

**EVALUATING TRAUMA-INFORMED EDUCATIONAL PRACTICES WITH
TRAUMA-EXPOSED, FEMALE STUDENTS**

by

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DEDICATION

“I sustain myself with the love of family.”

– Maya Angelou

I dedicate this dissertation to my rock and amazing partner in love and life, my husband,

Justin Crosby

To my very first hero, my mom,

Bernistine Eubanks

AND

To my inspiration, my brother,

Dennis West, Jr.

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CHAPTER 1 INTRODUCTION

Background

Each year, millions of youth are raised in poverty in the U.S., with higher percentages of these youth being from racial/ethnic minority groups (Annie E. Casey Foundation, 2014). Court-involved youth, those who have encountered the court system through the foster care and/or juvenile justice systems, are also high in number. The U.S. foster care system encountered 397,122 youth in 2012 (U.S. Department of Health and Human Services, 2013a), and the juvenile justice system experienced 1.3 million delinquency arrests in 2012 (Office of Juvenile Justice and Delinquency Prevention, 2014). Commonalities among the experiences of these two populations put youth in one system at high risk for crossover into the other system (Herz, Lee, Lutz, Stewart, Tuell, Wiig, 2012).

In 2012, almost half (48%) of youth in foster care were female (U.S. Department of Health and Human Services, 2013a) and roughly 29% of juvenile arrests were of female youth (Office of Juvenile Justice and Delinquency Prevention, 2014). Pathways to court-involvement for female youth is often distinctly different from the experiences that bring male youth into the foster care and juvenile justice systems. Female youth more commonly experience sexual victimization (Sedlak et al., 2010) as a precursor to foster care involvement (Baynes-Dunning & Worthington, 2013). In the juvenile justice system, female involvement is often in relation to probation violations or status offenses (e.g., incorrigibility, curfew violations) rather than violence or serious criminal behavior (Bloom & Covington, 2001; Pasko, 2010; Thibodeau, 2002; Watson & Edelman, 2012). The unique experiences and pathways to court-involvement among female youth warrant specific attention, as a gender-blind approach may prove ineffective at meeting their

particular needs and improving outcomes for court-involved girls (Chesney-Lind & Shelden, 2013; Hoyt & Scherer, 1998).

Among the court-involved population, racial/ethnic minority youth are often overrepresented (Brandt, 2006; Lawrence & Hesse, 2010; U.S. Department of Health and Human Services, 2013b). Native American, African American, and Hispanic/Latino youth are more likely to enter the foster care system than white youth (U.S. Department of Health and Human Services, 2013b). Various literature has also indicated that youth of color have a disproportionate presence at all levels of the juvenile justice system (Brandt, 2006; Lawrence & Hesse, 2010). In particular, African American and Hispanic/Latino youth are several times more likely to be incarcerated than their white counterparts (Sickmund, Sladky, Kang, & Puzzanchera, 2013) due to multiple ecological factors that place these youth at a higher likelihood of court-involvement (Bellair & McNulty, 2005; McNulty & Bellair, 2003).

Childhood Trauma

Childhood trauma plays a big role in the functioning and developmental trajectory of youth raised in poverty, in foster care, or the juvenile justice system. Trauma, an emotionally detrimental experience with enduring negative effects on individual well-being (SAMHSA, 2012), may be acute or chronic. Complex trauma, long-lasting experiences associated with chronic trauma (Wolpow, Johnson, Hertel, & Kincaid, 2009), may be even more developmentally damaging to youth, and may include exposure to various types of events, including abuse, neglect, community or domestic violence, natural disasters, and terrorism or other violence (Griffin, 2011). These experiences can impact the well-being of youth, creating problems with various aspects of their development and socio-emotional functioning (Cook et al., 2005).

Stressful and traumatic childhood events are somewhat prevalent among the general population (Costello, Erkanli, Fairbank, & Angold, 2002), with over 25% of children experiencing some form of abuse or violence in their home (Duke, Pettingell, McMorris, & Borowsky, 2010). This may be even more common among those living in poverty, as the daily life stressors associated with poverty can produce psychologically traumatizing conditions (American Psychological Association Presidential Task Force on Posttraumatic Stress Disorder and Trauma in Children and Adolescents, 2008). Foster care youth also often exhibit higher levels of psychological trauma, as evidenced by higher incidence of Post-Traumatic Stress Disorder (PTSD) (Salazar, Keller, Gowen, & Courtney, 2012), with rates among this population being 20% higher than their non-foster care peers (Greeson et al., 2011). Youth in the juvenile justice system have also experienced high levels of trauma (Ryan, Bashant, & Brooks, 2006; Wasserman & McReynolds, 2011), with as many as 90% of youth in correctional facilities reporting previous trauma experiences (Abram et al., 2004; Ford, Hartman, Hawke, & Chapman, 2008; Ford, Chapman, Conner, & Cruise, 2012).

Childhood trauma affects not only youth development and functioning, but also their subsequent life experiences and outcomes. Overall, youth who have experienced trauma are at greater risk of developing negative methods of coping, such as withdrawing from others, running away from home, or other risky behaviors (Ethier, Lemelin, & Lacharite, 2004). In fact, they have a higher likelihood of performing self-harming behaviors and becoming susceptible to dating violence (Duke et al., 2010), developing substance abuse issues, mental illness, physical health impairments, and contracting sexually transmitted diseases (Griffin, 2011). They are also more likely to experience early parenting and dysfunction in their interpersonal relationships (Lawrence & Hesse, 2010). Further, youth who experience abuse are more likely to become involved in

delinquent behavior and violence perpetration (Bruce & Waelde, 2008), exhibit delinquent behavior earlier in life, and are at greater risk of displaying criminal behavior into adulthood (Day, Hart, Wanklyn, McCay, Macpherson, & Burnier, 2013).

Furthermore, youth educational attainment is compromised by childhood trauma. Youth with traumatic histories may struggle with meeting the academic demands of the classroom, including organization, comprehension, memorization, being attentive, and demonstrating appropriate classroom behavior (Cole, O'Brien, Gadd, Ristuccia, Wallace, & Gregory, 2005). However, these impairments can sometimes be misunderstood by school staff, leading them to draw incorrect conclusions about the nature of student behavior (Cook et al., 2005; Griffin et al., 2011; Cole, O'Brien, Gadd, Ristuccia, Wallace, & Gregory, 2005; Oehlberg, 2008; Richardson et al., 2012). This makes traumatized students vulnerable to school failure and lower academic achievement (Burley & Halpern, 2001; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Courtney, Terao & Bost, 2004; Pecora et al., 2005).

Self-esteem, one's attitude toward one's self (Rosenberg, Schooler, Schoenbach, Rosenberg, 1995), can also be compromised for court-involved youth. Attachment issues, feelings of exclusion (Luke & Coyne, 2008), and the stigma that is often related to being court-involved (Kools, 1997) can negatively impact self-esteem, especially for youth who have experienced multiple home placements (Luke & Coyne, 2008; Unrau, Seita, & Putney, 2008). High youth self-esteem has been associated with better overall psychological well-being, as well as lower incidences of depression, anxiety, and negative affect. On the other hand, low self-esteem can have the opposite effect (Rosenberg, Schooler, Schoenbach, Rosenberg, 1995), including an increased likelihood of externalizing behaviors and other delinquent conduct (Donnellan, Trzesniewski, Robins, Moffitt, & Caspi, 2005). These externalizing behaviors contribute to

barriers in the school setting, impacting students' school attendance, school mobility, and academic failure (Emerson & Lovitt, 2003).

School Discipline

In addition to problems with externalizing behaviors and socio-emotional issues that traumatized students face in school, their academic success is further impeded by school disciplinary policies and practices that hinder their learning. Millions of students are suspended across the country over the course of a school year (Planty et al., 2009), and court-involved youth experience a disproportionate amount of these school suspensions and expulsions (Burley, 2010; Courtney et al., 2004). This disciplinary practice has several negative implications for students. For example, school suspensions negatively impact student academic achievement by decreasing the amount of instructional time that students received, as well as their completion of assignments (Borman et al. 2003; Greenwood, Horton, & Utley, 2002; Hattie, 2002). Suspension practices also impede students from forming positive attachments to school (Christle et al., 2004; Gordon et al., 2001), and can exacerbate other psychosocial problems in functioning (American Psychological Association, 2008; Cameron & Sheppard, 2006; Hattie, 2002). Exclusionary forms of school discipline have not been found to be effective in deterring students from misbehaving (Fenning & Bohanan, 2006; Mayer, 1995; Sugai & Horner, 2002). Data from the U.S. Department of Education, Office for Civil Rights (2014) have shown that school suspension particularly impacts female youth of color, yet this student population often goes relatively unnoticed (Crenshaw, Ocen, & Nanda, 2015).

