposure to traumatic events. They also described how they impede classroom performance. Such triggers included unwanted or unexpected touch, as well as references being made to students' relatives, but may also include other emotion-provoking occurrences, as triggers are unique to each youth.

Findings also demonstrate that students are highly aware of the role that external factors play in behavior in the academic environment. This is likely exacerbated when youth are exposed to negative influences, such as high rates of poverty, crime, substance use, or the presentation of other maladaptive behaviors (Lawrence & Hesse, 2010). From within the school, peer behavior can also play a pivotal role. The mood and behavior that classmates demonstrate can often perpetuate the negative behavior of other students. Students in this sample recognized the negative impact that peers can have on their educational well-being and they recommended practices that will deter this type of behavior.

More specifically, they suggested that order be maintained through stricter behavioral management practices, which may be due to their familiarity with these methods of practice from other traditional academic settings. Students reported that they want teachers to use power and control practices (i.e., remove disruptive students from class or school), creating a difficult dichotomy, as these methods are not effective long-term (Griffin, 2011). Further, when teachers use power and control techniques, students may rebel further, attempting to take back power and creating an academically harmful cycle. While the students' voices are important here, this theme also indicates that these youth have not been exposed to alternative methods of discipline.

Students identified that while grappling with various levels of trauma, they do not perceive their academic environments as being sensitive to their individual needs. Students encouraged teaching personnel to promote learning environments where mutually respectful relationships are present. For students who have experienced violence in their homes or community, the school setting may be their only safe haven, and the only avenue students have to interact with role models that can teach them how to develop positive interpersonal skills. Such skills can be gained from school implementation of trauma-informed intervention strategies, like the MR. The students' response to the MR was positive, and reflected their acknowledgment of the importance of emotional supports in school and the need for continued resources of this nature.

This student data was used to build the trauma-informed training intervention for school personnel. Examples of this include training modules that were informed by theme 4 ("triggers"), theme 5 ("encourage respect for others"), and theme 6 ("improve behavior management to enhance student engagement"). To address student reports of triggers influencing classroom behavior, training discussions were added that focused on defining student triggers (i.e., touch, raised voices, talking about family), giving knowledge on how to avoid potentially triggering behavior and comments, and guiding teaching personnel in appropriate responses after inadvertently triggering a student (i.e., apologizing, restating comment). Training sessions informed by student needs for universal classroom respect focused on teachers avoiding potentially humiliating, sarcastic, or otherwise offensive interactions with students, especially in front of other student peers. Based on student reports related to improving behavior management, training included discussion of student perceptions of common teacher responses and power dynamics in the classroom. The aforementioned power and control dichotomy was addressed, giving teaching personnel an understanding of the need for more creative behavioral management practices in order to avoid threatening or triggering students.

### 4.1. Implications for policy and practice

Schools can be a significant institution in the lives of court-involved youth, as they are generally a main gateway into mental health services for many students (Ko et al., 2008). However, this connection between schools and access to appropriate services may not be as strong in some cases and warrants further attention. Teachers and other school personnel can benefit from understanding trauma-related behavior from the perspective of students. Behavior, like the anger and aggression discussed in this study, can be assumed to be simple acts of defiance, impacting how teachers and staff view and subsequently interact with students. Teaching personnel should receive training on youth trauma as a part of their general professional development in order to maintain a classroom culture for understanding students rather than countering student externalizing behaviors.

Implementing new trauma-informed practices may also help to reduce the impact of triggers and environmental influences on student behavior in the classroom. School policies that promote attachment-driven behavioral interventions can be more useful than traditional punitive action (Moore et al., 1997). This suggests that these practices may also be more effective at addressing difficult trigger-responses and creating a classroom atmosphere with positive rather than negative influences on students. Traditional punitive responses to trauma behavior in the classroom, such as suspensions and expulsions, are generally counterproductive and should be avoided whenever possible (Griffin, 2011). Otherwise, students are at risk of "sanctuary trauma"—exacerbating their trauma experience (Wolpow et al., 2009)—as they manage exposure to triggers and other stimuli from the environment.