Trauma-Informed Schools

Given the impact of trauma on educational well-being, trauma-informed education could prove very useful to improving students' academic success. The Substance Abuse and Mental

Health Services Administration (SAMHSA), along with the National Center for Trauma-Informed Care (NCTIC), define a trauma-informed approach as incorporating four key elements: realizing the prevalence and influence of trauma; recognizing how trauma affects all individuals involved in the system; responding with trauma-sensitive practices and policies; and actively working against re-traumatization (SAMHSA NCTIC, 2013). Creating this type of educational environment requires the empowerment of students (Coyne, Carnine, & Kame'enui, 2010; Hummer, Dollard, Robst, & Armstrong, 2010; Nation, et al., 2003), which includes their perspectives on the challenges they face as well as possible solutions (Checkoway & Richards-Schuster, 2003). Acknowledging youth voice in this way encourages positive development, and provides students with a sense of value (Head, 2011), and confidence (Checkoway & Richards-Schuster, 2003).

Teachers and other school personnel also play a major role, as they have a front row seat to the trauma-related behavioral, academic, and socio-emotional issues that court-involved students encounter. However, school staff do not commonly receive content on trauma in their education training programs, impeding them from fully understanding its impact on youth and ways to address it during instructional time (Ko et al., 2008). Multiple frameworks now exist that provide guiding principles for implementing trauma-informed practices in schools, including the *C.A.P.P.D.* (Calm, Attuned, Present, Predictable, and Don't let children's emotions escalate your own) model (Perry, 2009), *Making SPACE for Learning* (Australian Childhood Foundation, 2010), *The Flexible Framework* (Cole et al., 2005), and *Compassionate Teaching* (Wolpow et al., 2009). However, empirical evidence does not exist to explicitly address the effectiveness of trauma-informed teaching. Therefore, testing is still needed to ensure that such practices actually improve educational well-being and student outcomes.

Purpose

The aim of this three-part study is to explore the academic experiences of traumatized, and primarily court-involved youth, as well as to examine associations between a trauma-informed teaching intervention and the educational well-being of these students. Findings from this dissertation project are a part of an on-going evaluation study of trauma-informed educational practices with court-involved students, and are presented here using a three-paper format. This allows for multiple types of separate, but interrelated data to be presented in one manuscript as three separately publishable articles. Dissertation chapters two, three, and four serve as three individual and distinct, journal-ready research articles for three related studies on the educational well-being of traumatized students. Each chapter has its own background, methodologies, findings, and discussion, and thus some literature and methodological descriptions may be reiterated throughout the chapters, where necessary. Chapter five will provide implications for future study and overall conclusions from this research.

Chapter two will focus on qualitative findings, exploring the experience and perceptions of traumatized students, both court-involved and non-court-involved. Student perspectives are imperative to the effective implementation of new strategies to improve school climate (Coyne et al., 2010; Hummer, Dollard, Robst, & Armstrong, 2010; Nation, et al., 2003). However, student voice is not frequently included in the literature. This study qualitatively explores the following research questions: (1) How do court-involved youth emotionally experience their educational setting? (2) How do court-involved students feel that their school climate can be improved? (3) Do trauma-exposed students in a trauma-informed school setting describe their education environment differently than trauma-exposed, alternative education students from similar racial/ethnic, socio-demographic, and geographic backgrounds?

Chapter three will provide findings from a multi-year evaluation of a trauma-informed teaching intervention for school staff working with students who have experienced trauma. Previous psychological trauma can impair student academic performance, making it difficult for students to be successful (Cole, O'Brien, Gadd, Ristuccia, Wallace, & Gregory, 2005; West, Day, Somers, & Baroni, 2014; Wolpow, Johnson, Hertel, & Kincaid, 2009). This chapter will add to the literature, providing knowledge of how a trauma-informed teaching intervention may be associated with student trauma and self-esteem. This study will address the following research questions: (1) Do students exposed to a trauma-informed teaching intervention demonstrate significant changes in trauma symptomology? (2) Do students exposed to a trauma-informed teaching intervention demonstrate significant changes in self-esteem? (3) Can changes in trauma symptoms be predicted by students' self-esteem, when controlling for race/ethnicity and grade level? I hypothesize that students will demonstrate statistically significant decreases in trauma symptomology and increases in self-esteem. I also anticipate that students' self-esteem level will be a statistically significant predictor of change in students' trauma symptoms.

Chapter four will explore school alternative discipline practices among a population of exclusively court-involved youth, as traditional discipline (e.g., suspensions, expulsions) can have negative influences on student success (Borman et al. 2003; Greenwood, Horton, & Utley, 2002; Hattie, 2002). This chapter will present mixed method findings that assess the use of the Monarch Room (MR), a trauma-informed alternative to school suspension/expulsion practices. The MR disciplinary intervention is a designated classroom, staffed by trauma-trained professionals, which students can visit for a brief period of time when they become triggered or escalated in class. The goal of the intervention is to reduce student suspension, thereby increasing students' time in class. The study will address the following quantitative question: (1) Have students demonstrated

statistically significant changes in time spent in the MR over the school year-long observation period? The qualitative research aim will further investigate the influence of the MR by asking students for their thoughts on the MR, how it impacts their mood and focus in school, and their suggestions for improvement. I hypothesize that time spent in the MR will significantly decrease over the one year observation period. These findings have the potential for adding practical, trauma-sensitive solutions for managing difficult student behavior in ways that will not compromise valuable instruction time and classroom participation.

Research has yet to evaluate the impact of trauma-informed educational practices, especially among court-involved student populations. Additionally, the voice and experiences of these students is rarely included in the literature. Studies should conduct further testing of specific school interventions to determine effective trauma-informed methods of educating traumatized and court-involved youth. Critical to this evaluation is understanding the impact of the intervention from the perspective of the students themselves. This study seeks to fill these gaps, exploring student perceptions and providing empirical support for the use of trauma-informed training and practices in school settings that serve traumatized students. It has important implications for the use of trauma-informed policy and practices to improve the educational well-being of this traditionally academically disadvantaged population. Schools and other educational settings can apply this knowledge to inform the development of their own trauma-informed staff training, implement new teaching personnel practices in the classroom, as well as develop new policies and practices related to suspension, expulsion, and alternative disciplinary actions for students.

CHAPTER 2 EXPLORING THE BENEFITS OF A TRAUMA-INFORMED SCHOOL CLIMATE THROUGH THE VOICES OF FEMALE YOUTH

Background

Each year thousands of youth become involved with the U.S. court system, either through foster care, juvenile justice, or as dually-involved youth. Over 397,000 youth had interaction with the U.S. foster care system in 2012 (U.S. Department of Health and Human Services, 2013a). Of these cases, approximately 48% were of female. In 2012, the U.S. juvenile justice system encountered 1.3 million delinquency arrests, with approximately 29% being arrests of female youth (Office of Juvenile Justice and Delinquency Prevention, 2014). Youth who are dually-involved have interacted with both the foster care and juvenile justice systems (Herz, Lee, Lutz, Stewart, Tuell, Wiig, 2012).

Among youth in these various categories, racial/ethnic minority youth experience consistent disproportionality (Brandt, 2006; Lawrence & Hesse, 2010; U.S. Department of Health and Human Services, 2013b). Based on data from the U.S. Department of Health and Human Services (2013b), Native American, African American, and Hispanic/Latino youth are commonly overrepresented in the foster care system. In the juvenile justice system, youth of color have a disproportionate presence at all levels (Brandt, 2006; Lawrence & Hesse, 2010). Specifically, African American, Native American, and Hispanic/Latino youth are more than twice as likely to be incarcerated as white youth (Sickmund, Sladky, Kang, & Puzzanchera, 2013). Various ecological factors, including systemic oppression, contribute to this overrepresentation (Bellair & McNulty, 2005; McNulty & Bellair, 2003), as well as the violence experienced within many communities of color (Anderson, 1994). For these youth, child maltreatment and psychological trauma are usually common factors (Greeson et al., 2011; Salazar, Keller, Gowen, & Courtney, 2012).

Psychological trauma is the result of physical or emotional experiences that are injurious to an individual's socio-emotional, physical, or overall welfare (SAMHSA, 2012). These experiences, whether acute or chronic, can significantly impact development when experienced in childhood, and can be tremendously detrimental to youth well-being. Complex trauma occurs when traumatic encounters are consistent over a prolonged period of time, producing a serious negative impact on functioning (Wolpow, Johnson, Hertel, & Kincaid, 2009). This type of trauma has been associated with impairments in youth's behavioral, academic, social, mental, and emotional health (Cook et al., 2005), as well as negative long-term influences on physical health (Anda et al., 2006).

Court-involved youth are highly susceptible to complex trauma and traumatic stress. Foster care youth exhibit higher levels of psychological trauma than youth in the general population (Greeson et al., 2011). Post-Traumatic Stress Disorder (PTSD) is also experienced with greater frequency among this population when compared to non-foster youth (Salazar, Keller, Gowen, & Courtney, 2012), to the degree that PTSD rates are over 20% higher for foster care alumni than for the general population. Even more alarming, this population experiences PTSD at higher rates than war veterans (Pecora et al., 2005).

Many juvenile delinquent youth have also experienced trauma (Wasserman & McReynolds, 2011) and complex trauma (Ryan, Bashant, & Brooks, 2006). Approximately 90% of youth in juvenile justice residential facilities report exposure to trauma (Abram et al., 2004; Ford, Hartman, Hawke, & Chapman, 2008; Ford, Chapman, Conner, & Cruise, 2012). For non-court-involved youth from racial/ethnic minority backgrounds and impoverished communities, experiences of trauma can also be prevalent (Lawrence & Hesse, 2010). In general, African American youth are more than twice as likely as white youth to be raised in poverty-stricken areas,

increasing their overall exposure to crime, community violence, stress, and trauma (Brandt, 2006; Lawrence & Hesse, 2010). Youth dealing with poverty not only have a strong likelihood of experiencing traumatic events, but also have more difficulty recovering from such events and regaining healthy functioning (American Psychological Association Presidential Task Force on Posttraumatic Stress Disorder and Trauma in Children and Adolescents, 2008).

Impact of Trauma on Educational Well-Being

When compared to peers, maltreated youth often demonstrate diminished social skills, increased internalizing and externalizing behaviors, and are less engaged in school (Shonk & Cicchetti, 2001). Traumatized youth, such as those with court-involvement, are also placed in special education programs with more frequency (Macomber, 2009; Shin & Poertner, 2002; Smithgall, Gladden, Howard, Goerge, & Courtney, 2004), have lower scores on academic achievement tests (Burley & Halpern, 2001; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Courtney, Terao & Bost, 2004; Pecora et al., 2005), as well as lower grade point averages (Hurt, Malmud, Brodsky, & Giannetta, 2001) and graduation rates (Grogger, 1997). Exposure to violence has also been associated with lower IQ (Delaney-Black et al., 2002). Furthermore, court-involved youth are disciplined and suspended or expelled with greater frequency (Burley, 2010; Courtney et al., 2004).

Other areas of youth academic functioning can be compromised by psychological trauma, such as self-esteem and attachment (Luke & Coyne, 2008), and cognition, behavior, and affect (Cook et al., 2005). School performance can also be impeded by traumatic stress, as students may struggle with a decreased capacity for organization, comprehension, self-regulation of behavior, and memorization (Cole, O'Brien, Gadd, Ristuccia, Wallace, & Gregory, 2005). Additionally, trauma can impair youths' abilities to maintain appropriate boundaries and to be attentive when

needed (Cook et al., 2005). Further, trauma can also hinder brain development (Anda et al., 2006; Black, Woodworth, Tremblay, & Carpenter, 2012). In class, traumatized students may struggle with environmental triggers, sights, sounds, odors, or other traumatic reminders, which unknowingly cause them to behave disruptively (National Child Traumatic Stress Network Core Curriculum on Childhood Trauma Task Force, 2012; Pynoos, 1993). Subsequently, school staff may incorrectly attribute these behaviors and trauma responses to student apathy (Cox, 2011), defiance (Oehlberg, 2008), or other mental health issues (Cook et al., 2005; Griffin et al., 2011; Cole, O'Brien, Gadd, Ristuccia, Wallace, & Gregory, 2005; Richardson et al., 2012).

Gender Differences

There are gender-specific differences in how females become court-involved, as well as how they respond to traumatic experiences. Female youth usually enter the juvenile justice system due to non-violent status offenses, such as school truancy, violating their curfew, or incorrigibility (Bloom & Covington, 2001; Pasko, 2010; Thibodeau, 2002; Watson & Edelman, 2012), unlike their male counterparts who generally commit more serious criminal offenses. For females, pathways to foster care entry frequently include sexual victimization, which is less commonly experienced among male youth (Baynes-Dunning & Worthington, 2013; Sedlak et al., 2010). Male and female traumatized youth both generally exhibit reactions to trauma in externalized behaviors, such as anger and defiance (Foster, Kuperminc, & Price, 2004). However, female youth demonstrate trauma reactions that are unique from males (Postlethwait, Barth, & Guo, 2010), including more frequent occurrences of internalizing behaviors as well as higher prevalence of mental health issues, such as depression, anxiety, and PTSD (Foster et al., 2004; Grande, Hallman, Underwood, Warren, Reh fuss, 2012; McCabe, Lansing, Garland, & Hough, 2002; Postlethwait et al., 2010; Teplin et al., 2002), which can ultimately impact functioning in school. Such differences

illustrate the importance of understanding the needs of traumatized, female students, particularly from racial/ethnic minority backgrounds. The U.S. Department of Education, Office for Civil Rights (2014) reported that while males receive more school suspensions in general, female youth of color receive a disproportionate amount of school suspensions. Still, studies and interventions to target educational well-being among this student population are lacking (Crenshaw, Ocen, & Nanda, 2015).

School Response

Systematic trauma assessment of students, trauma training for school staff (Ko et al., 2008) and services specific to the needs of court-involved youth (Zetlin, MacLeod, Kimm, 2012) are generally rare in schools, and few trauma-informed interventions exist that are specific to academic settings. However, schools play a major role in the well-being of youth, as they are most commonly a point of access to mental health services (Farmer, Burns, Phillips, Angold, & Costello, 2003; Ko et al., 2008). Further, the academic experiences of both court-involved youth and the school staff charged with educating them suggest that greater attention be given to trauma-informed practices in schools (Crosby, Day, Baroni, Somers, 2015; West, Day, Somers, & Baroni, 2014). Literature supports the maintenance of strong student-staff relationships in schools (Coyne et al., 2010; Penner & Wallin, 2012; Price, 2008) and creating trauma-sensitive academic environments can improve student performance and behavior, school climate, student seat-time and retention, and teacher satisfaction (Oehlberg, 2008). It can also reduce student and staff stress, student suspensions/ expulsions, as well as the need for special education services.

Theoretical Framework

This study utilizes empowerment theory to explore the perceptions of traumatized, female students related to their school environment. This means including youth as participants in a

collaborative process (Zimmerman, 2000) whereby they are allowed to identify existing challenges and problems, as well as point to potential solutions (Checkoway & Richards-Schuster, 2003). Promoting student empowerment in this way can exhibit the worth and value of students through acknowledgement of their rights, and promotes individual and social development (Head, 2011). It also increases youth confidence, capacity for decision-making, while also providing a positive connection for youth (Checkoway & Richards-Schuster, 2003).

Hummer, Dollard, Robst, & Armstrong (2010) suggests that schools acknowledge students and school staff as equal stakeholders when building a trauma-informed school culture and creating interventions to assist traumatized students. Head (2011) expresses the importance of utilizing input from consumers when attempting to make improvements to service. In the case of education, this would include providing opportunities for students to voice their perspectives on school experiences, climate, practices, and policies. Efforts to improve school climate must include strategies that empower the students being served (Coyne et al., 2010; Nation, et al., 2003).

Unfortunately, female student voice is often lacking in academic institutions, as evidenced by the disproportionate paucity of female leadership in post-secondary student government organizations across the U.S. (Johnson, 2011). Also, student voice has not been commonly documented in the development of trauma-informed school interventions. Studies have explored the perspectives of school staff working with court-involved youth, reporting their experiences and challenges (Alisic, 2012; Cox, 2011; Crosby et al., 2015; Zetlin, MacLeod, & Kimm, 2012). Yet, literature has not extensively explored the perspectives of court-involved students regarding their educational well-being. West, Day, Somers & Baroni (2014) presented one of the first studies of youth perspectives and lived experiences of female, court-involved students in residential care. This qualitative study conducted focus groups with female, court-involved students to inform and

assess the pilot implementation of a trauma-informed teaching intervention. Still, their educational experiences warrant further exploration. When compared to the perceptions of students in a non-trauma sensitive, alternative education environment that serves similar trauma-exposed youth, this deeper exploration may prove useful for effectively implementing and assessing trauma-informed school strategies.

Present Study

The present study builds on West et al. (2014), exploring school climate and environment from the perspective of traumatized, female students in both a trauma-informed educational environment as well as a non-trauma-informed school. This study qualitatively explores the following research questions: (1) How do court-involved youth emotionally experience their educational setting? (2) How do court-involved students feel that their school climate can be improved? (3) Do trauma-exposed students in a trauma-informed school setting describe their education environment differently than trauma-exposed, alternative education students from similar racial/ethnic, socio-demographic, and geographic backgrounds?

Methods

Sample

All participants in the study are female students enrolled between September 2014 and June 2015 at one of two public, alternative education high schools, located on the campus of a large Midwestern child welfare placement agency. Both schools serve students with lower socioeconomic status from the surrounding, urban community. Students from both schools are also from similar backgrounds based on race/ethnicity and history of school mobility and suspension/expulsion. While the trauma-informed school exclusively serves court-involved students, with histories of abuse, neglect, and home removal, the comparison school is comprised

of students with significant experiences of poverty and poverty-related trauma exposure. The sample consisted of 76 female students (N=42 from the intervention school; N=34 from the comparison school). The school recruited participants through random sampling among the population of female students at each school, which ranged in age from 14 to 18 years old. Generally, phenomenology utilizes purposeful sampling, selecting individuals who can provide rich data in relation to the phenomenon being studied (Padgett, 2008). However, the student populations of each school are both trauma-exposed and can both provide this richness.