Another study by Penner and Wallin (2012) found a consensus between students and teachers regarding ways to improve student behavior. Both agreed that improvements in student behavior and school attachment were heavily influenced by positive relationships between students and teachers, development of caring class environments, and feelings of safety. These results are similar to our findings, in that students generally wanted to feel valued and respected by peers and teaching personnel, while also being safe from the distracting, and at times violent, behavior of their classmates. More specifically, trauma-informed practices in classrooms, similar to the aforementioned student recommendations, can offer much needed support to students, assisting them in participating in their education (Wong et al., 2007). Maintaining safety, supportive connections, and management of emotions are three main objectives of trauma-informed care (Bath, 2008), and are essential parts of creating an appropriate classroom environment for traumatized students. Utilizing student suggestions, developing school interventions similar to the MR, and creating structured school policy and teaching practice that enforces behavior management and respect for others can help to accomplish these three objectives.

### 4.2. Strengths and limitations of the study

The qualitative methodological approach is a true strength in that we were able to assess with greater depth what students are thinking and how they are processing trauma in the education setting. Another major strength of this study is the random selection of students for focus group participation. However, the small sample size is a limitation; all the students were representatives of one specific residential agency. Their experiences and opinions may not represent those of the larger population of foster care and delinquent youth in residential care settings. Further research may benefit from exploring the experiences of a larger population of court-involved youth. Additionally, the opinions expressed by the students in this study are specific to female youth. Young men may have different opinions and different needs than what was identified here. The sample was also predominantly African American and white. Future research should include students who identify as American Indian, Asian American, or Latino. Also, relevant demographic information was not able to be collected for each

student during the study, including prevalence of mental health issues among study participants, classification of students as dual wards, student-specific experiences of maltreatment, and out-of-home placement experiences.

## 5. Conclusion

The traumatic experiences that court-involved youth have encountered have a great impact on their academic trajectory. Gaining a deeper understanding of the experiences of these youth, as well as utilizing the voice of students from this population provides insight into more sensitive ways to address their educational well-being and ensure that steps can be taken to close the achievement gap between traumatized youth and their non-traumatized peers.

## References

Anda, R. F., Felitti, V. J., Bremner, J.D., Walker, J.D., Whitfield, C., Perry, B.D., et al. (2006). The enduring effects of abuse and related adverse experiences in childhood: A convergence of evidence from neurobiology and epidemiology. *European Archives of Psychiatry Clinical Neuroscience, 256*, 174–186, http://dx.doi.org/10.1007/s00406-005-0624-4.

Bath, H. (2008). The three pillars of trauma-informed care. *Reclaiming Children & Youth, 17*(3), 17–21 (Retrieved from http://reclaimingjournal.com/).

Black, P. J., Woodworth, M., Tremblay, M., & Carpenter, T. (2012). A review of trauma-informed treatment for adolescents. *Canadian Psychology, 53*(3), 192–203, http://dx.doi.org/10.1037/a0028441.

Bradbury-Jones, C., Sambrook, S., & Irvine, F. (2009). The phenomenological focus group: An oxymoron? *Journal of Advanced Nursing, 65*(3), 663–671, http://dx.doi.org/10.1111/j.1365-2648.2008.04922.x.

Bruce, E., & Waelde, L. C. (2008). Relationships of ethnicity, ethnic identity, and trauma symptoms to delinquency. *Journal of Loss and Trauma, 13*, 395–405, http://dx.doi.org/10.1080/15325020802171326.

Burley, M. (2010). *High school graduation and dropout trends for Washington State foster youth (2005–2009), no. 10-10-3901.* Olympia, WA: Washington State Institute for Public Policy.