Students were primarily African American, which is generally consistent with the racial/ethnic makeup of the communities surrounding both schools (Data Driven Detroit, 2013). Chi square tests confirm that the sample of students from the intervention school is comparable to both the total population at the intervention school as well as the sample of students from the comparison school, based on race and grade level demographics. See Table 1 for demographic information.

Table 1

Student Demographics

	Intervention School Sample		Total Intervention School Population		Comparison School Sample	
	N	%	N	%	N	%
Total	42	100	404	100	34	100
Race						
African American	29	69	297	73	27	79
White	12	29	88	22	6	18
Other	1	2	19	5	1	3
Grade						
9 th Grade	10	24	88	22	10	32
10 th Grade	10	24	150	37	9	23
11 th Grade	11	26	108	27	10	29
12 th Grade	11	26	58	14	5	16

Note. Intervention Sample vs. Population: Race: $\chi^2(2)=1.48, p=.48$; Grade: $\chi^2(3)=6.19, p=.10$
Sample vs. Sample: Race $\chi^2(2)=3.45, p=.18$; Grade $\chi^2(3)=4.48, p=.21$

Description of Intervention

The school assigned to receive the trauma training intervention has utilized an adapted version of *The Heart of Learning and Teaching: Compassion, Resiliency, and Academic Success (HLT)* curriculum since the pilot year of this longitudinal study. The curriculum has been described by Day et al. (2015) as integrated and manualized, founded on research, theory and clinical practice, and grounded in attachment and ecological theories. It was designed for use in a variety of education settings both residential and non-residential, including public schools, charter schools, and private education authorities. It includes information on issues related to diversity, including gender and racial identity, and the inclusion of training on Theraplay (Booth & Jemberg, 1998) and sensory integration (Ayres, 2005; Dorman et al., 2009). Training modules also included specific trauma-informed strategies, collaborative problem-solving (Greene & Albon, 2006), and self-care. Sessions consisted of role plays, games, case vignettes, individual coaching, and additional tools and resources for classroom use. The modified HLT curriculum was provided sequentially in 8 professional development sessions, followed by 6 classroom observation sessions and individual coaching. Sessions were provided by a clinically-licensed, master's level social worker, with experience with psychological trauma and employment histories in both mental health and child welfare. The curriculum was presented to staff in half-day trainings, with booster trainings occurring monthly over two-hour periods at staff development meetings between October 2014 and May 2015.

Two certified occupational therapists (OT) also participated in curriculum development and coaching, providing an additional 6 training sessions to deliver information on sensory integration theory (Ayres, 2005) and how sensory tools can be used to assist students in self-regulation, self-soothing, and de-escalation (Dorman et al., 2009). Group trainings were followed

by individual coaching sessions between the school staff and the OT training consultants. School administration made efforts to maintain consistency with intervention implementation, as well as school policies and procedures throughout the duration of the school year.

In addition to training, the school implemented the Monarch Room (MR), an alternative to traditional school discipline policies to increase student seat time and attendance. The MR is available throughout the school day, managed by trauma-trained staff to provide positive support to help students de-escalate when needed. When students' emotional states or behavior interfered with learning in the classroom, they were referred by school staff or self-referred themselves to the MR, which is viewed as a support rather than a punitive action. Once in the MR, brief intervention strategies, including problem solving, talk therapy, and sensory-motor activities were utilized to assist students in regulating their emotions in order to return to the classroom within approximately 10 minutes or less. All student visits to the MR are documented by school staff in tracking logs, including the reason for the visit, time student arrived, time student returned to class, and the strategies used to assist the student. This data is regularly reviewed by school administration to improve policy and practice around MR implementation.

Data Collection

This study consists of a secondary analysis of data obtained from ten focus groups held between September 2014 and June 2015. The study was approved by the Institutional review board at Wayne State University. School administrators obtained informed consent/assent from students to participate in focus groups during the school registration process. The phenomenological approach was used to inform the development of a semi-structured interview protocol, which was then used to collect youth perceptions of school climate at the beginning of the school year in September 2014 and again at the end of the school year in June 2015. See

Appendix A for full interview protocol. Students who preferred not to verbalize their comments during the focus group were offered blank paper and encouraged to share their responses in writing. These written comments were typed and added to the end of focus group transcripts. All focus groups were held for approximately one hour and convened at each school building. Information collected from focus groups was used to inform curriculum development and implementation of the intervention.

Data Analysis

Focus groups were audio-recorded and transcribed verbatim. Transcripts were coded independently by the researcher, using reflexive bracketing for confirmability (Padgett, 2008). Then, transcripts were uploaded into NVIVO 10 (QSR International, 2012) and content was analyzed for themes using constant comparison methods to look for commonalities, differences, and main ideas (Dye et al., 2000). Although uncommon to phenomenology, focus group data can be useful with this approach when group interaction, subject matter, and group language are accounted for during analysis (Palmer, Larkin, de Visser, & Fadden, 2010). This qualitative approach allowed the researcher to explore the shared experiences of students, uncovering new perspectives as experiences were confirmed or denied through group interaction (Bradbury-Jones, Sambrook, & Irvine, 2009).

In Vivo coding uses the direct language of the participants as codes rather than researcher-generated words and phrases (Saldaña, 2009). Therefore, the analysis was grounded in the voices of the student participants. The results were reviewed by a subsample of students from each school who participate in the focus groups. This provided a member-check on the validity and interpretation of the data.

Findings

Students at each school described how they emotionally experience their school environment, explaining the dynamics that impact their mood and emotions throughout the school day. They discussed their typical reactions to negative emotions, the factors that change, improve, and exacerbate their mood, as well as their perception of how school staff respond to their emotional state. They also provided suggestions on how to improve their school environment. Findings from the court-involved youth in this study demonstrate occasional parallels with that of non-court-involved youth. However, analysis of the most commonly reported themes from both schools resulted in the emergence of similarities as well as several notable distinctions, as reported below.

Theme 1: “I Become Very Disrespectful and Very Aggressive”

Students at both the intervention and comparison school most often reported that they react to negative emotions by acting out. More specifically, students reported verbally or physically escalating their behavior, yelling, or using profanity to address the subject of their negative mood. The following quotes illustrate how students reported handling negative moments at school with peers or staff:

(INTERVENTION SCHOOL): Sometimes I do [fight]. When I’m in a bad mood, if someone that I don’t like comes in the puzzle [my surroundings] and just rubs me the wrong way, I feel like fighting them, that’s just how I am.

...I give them [other students] the same reaction I would give anybody else on the street because you’re my age, you’re close to my age, and you think that you can just come to me any kind of way. I have a low tolerance for BS, so I come to them how they come to me...I become very disrespectful and very aggressive.

(COMPARISON SCHOOL): I’ll go [react] physically, verbally, mentally, emotionally... You want to go there. I will go there. Come on! It’s this one person who always tries me [provokes me] every day, and I just sit back like fight me. Now! You keep talking to me. Just fight me.

...I'm a big wall of anger. I argue a lot. I try not to fight, but I end up fighting a lot. When someone's yelling at me, I yell back...I really have a bad temper... I'm trying to calm down, and even she [teacher] tells me 'You need to calm down'. I get really mad over stupid stuff. I cuss a lot because it's a part of me to get my anger out.

Theme 2: "That's a Trigger"

Court-involved students at the intervention school most commonly reported factors that negatively, rather than positively, impacted their mood, and identified their classmates as influencing these emotional changes. This includes issues with bullying and antagonistic peer behavior, interactions with difficult student personalities, as well as conflicts or "drama" between students. These findings are illustrated by the following quotes:

Like this morning, perfect example, I got called 'crazy'... I got really upset because society has already labeled me as *crazy* because of the mental illness I've already been labeled with. So I'm already labeled as *crazy*, I don't want to hear my peers call me 'crazy' because that's something that triggers me. Because I'm not crazy. I'm very smart, very intelligent, very insightful, and that's just who I am. But people see my outer self—they don't get a chance to get to know me as a person.

Say for instance, you were taken away from your mom and her rights were terminated. They [peers] will say, 'Oh, that's why you can't live your mom', 'Your mom's a B-word', 'Your mom's a crack-head', or something like that...that's a trigger...

Non-court-involved students at the comparison school also primarily reported factors that negatively influence their mood. However, they identified the school staff (i.e., teachers and administrators) as impacting these changes. Students reported persistent conflict with teachers, instances of classroom favoritism, and unfair allocation of discipline, as displayed in the following quotes:

She [the teacher] likes telling on people...She always tries to get me in trouble... I'm like, 'You're worse than us [the students]'. We're the kids. Then, we have to treat you like an adult.

[Teachers] suspend people for the smallest thing... I got suspended for yelling at somebody, and when somebody threw a chair in the classroom they didn't get suspended.

Theme 3: “Some of Them Are Supportive”

Students from the intervention school most frequently identified teaching staff (i.e., teachers, teaching assistants, school paraprofessionals) as being helpful in improving their mood during difficult emotional moments at school. Students reported that teaching staff provide support, concern, and opportunities to process negative issues or triggers to help them move beyond their mood. This is reflected in the following quotes:

Some of them are more supportive and ask you if you need to go to the Monarch Room, ‘Do you want to step out in the hallway and talk to me?’, ‘Is there someone you would like to talk to’, stuff like that or ‘Just let me know if you need anything’ and stuff like that. Some of them are supportive.

A lot of our teachers have been here for at least two years and we have maybe one or two that have just started this year but they got the hang of it, that we’re placement kids, and they know that we have issues. So they try not to say something [negative] because they never know what’s going on with us...

On the other hand, students at the comparison school most commonly identified their classmates as improving their mood when experiencing stress during the school day. Students reported that their peer group provides comfort, support, and humor as a means to improve their mood, which is displayed in the following quotes:

With me, I usually tear up really easily. My friends will say to me, ‘You know, it’s not that bad.’ We just start laughing... We can make jokes. We laugh about things... Everybody [peers] really tries to help each other.

Theme 4: “That Makes Me Even Madder”

Students from the intervention school reported that while support from teaching staff can be helpful during a difficult emotional moment, it can also worsen their mood when a sufficient interpersonal bond does not exist between the student and the particular staff member. In fact, under these circumstances, support is perceived as an intrusion. Students identified that such behavior, although perhaps well-intentioned, is perceived as prying, insincerity, and in some cases,

a violation of their personal boundaries (e.g., staff touching a student to provide comfort). This has been illustrated by the following quotes:

When I'm mad, I only go to certain staff... So, I don't like when people [staff] ask me what's wrong with me. I'm like, 'What's wrong with *you*?'. That makes me even madder. Why do you care what's wrong with me?

They [teachers] are trying to be too cool... and they cross over boundaries. You are not my friend, you work here... Please don't touch me... I might feel threatened. Don't walk up. Don't stand behind me. They definitely do that, looking over your shoulder. I don't like that. I feel real threatened by that.

At the comparison school, students also most commonly identified teaching staff as aggravating their mood during a difficult emotional moment. However, in contrast to students at the intervention school, they reported a different type of response from school staff. They explained that teaching staff often respond with dismissiveness, indifference, or punitive actions (e.g., being sent to the office, being suspended). These sentiments are shown by the following quotes:

I'm a really peaceful person, but [the teacher] really tries me on the worse days... [The teacher] ignores me... walks away from me while I'm talking to her. Then I end up screaming, which doesn't make the matter better, and then she wants to go and call the principal.

Theme 5: “Understand That Everyone Has Their Backstory”

Students at the intervention school most commonly reported that teaching staff should be more considerate of their unique circumstances as court-involved youth. Although students felt supported by many of their teachers, they explained that some teachers have difficulty understanding their complex moods and behaviors in the classroom. They suggested that all teaching staff should operate with greater understanding, sensitivity, and patience. These findings are illustrated by the following quotes:

I don't like being here [in residential placement]. Some of us are forced to be here, some of us put ourselves in here. So, of course when we have bad days, be considerate that this is not where we really want to be.

[To the teaching staff] Don't take stuff so personal, because we have a lot more stuff going on than normal students...and be considerate of our feelings.

Students at the comparison school also suggested changes in the teaching staff's response to students. However, they suggested that teachers actively work toward improving their rapport with students. This includes improving their classroom responses to difficult student behavior, avoiding negative comments toward students, paying better attention to student body language and triggers, and treating students individually. This theme is displayed in the following quotes:

I would tell teachers to understand that everyone has their backstory. They can't treat me like they treat her, like they treat the other girl....Everybody's different.

Stop being disrespectful...Listen to the students... and pay attention to their body language to see if they're [the student] mad or not.

Discussion

The purpose of this study was to explore trauma-exposed, female students' perspectives on their school environment and their emotional experiences in the classroom, building on the findings of West et al. (2014). Findings illustrate that trauma-exposed students hold very specific views of their teaching staff and school-related needs. For these students, their perspectives directly translate into their perceptions of whether compassion, fairness, and support is available to them in their school environment. In previous research, trauma-exposed students identified exhibiting or witnessing myriad negative mood-related behaviors while in school, including anger, irritability, and frustration (West et al., 2014). Theme 1, *I Become Very Disrespectful and Very Aggressive*, further describes ways in which students manage such emotions and the behaviors that they use in response. Students at both schools, regardless of the presence of a trauma-informed school intervention, identified verbal or physical acting out as their primary way of addressing negative emotions and interactions with peers and school staff. This is supported by previous

findings on the behaviors of trauma-exposed students, where youth commonly reported utilizing aggressive or emotionally-escalated externalizing behaviors to manage interpersonal stress (West et al., 2014).

Theme 2 (*That's a Trigger*) and theme 3 (*Some of Them Are Supportive*) demonstrate important differences between student experiences at the trauma-informed school versus the non-trauma-informed environment. Students at the intervention school identified conflicts with other students as the source of negative mood changes during the school day, but reported that teaching staff help them to recover from these difficult emotional states. Conversely, students at the comparison school attributed mood changes to negative interactions with the teaching staff, but reported gaining comfort and support from their peers to overcome these emotions. While these findings are exploratory in nature, they may be an indication that consistent staff exposure to trauma training and resources has equipped teachers at the intervention school to better address student emotional issues. These students described their teachers as supportive and concerned for their emotional well-being, unlike the comparison school where teaching staff are perceived as demonstrating favoritism and antagonistic behavior when students become escalated.

Theme 4, *That Makes Me Even Madder*, demonstrates the importance of strong interpersonal relationships between students and school staff (Coyne et al., 2010; Penner & Wallin, 2012; Price, 2008). Comparison school students explained their perception of strained relationships with teaching staff, where their emotional issues are often ignored or dismissed in class or addressed using traditional disciplinary practices (e.g., school suspension). Such staff responses only intensify student emotions and further alienate them from school and the potential for positive relationships and interactions with their teachers. Intervention school students also speak about the importance of positive interactions with staff, but also clarify the necessity for

rapport-building prior to these interactions, as a lack of a strong relationship can change students' perceptions of a teacher's intervening behavior. Students who have been exposed to trauma may demonstrate difficulties with interpersonal boundaries (Cook et al., 2005), and may need even more time to bond and form trust with staff before feeling safe and supported in school. For example, students' feelings about being touched by certain staff members demonstrates how an action, meant to be non-threatening and supportive, can actually be triggering and elicit very strong negative reactions in students when that bond is not present. Providing an infrastructure for school staff to consistently build strong relationships with students may be a necessary step in improving the educational setting for trauma-exposed students. Additionally, providing regular training on trauma-related topics (e.g., physical touch, triggers) may also help staff to better understand how to best support students.

Theme 5, *Understand That Everyone Has Their Backstory*, further illustrates the need for positive and supportive school staff relationships among trauma-exposed students. Not surprisingly, students at the comparison school suggested that teachers and school staff improve their responses and interactions with students. In particular, they want teachers to initiate positive relationships with them, refraining from stereotyping students, making derogatory comments, or exhibiting apathetic attitudes, which directly jeopardize those relationships. Students at the intervention school focused their suggestions on school staff gaining a better awareness of their complex circumstances and related student behaviors. While they felt supported by staff, they continue to desire even greater sensitivity. On one hand, this may be a manifestation of their trauma, as court-involved youth often develop unhealthy attachment styles (Luke & Coyne, 2008), which can impact their ability to have their needs and expectations met by others. On the other hand, this also emphasizes the importance of continued training and evaluation to ensure that all

staff are gaining these new trauma-sensitive skills and are appropriately applying these new practices with students.

Strengths & Limitations

This is one of the first studies to explore trauma-exposed students' lived experiences and perspectives of their school environment. Other major strengths include the methodological and sampling approaches used in this study. Phenomenological exploration elicited a rich understanding of how trauma-sensitivity is experienced and needed for trauma-exposed students, while the use of random sampling ensured that focus groups were comparable to the sociodemographic makeup of both school settings. However, common to qualitative research, the sample size is small and cannot be generalized to trauma-exposed students outside of these two school settings. Also, the sample consisted of only female and predominantly African American students. Additionally, data were not able to be collected with respect to each students' specific type of trauma, mental health diagnoses, or special education status, which may have all impacted students' experiences. Finally, while efforts were made to maintain consistent intervention implementation, extraneous school changes and other influential events in the participants' residential and social environment could not be accounted for in this study.