Burley, M., & Halpern, M. (2001). *Educational attainment of foster youth: Achievement and graduation outcomes for children in state care.* Olympia, WA: Washington State Institute for Public Policy.

Casey Family Programs (2013). Endless dreams. Retrieved from. http://www.casey.org/resources/initiatives/EndlessDreams/

Checkoway, B., & Richards-Schuster, K. (2003). Youth participation in community evaluation research. *American Journal of Evaluation, 24*(21), 21–33, http://dx.doi.org/10.1177/109821400302400103.

Cook, A., Spinazzola, J., Ford, J., Lanktree, C., Blaustein, M., Cloitre, M., et al. (2005). Complex trauma in children and adolescents. *Psychiatric Annals, 35*(5), 390–398, http://dx.doi.org/10.1002/jclp.21990.

Courtney, M. E., Piliavin, I., Grogan-Kaylor, A., & Nesmith, A. (2001). Foster youth in transitions to adulthood: A longitudinal view of youth leaving care. *Child Welfare, 80*(6), 685–717 (Retrieved from http://www.cwla.org/pubs/periodicals.htm).

Courtney, M. E., Terao, S., & Bost, N. (2004). *Midwest evaluation of the adult functioning of former foster youth: Conditions of youth preparing to leave state care.* Chicago, IL: Chapin Hall Center for Children at the University of Chicago.

Coyne, M.D., Carnine, D. W., & Kame'enui, E. J. (2010). *Effective teaching strategies that accommodate diverse learners* (4th ed.). New Jersey: Pearson Publishing.

Day, D.M., Hart, T. A., Wanklyn, S. G., McCay, E., Macpherson, A., & Burnier, N. (2013). Potential mediators between child abuse and both violence and victimization in juvenile offenders. *Psychological Services, 10*(1), 1–11, http://dx.doi.org/10.1037/a0028057.

Day, A., Somers, C., Baroni, B., West, S., Sanders, L., & Peterson, C. (2014). Evaluation of a trauma-informed teaching intervention on the educational well-being of youth placed in residential care. *Psychological Trauma Theory, Research, Practice* (under review).

Delaney-Black, V., Covington, C., Ondersma, S. J., Nordstrom-Klee, B., Templin, T., Ager, J., et al. (2002). Violence exposure, trauma, and IQ and/or reading deficits among urban children. *Archives of Pediatrics and Adolescent Medicine, 156*, 280–285, http://dx.doi.org/10.1001/archpedi.156.3.280.

Duke, N. N., Pettingell, S. L., McMorris, B. J., & Borowsky, I. W. (2010). Adolescent violence perpetration: Associations with multiple types of adverse childhood experiences. *Pediatrics, 125*, 778–786, http://dx.doi.org/10.1542/peds.2009-0597.

Dye, J. F., Schatz, I. M., Rosenberg, B.A., & Coleman, S. T. (2000). Constant comparison method: A kaleidoscope of data. *The Qualitative Report, 4*(1/2) (Retrieved from www.nova.edu/sss/Q4-QR4-1/dye.html).

Greenwood (2001). *Issues in education: Views from the other side of the room.* USA: Information Age Publishing.

Griffin, G. (2011). Public systems: Responding to students affected by trauma [PDF document]. *Retrieved from lecture notes: Child and Family Policy Forum.* : University of Chicago (Retrieved from http://www.chapinhall.org/events/policy/child-family-policy-forum).

Griffin, G., McClelland, G., Holzberg, M., Stolbach, B., Maj, N., & Kisiel, C. (2011). Addressing the impact of trauma before diagnosing mental illness in child welfare. *Child Welfare, 90*(6), 69–89 (Retrieved from http://www.cwla.org/pubs/periodicals.htm).

Grogger, J. (1997). Local violence and educational attainment. *Journal of Human Resources, 32*(4), 659–682 (Retrieved from http://uwpress.wisc.edu/journals/jhr.html).