Implications for Policy and Practice

Overall, a trauma-informed approach to teaching holds considerable potential for creating environments where trauma-exposed students can be successful. Recent federal mandates around human trafficking include trauma-informed practice as a mandatory response (President's Interagency Task Force to Monitor and Combat Trafficking in Persons, 2014), demonstrating a national acknowledgement of the importance of trauma and trauma-sensitive policies and practices. The Substance Abuse and Mental Health Services Administration (SAMHSA) and the

National Center for Trauma-Informed Care (NCTIC) define a trauma-informed approach as one that realizes the prevalence of trauma, recognizes how trauma affects all individuals in the system (including its own workforce), responds with trauma-sensitive practices and policies, and actively works against re-traumatization (SAMHSA NCTIC, 2015). Schools should work to create this type of learning environment, where both staff and school policies function with sensitivity to student trauma, and students' perspectives are utilized to address their needs.

More specifically, schools should implement on-going and dynamic staff professional development to educate teachers on the latest research and information on cultural-sensitivity, childhood trauma, and methods of interacting with and disciplining trauma-exposed students. Additionally, school administrators should devise disciplinary policies that are clear, consistent, and attachment-driven (Moore, 1997). Traditional school discipline has relied on punitive methods (e.g., suspension and expulsion), which are ineffective (Griffin, 2011), at best, and re-traumatizing (Wolpow et al., 2009), at worst. Trauma-sensitive and attachment-oriented approaches to student discipline may provide a viable solution to this problem.

As state and federal priorities continue to emerge around social and emotional learning in schools (Blad, 2015; CASEL, 2015), trauma-informed practice may also provide valuable solutions for improving students' socio-emotional well-being, particularly among trauma-exposed student populations. Trauma-informed school practice means investing in the socio-emotional well-being of students—not simply their academic progress—as they move through school, and there should be an intentional effort to facilitate strong interpersonal skills and positive relationships between students, school staff, and fellow classmates. This type of approach calls for interdisciplinary collaboration and communication. As described in this study, social workers and OT professionals can provide school personnel with important knowledge on how to build

relationships with and manage the behavior of traumatized youth. Policies that support collaboration between teachers and social work, OT, child welfare, and juvenile justice workers may help to create environments where social and emotional learning can take place.

Conclusion

Trauma-exposed youth encounter various distinct hurdles to their academic success. These challenges can impact their future outcomes, but can also be ameliorated when schools and staff members are structured to respond with awareness and sensitivity. As these students strive to cope and perform in their academic environments, they can also provide a wealth of knowledge on how to improve their experiences. These perspectives can assist educators in developing more sensitive methods of meeting students' needs, reducing the risk of re-traumatization, and ultimately improving students' academic trajectory.

CHAPTER 3 EXAMINING TRAUMA-INFORMED TEACHING AND THE TRAUMA SYMPTOMOTOLGY AND SELF-ESTEEM OF COURT-INVOLVED, FEMALE YOUTH

Background

Psychological trauma, often resulting from experiences with maltreatment, has a major impact on youth functioning and development. Trauma is defined as the result of “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.” (SAMHSA, 2012). This can be acute or chronic, whereas acute trauma is the result of a recent, emotionally distressing event, and chronic trauma is caused by multiple extreme experiences (Council on Social Work Education, 2012; Riebschleger, Day, & Damashek, 2015). Yet another form of psychological trauma is complex trauma, defined as “multiple or chronic and prolonged developmentally adverse traumatic events” (Wolpow, Johnson, Hertel, & Kincaid, 2009, p. 2). This trauma can impede healthy mental, emotional, behavioral, and cognitive functioning (Cook et al., 2005), and is often experienced by court-involved youth (Greeson et al., 2011).

In 2012, the U.S. foster care system encountered as many as 397,122 children and adolescents (U.S. Department of Health and Human Services, 2013a), and the juvenile justice system experienced 1.3 million delinquency arrests (Office of Juvenile Justice and Delinquency Prevention, 2014). Dually court-involved youth consist of those who have interacted with both the foster care and juvenile justice system (Herz, Lee, Lutz, Stewart, Tuell, & Wiig, 2012). There are varying pathways to becoming dually-involved, such as foster youth being referred to juvenile justice for delinquent behavior, delinquent youth receiving child welfare intervention after abuse or neglect is discovered in juvenile justice proceedings, and delinquent youth being referred to

child welfare after release from a correctional placement due to the absence of a safe and welcoming home to which they can return.

Race and Gender Among Court-Involved Youth

Racial and ethnic minority youth present unique challenges relevant to court-involvement, as they have an overwhelmingly disproportionate presence among court-involved populations (Brandt, 2006; Lawrence & Hesse, 2010; U.S. Department of Health and Human Services, 2013b). These youth are not intrinsically predisposed to more violent or criminal behavior and environments. Rather, multiple ecological dynamics, including systemic economic and racial oppression, heavily influence many of the risk factors associated with court-involvement (Bellair & McNulty, 2005; McNulty & Bellair, 2003) and also contribute to violence within communities of color (Anderson, 1994). Also, racial/ethnic minority youth are particularly vulnerable to trauma exposure (American Psychological Association Presidential Task Force on Posttraumatic Stress Disorder and Trauma in Children and Adolescents, 2008). The U.S. Department of Health and Human Services (2013b) reported that the racial/ethnic group with the highest rates of representation in the foster care system has been Native American youth since 2009. Also, close to half of foster youth were of African American or Hispanic/Latino origin in 2012. Yet, these two racial/ethnic groups only made up 38% of the population for their age group (Annie E. Casey Foundation, 2014).

The same overrepresentation is true for youth in the juvenile justice system (Brandt, 2006; Lawrence & Hesse, 2010). Youth from African American or Hispanic/Latino racial/ethnic backgrounds made up over 62% of youth detained in 2010 (Sickmund, Sladky, Kang, & Puzzanchera, 2013). More specifically, Latino and American Indian youth were more than twice as likely to be placed in a juvenile correctional facility when compared to white youth. African

American youth had even higher rates of placement, as they were approximately five times as likely to be incarcerated. Additionally, African American youth are more than twice as likely as white youth to live in impoverished areas, and therefore have increased exposure to community violence, stress, and crime (Brandt, 2006; Lawrence & Hesse, 2010).

Female youth also present unique issues in relation to court-involvement and trauma. In 2012, female children and adolescents made up almost half of the total number of youth in the child welfare system (U.S. Department of Health and Human Services, 2013a). In general, female youth are more likely than males to experience victimization, particularly sexual abuse (Sedlak et al., 2010), which is often a precursor to foster care involvement (Baynes-Dunning & Worthington, 2013). Even when compared to males who have experienced abuse, female youth are still overwhelmingly more likely to encounter sexual abuse (Sedlak et al., 2010). In the juvenile justice system, Chesney-Lind & Shelden (2013) explain that attention has been historically given to male delinquency. However, the drastically increasing rates of crime, delinquent behavior, and arrests among female youth have garnered more recognition of this traditionally understudied population. In 2012, almost 30% of juvenile arrests were of female youth (Office of Juvenile Justice and Delinquency Prevention, 2014). Still, the majority of female juvenile adjudication and detention occur as a result of status offenses (e.g., curfew violations, truancy) and probation violations, where female youth disproportionately receive harsher punishment for less serious infractions than their male counterparts (Bloom & Covington, 2001; Pasko, 2010; Thibodeau, 2002; Watson & Edelman, 2012). Further, female youth generally experience more internalizing behaviors and Post-Traumatic Stress Disorder (PTSD) in response to trauma exposure (Grande, Hallman, Underwood, Warren, Rehfuss, 2012; Postlethwait, et al., 2010), which is distinctly different from

male youth (Postlethwait, Barth, & Guo, 2010) and warrants specific attention in order to improve outcomes among this population.

Trauma, PTSD, & Educational Well-Being

Adolescents who have encountered the foster care or juvenile justice system or both are significantly impacted by the presence of complex trauma. Foster care youth experience psychological trauma at higher rates than their peers (Greeson et al., 2011), as evidenced by foster care youth exhibiting PTSD at a higher rate than war veterans (Pecora et al., 2005), and over 20% higher than the rate of PTSD in the general population (Salazar, Keller, Gowen, & Courtney, 2012). Youth in the juvenile justice system have similar histories, with high level of traumatic stress (Ryan, Bashant, & Brooks, 2006; Wasserman & McReynolds, 2011). Research has shown that almost 90% of youth placed in a correctional facilities report a previous history of traumatic experiences (Abram et al., 2004; Ford, Hartman, Hawke, & Chapman, 2008; Ford, Chapman, Conner, & Cruise, 2012).