Head, B. W. (2011). Why not ask them? Mapping and promoting youth participation. *Children and Youth Services Review, 33*, 541–547, http://dx.doi.org/10.1016/j.childyouth.2010.05.015.

Hummer, V. L., Dollard, N., Robst, J., & Armstrong, M. I. (2010). Innovations in implementation of trauma-informed care practices in youth residential treatment: A curriculum for organizational change. *Child Welfare, 89*(2), 79–95 (Retrieved from http://www.cwla.org/pubs/periodicals.htm).

Hurt, H., Malmud, E., Brodsky, N. L., & Giannetta, J. (2001). Exposure to violence: Psychological and academic correlates in child witnesses. *Archives of Pediatrics and Adolescent Medicine, 155*(1), 1351–1356, http://dx.doi.org/10.1001/archpedi.155.12.1351.

Ko, S. J., Ford, J.D., Kassam-Adams, N., Berkowitz, S. J., Wilson, C., Wong, M., et al. (2008). Creating trauma-informed systems: Child welfare, education, first responders, health care, juvenile justice. *Professional Psychology Research and Practice, 39*(4), 396–404, http://dx.doi.org/10.1037/0735-7028.39.4.396.

Lawrence, R., & Hesse, M. (2010). *Juvenile justice: The essentials.* Los Angeles: Sage Publications, Inc.

Macomber, J. (2009). *Intentions and results: A look back at the Adoption and Safe Families Act.* Washington D.C.: Urban Institute.

Massachusetts Advocates for Children (2005). *Helping traumatized children learn.* Boston: Author.

Moore, K., Marlene, M., & Holland, R. (1997). A new perspective on youth care programs: Using attachment theory to guide interventions for troubled youth. *Residential Treatment For Children & Youth, 15*(3), 1–24, http://dx.doi.org/10.1300/J007v15n03_01.

Nation, T. (2003). Creating a culture of peaceful school communities. *International Journal for the Advancement of Counseling, 25*(4), 309–315, http://dx.doi.org/10.1023/B:ADCO.0000005530.72520.40.

National Child Traumatic Stress Network Core Curriculum on Childhood Trauma Task Force (2012). *The 12 core concepts: Concepts for understanding traumatic stress responses in children and families.* (Los Angeles, CA, and Durham, NC. Retrieved from http://www.nctsn.org/resources/audiences/parents-caregivers/what-is-cts/12-core-concepts).

Office of Juvenile Justice and Delinquency Prevention (2010). Youth characteristics and backgrounds: Findings from the survey of youth in residential placement. [Data file]. Retrieved from. https://www.ncjrs.gov/pdffiles1/ojjdp/227730.pdf

Office of Juvenile Justice and Delinquency Prevention (2013). Statistical briefing book. [Data file]. Retrieved from. http://www.ojjdp.gov/ojstatbb/court/qa06201.asp?qaDate=2010

Office of Juvenile Justice and Delinquency Prevention State Training and Technical Assistance Center (2013). Transforming school climate through trauma informed practices [PDF document]. Retrieved from lecture notes: Supportive School Discipline Webinar Series. Retrieved from. http://www.juvenilejustice-tta.org/event/trauma-informed-school-practices

Palmer, M., Larkin, M., de Visser, R., & Fadden, G. (2010). Developing an interpretative phenomenological approach to focus group data. *Qualitative Research in Psychology, 7*(2), 99–121, http://dx.doi.org/10.1080/14780880802513194.

Pecora, P. J., Kessler, R. C., Williams, J., O'Brien, K., Downs, A.C., English, D., et al. (2005). *Improving family foster care: Findings from the Northwest Foster Care Alumni Study.* Seattle, WA: Casey Family Programs.

Penner, C., & Wallin, D. (2012). School attachment theory and restitution processes: Promoting positive behaviors in middle years schools. *Canadian Journal of Educational Administration and Policy, 137*, 1–36 (Retrieved from http://www.umanitoba.ca/publications/cjeap/).

Programs, Casey Family (2005). *Improving family foster care: Findings from the Northwest Foster Care Alumni Study.* Seattle, WA: Author.

Pynoos, Robert S. (1993). Traumatic stress and developmental psychopathology in children and adolescents. In J. M. Oldham, M. B. Riba, & A. Tasman (Eds.), *American psychiatric press review of psychiatry, Vol. 12,* . Washington D.C.: American Psychiatric Press.

Q. S. R. International (2008). NVivo 9: Home. Retrieved from. http://www.qsrinternational.com/products_nvivo.aspx

Richardson, M. M., Coryn, C. L. S., Henry, J., Black-Pond, C., & Unrau, Y. (2012). Development and evaluation of the trauma-informed system change instrument: Factorial validity and implications for use. *Child and Adolescent Social Work Journal, 29*(3), 167–184, http://dx.doi.org/10.1007/s10560-012-0259-z.

Saldaña, J. (2009). *The coding manual for qualitative researchers.* Los Angeles: Sage Publications, Inc.

Shin, H., & Poertner, J. (2002). *The well-being of older youth in out-of-home care who are headed to independence.* Urbana, IL: Children and Family Research Center, University of Illinois Champain-Urbana, School of Social Work.

Shonk, S. M., & Cicchetti, D. (2001). Maltreatment, competency deficits, and risk for academic and behavioral maladjustment. *Developmental Psychology*, *37*(1), 3–17, http://dx.doi.org/10.1037/0012-1649.37.1.3.

Sickmund, M., Sladky, T. J., Kang, W., & Puzzanchera, C. (2011). Easy access to the census of juveniles in residential placement. Online. Retrieved from. http://www.ojjdp.gov/ojstatbb/ezacjrp/

Smith, J. A. (2004). Reflecting on the development of interpretative phenomenological analysis and its contribution to qualitative research in psychology. *Qualitative Research in Psychology*, *1*, 39–54, http://dx.doi.org/10.1191/1478088704qp004oa.

Smithgall, C., Gladden, R. M., Howard, E., Goerge, R., & Courtney, M. (2004). *Educational experiences of children in out-of-home care.* Chicago, IL: Chapin Hall Center for Children at the University of Chicago.

Substance Abuse and Mental Health Services Administration (2012). SAMHSA trauma definition. Retrieved from. http://www.samhsa.gov/traumajustice/traumadefinition/index.aspx

U.S. Department of Health and Human Services, Administration for Children and Families (2012). Adoption and foster care analysis and reporting system report. Retrieved from. http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport19.pdf

U.S. Department of Health and Human Services, Administration for Children and Families (2012). Child welfare outcomes report. Retrieved from. http://cwoutcomes.acf.hhs.gov/data/downloads/pdfs/michigan.pdf

U.S. Government Accountability Office (2004). HHS actions could improve coordination of services and monitoring of states' independent living programs, GAO-05-25. Retrieved July 3, 2013, from. http://www.gao.gov/assets/250/244829.pdf

Wolpow, R., Johnson, M. M., Hertel, R., & Kincaid, S. O. (2009). *The heart of learning and teaching: Compassion, resiliency, and academic success.* : Washington State Office of Superintendent of Public Instruction (OSPI) Compassionate Schools.

Wong, M., Rosemond, M. E., Stein, B.D., Langley, A. K., Kataoka, S. H., & Nadeem, E. (2007). School-based intervention for adolescents exposed to violence. *The Prevention Researcher*, *14*(1), 17–20 (Retrieved from http://www.tpronline.org/).

Zimmerman, M.A. (2000). Empowerment theory: Psychological, organizational and community levels of analysis. In J. Rappaport, & E. Seidman (Eds.), *Handbook of community psychology* (pp. 43–63). New York, NY: Plenum Press.