Unfortunately, several domains of youth development are impacted by trauma and PTSD, including affect, cognition, and self-regulation of behavior (Cook et al., 2005). Furthermore, youth educational attainment is compromised by childhood trauma. Academic success in current primary and secondary education systems relies on several factors, including the ability to not only organize and memorize material, but to also comprehend lessons, maintain attention during class instruction, and regulate behaviors appropriately (Cole, O'Brien, Gadd, Ristuccia, Wallace, & Gregory, 2005). Traumatized students may struggle with meeting these demands, as trauma can severely impair youth brain development (Anda et al., 2006; Black, Woodworth, Tremblay, & Carpenter, 2012), attention span, cognitive processing, maintenance of boundaries, self-regulation, impulse-control, and attachment (Cook et al., 2005). As students grapple with this, they may also

endure exposure to triggers, which are reminders of previous traumatic experiences, such as sounds, smells, or other events taking place in their environment. This may result in negative or disruptive classroom behaviors that youth may not even recognize as being related to their psychological distress (National Child Traumatic Stress Network Core Curriculum on Childhood Trauma Task Force, 2012; Pynoos, 1993). In turn, these behaviors have been interpreted by school staff as apathy and disinterest in learning (Cox, 2011). Further, other trauma-related impairments may be misinterpreted by school personnel as defiant behavior (Oehlberg, 2008) and other mental health disorders (Cook et al., 2005; Griffin et al., 2011; Cole et al., 2005; Richardson et al., 2012).

Youth who have endured abuse exhibit less school engagement, more internalizing and externalizing behaviors, and impaired social skills in comparison to their peers (Shonk & Cicchetti, 2001). Links have been found between exposure to violence and lower grade point average (Hurt, Malmud, Brodsky, & Giannetta, 2001), IQ (Delaney-Black et al., 2002), and graduation rates (Grogger, 1997). Court-involved youth are less likely to complete homework, fail a grade at twice the rate of their peers, score lower on achievement tests (Burley & Halpern, 2001; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Courtney, Terao & Bost, 2004; Pecora et al., 2005), and are more frequently placed in special education programs (Macomber, 2009; Shin & Poertner, 2002; Smithgall, Gladden, Howard, Goerge, & Courtney, 2004). They are also disciplined and suspended or expelled with greater frequency (Burley, 2010; Courtney et al., 2004). Under these circumstances, it is not surprising that these youth later become at risk of unemployment, working poverty, dependence on public assistance, and homelessness throughout adulthood (Lawrence & Hesse, 2010).

Trauma & Self-Esteem

Self-esteem is defined as an attitude toward one's self (Rosenberg, Schooler, Schoenbach, Rosenberg, 1995), and more specifically, a belief in one's own overall worth and value (Baumeister, Campbell, Krueger, & Vohs, 2003). Self-esteem can manifest globally, as a general and overall view of self, but can also be specific to particular aspects of self, such as physical attractiveness, athletic ability, or professional prowess. Those with high global self-esteem possess a vastly positive assessment of themselves, while individuals with low self-esteem hold a negative overall view of self.

Connections between self-esteem and school achievement have been debated in the literature. While some studies have found correlations between school-related self-esteem and academic performance (Marsh & Craven, 2006), others have questioned the strength of this relationship (Baumeister, Campbell, Krueger, and Vohs, 2003; Valentine, Dubois, & Cooper, 2004), suggesting that high self-esteem does not play a significant enough role in influencing school success. However, a longitudinal study found low self-esteem to be associated with externalizing behaviors related to delinquency (Donnellan, Trzesniewski, Robins, Moffitt, & Caspi, 2005). Also, a clear link has been found between self-esteem and psychological well-being. Rosenberg et al. (1995) reported that high global self-esteem was correlated with lower rates of depression, anomie, general anxiety, irritability, and negative affect in youth. It was also related to higher life satisfaction and happiness.

Unfortunately, systemic issues of racism and sexism may put some students, particularly female students and youth of color, at risk of experiencing lower self-esteem in school settings (Martinez & Dukes, 1991). Also, childhood trauma can significantly hinder the development of high self-esteem in youth, further impacting their psychological well-being. As court-involved

youth encounter traumatic events, along with the feelings of being excluded or isolated, the development of a positive view of one's self can be impeded (Luke & Coyne, 2008; Unrau, Seita, & Putney, 2008). Additionally, the stigma associated with being a court-involved youth can be even further damaging to youths' self-image and esteem (Kools, 1997). This may also impact the behavior and educational well-being of traumatized students as they contend with the academic and social challenges of the school environment.

Theoretical Framework

This study examines the impact of trauma-informed educational practices through the lens of attachment theory (Bowlby, 1969, 1979, 1980, 1988). Grounded in the psychodynamic orientation, attachment theory provides a view of human development, positing that lifespan functioning is contingent upon early childhood interactions with caregivers (Bowlby, 1969, 1979, 1980, 1988). The experiences that traumatized youth face can have a major impact on the way that they view themselves and form relationships with others. The childhood abuse and neglect that generally precedes court-involvement can contribute to poor attachments to parents or caregivers (American Academy of Pediatrics, 2000; Manning, 2008). Removing youth from their home of origin can also interfere with their ability to form healthy attachments (Rushton, Mayes, Dance, & Quinton, 2003). Furthermore, studies have shown that foster youth, especially those with multiple placements, often exhibit unhealthy attachment styles (Luke & Coyne, 2008; Unrau, Seita, & Putney, 2008).

While attachment theory generally assumes that attachment styles developed in childhood will persist throughout the life course, some methods of intervention may be useful in modifying maladaptive behavior. To accomplish this, traumatized youth need connections with caring adult figures to become aware of negative self-perceptions and subsequent behaviors, empowering them

to make changes to improve functioning (Bowlby, 1988). They would also need supportive, emotionally-corrective relationships to counteract their existing views of self and expectations of others. School staff can assume a positive role in providing this long-absent contact with positive and supportive adult figures, helping to facilitate healthy attachment and improve youth functioning.

Present Study

To date, little research has been done to evaluate evidence-based, trauma-informed educational interventions. Day et al. (2015) presented one of the first studies to evaluate trauma-informed educational practices with court-involved students in residential care. This present study builds on Day et al. (2015), using survey data from a multi-year trauma-informed teaching intervention to quantitatively measure the well-being of trauma-exposed, female students in a trauma-informed school setting. The primary research questions are: (1) Do students exposed to a trauma-informed teaching intervention demonstrate significant changes in trauma symptomology? (2) Do students exposed to a trauma-informed teaching intervention demonstrate significant changes in self-esteem? (3) Can changes in trauma symptoms be predicted by students' self-esteem, when controlling for race/ethnicity and grade level? I hypothesized that students would demonstrate statistically significant decreases in trauma symptomology and increases in self-esteem. I also anticipated that students' self-esteem level would be a statistically significant predictor of change in students' trauma symptoms.

Methods

Sample

Study participants included all students enrolled between September 2012 and June 2015 at a public, charter high school, located on the campus of a large Midwestern child welfare

placement agency. This school exclusively serves court-involved, female students, with histories of abuse and neglect. Students range in age from 14 to 18 years old and are primarily African American. These racial demographics are generally consistent with the racial makeup of the surrounding community (Data Driven Detroit, 2013), as well as the racial demographics among court-involved youth, locally (Wayne County Department of Children and Family Services, 2011) and nationally (Sickmund, Sladky, Kang, & Puzzanchera, 2013; U.S. Department of Health and Human Services, 2013b). There were 815 students enrolled during the observation period. However, only 109 students completed both a pre- and post-test, due to the high rate of student turn-over. Therefore, only 109 students were included in the analysis. See Table 2 for demographic information.

Table 2

Participant Demographics (N=109)

	N	%
Total	109	100
Race		
African American	69	63
White	18	17
Other	22	20
Grade		
9 th	30	28
10 th	31	28
11 th	24	22
12 th	24	22

Note. Age: $\mu=15.85$, $SD=1.34$

Description of Intervention

The school has utilized an adapted version of *The Heart of Learning and Teaching: Compassion, Resiliency, and Academic Success (HLT)* curriculum since the 2012-2013 school year. The curriculum has been described by Day et al. (2015) as integrated and manualized, founded on research, theory and clinical practice, and grounded in attachment and ecological

theories. It was designed for use in a variety of education settings both residential and non-residential, including public schools, charter schools, and private education authorities. It includes information on issues related to diversity, including gender and racial identity, and the inclusion of training on Theraplay (Booth & Jernberg, 1998) and sensory integration (Ayres, 2005; Dorman et al., 2009). Training modules included specific trauma-informed strategies, collaborative problem-solving (Greene & Albon, 2006), and self-care. Sessions consisted of role plays, games, case vignettes, individual coaching, and additional tools and resources for classroom use. The curriculum was presented, annually, to staff in half-day trainings, with booster trainings occurring monthly over two-hour periods at staff development meetings between October and May of each school year.

The modified HLT curriculum was provided sequentially in 8 professional development sessions, conducted by a clinically-licensed, master's level social worker, with experience with psychological trauma and an employment history in both mental health and child welfare. To ensure the fidelity of program implementation teachers also participated in 6 classroom observations and individual coaching sessions, also conducted by the certified therapist. Two certified occupational therapists (OT) also participated in curriculum development and coaching, providing an additional 6 training sessions to deliver information on sensory integration theory (Ayres, 2005) and how sensory tools can be used to assist students in self-regulation, self-soothing, and de-escalation (Dorman et al., 2009). Group trainings were followed by individual coaching sessions between the school staff and the OT training consultants. Additional trainings were implemented to address staff turnover.

In addition to training, the school implemented the Monarch Room (MR), an alternative to traditional school discipline policies to increase student seat time and attendance. The MR is

available throughout the school day, managed by trauma-trained staff to provide positive support to help students de-escalate when needed. When students' emotional states or behavior begin to interfere with learning in the classroom, they may be referred by school staff or may self-refer themselves to the MR, which is viewed as a support rather than a punitive action. Once in the MR, brief intervention strategies, including problem solving, talk therapy, and sensory-motor activities are utilized to assist students in regulating their emotions. The goal of the MR is to return students to the classroom in 10 minutes or less. All student visits to the MR are documented by school staff in tracking logs, including the reason for the visit, time student arrived, time student returned to class, and the strategies used to assist the student. This data is regularly reviewed by school administration to improve policy and practice around MR implementation.

Data Collection

This study utilized a secondary analysis of school data gathered over three consecutive school years (2012-2015), using a one group, pre/post-test design. Although data spans three years, each students' pre-test was administered in the same school year as their post-test, with no student data being duplicated in multiple years. Approval was received from the Institutional review board at Wayne State University, and school administrators obtained informed consent/assent from students during the school registration process. School staff administered surveys to participants to assess trauma symptoms and self-esteem at the beginning of each school year (before the intervention period) and again at the end of each school year (after teaching personnel were exposed to the trauma-informed teaching intervention). Only students with both pre- and post-test data were included in the study.

Measures

For research questions 1 and 2, the major independent variable of interest is time, defined as pre-intervention and post-intervention. The dependent variables are student trauma symptoms and self-esteem, as defined by student scores on two standardized measures. Due to the aforementioned impact of trauma on student functioning, student post-traumatic symptomology was measured using the Child Report Of Post-traumatic Symptoms (CROPS), a 25 item, self-report tool (see Appendix B). CROPS assesses symptoms of post-traumatic stress disorder in youth, with each item being rated according to their frequency on a 3-point scale. Responses range from 0 (none) to 2 (lots). Scores higher than 19 indicate more significant issues with PTSD symptoms. The CROPS was normed on a sample of over 200 middle school students from diverse racial/ethnic backgrounds, and has demonstrated internal consistency and reliability with an overall alpha score of 0.73 (Greenwald & Rubin, 1999). For the current study, the Cronbach's alpha was 0.95 at pre-test and 0.97 at post-test.

Student self-esteem was measured using the Rosenberg Self-Esteem Scale (RSE), a widely used, 10 item, self-report instrument that assesses the self-esteem of high school students (see Appendix C). Each item is rated according to student feelings using a 4 point scale, ranging from 1 (strongly agree) to 4 (strongly disagree). Half of the items were reverse-coded for scale agreement, making higher scores, particularly a 20 or more, a greater indication of self-esteem. The RSE was developed using approximately 5000 high school students from various racial/ethnic groups. It has high internal consistency and reliability, with alphas ranging between .77 and .88 and test-retest correlations ranging from .85 to .88 (Rosenberg, 1979). For the current sample, the Cronbach's alpha was 0.83 at pre-test and 0.81 at post-test.

For question 3, the independent variable is student self-esteem-level (defined as students' RSE post-test scores). The dependent variable of interest is change in students' trauma symptoms between pre- and post-tests. This variable is defined dichotomously as a higher than average change or lower than average change in CROPS scores for the current sample.

Data Analysis

Demographic (i.e., race, grade) and survey data were entered into SPSS 22 statistical software and explored using frequencies and descriptive statistics. For questions 1 and 2, paired sample t-tests were used to examine differences between students' CROPS and RSE scores before and after the intervention. Effect sizes (d) were calculated using Cohen's d for a more concrete impression of statistically significant results.

For question 3, the mean difference in students' CROPS scores between pre- and post-tests was used to create a dichotomous variable, comprised of all students who experienced a change at or above the mean difference versus all other students. Then, a logistic regression was used to identify whether self-esteem could predict outcomes in CROPS score change, while controlling for race and grade level.

Findings

The purpose of this study was to build on the findings of Day et al. (2015), examining multi-year survey data to assess the well-being of trauma-exposed, female students in a trauma-informed school environment. The primary research questions examined whether students exposed to a trauma-informed teaching intervention demonstrate significant changes in trauma symptomology and self-esteem. Findings from a preliminary analysis of the data demonstrated normality. As expected, CROPS scores at pre- and post-test were very high, demonstrating high levels of trauma symptomology among the sample. Interestingly, students scored in the normal to

high range for self-esteem, regardless of their high trauma symptoms and exposure. See Table 3 for pre/post means and standard deviations for both measures.

To compare pre- and post-test scores, paired sample, two-tailed, t-tests were conducted, using an alpha level of .05. Results yielded a statistically significant decrease in CROPS pre-tests ($M = 37.60$, $SD = 14.47$) and post-tests ($M = 27.92$, $SD = 17.95$) scores for post-traumatic stress symptoms; $t(108) = 6.07$, $p < .01$. A Cohen's d of 0.60 was also calculated, demonstrating a medium effect size in the reduction of trauma symptoms. On the other hand, RSE scores decreased from pre-test to post-test, from approximately 32 to 31. However, this change was not statistically significant. See Table 3 for results of paired sample t-tests.

Table 3

Means and Pairwise Comparisons for Pre/Post Responses (N=109)

	Pre-test		Post-test		t (108)
	μ	SD	μ	SD	
CROPS ⁺	37.60	14.47	27.92	17.95	6.07*
RSE ⁺⁺	31.93	6.63	30.81	5.95	1.55

Note. ⁺ Child Report of Post-traumatic Symptoms; * $p < .01$

⁺⁺ Rosenberg Self-Esteem Scale

Next, the tertiary research question was explored, examining whether changes in trauma symptoms could be predicted by students' self-esteem. The average change in students' CROPS scores between pre- and post-tests (9.7 points) was used to create a dichotomous variable, defined as students who experienced a decrease of 9.7 points or more in CROPS symptoms versus students who experienced a decrease of less than 9.7 points. A binary logistic regression was used to predict the outcome of this reduction in trauma symptoms. The predictor variable was self-esteem level (measured with higher RSE post-test scores indicating higher levels of self-esteem), and the control variables included race/ethnicity (African American=0 or non-African American=1) and

grade level (underclassman=0 or upperclassman=1). The model was tested for goodness of fit using the Hosmer and Lemeshow test, which was found to be insignificant, ($\chi^2(8) = 9.75, P < .28$), demonstrating a good fit. Results indicate that the generated model provides a statistically significant improvement in predicting CROPS score reduction over the constant-only model, $\chi^2(3, N=109) = 7.80, p = 0.05$, and self-esteem level demonstrated a statistically significant influence at an alpha level of $p = 0.05$. The likelihood of a student experiencing an average or above average reduction in trauma symptoms is 10% higher for each 1 point increase in self-esteem score. See Table 4.

Table 4

Predictors of Change in Trauma Symptoms (N=109)

Predictor	β (SE)	Estimated Odds Ratio	95% Confidence Interval	
			Lower	Upper
Constant	-4.69 (1.94)			
Race	.19 (.26)	1.21	.73	2.02
Grade	.09 (.16)	1.10	.81	1.49
Self-Esteem Score	.09 (.04)*	1.10	1.08	1.19

Note. (Cox & Snell) .07, (Nagelkerke) .09, Model $\chi^2(3, N=109) = 7.80, *p = 0.05$

Discussion

The aim of this study was to evaluate a trauma-informed teaching curriculum, examining the well-being of female students exposed to the intervention. Findings demonstrate that, as hypothesized, students experienced a decrease in trauma symptoms after being exposed to the trauma-sensitive school intervention. Such promising results support the use of trauma-informed teaching and are consistent with other studies on attachment-oriented practices in schools (Casey Family Programs, 2013; Cole et al., 2005; Moore, 1997; Penner & Wallin, 2012; Wolpow et al., 2009). Utilizing practices that address the role of trauma in student behavior may help to reduce trauma symptoms and improve students' well-being in school. For example, the inclusion of OT

resources and sensory integration techniques (Dorman et al., 2009) may have directly addressed students' PTSD triggers, allowing students to feel more stable and supported in the classroom. Furthermore, encouraging attachment-focused responses to students may provide opportunities for students to actively engage in positive relationship-building, improving their social and emotional health as well as the overall learning environment.

Data also illustrated some unexpected findings. The intervention was not associated with any significant changes in student self-esteem. However, this is mostly likely due to the pre-existing, high levels of self-esteem among students in this sample. Although experiencing high PTSD symptomology, students generally exhibited normal to high self-esteem at the beginning and end of the school year, which is surprising, but not completely unforeseen. Day et al. (2015) found similar results when examining self-esteem in the pilot year of this intervention. In this study, students' self-esteem scores were approximately 28 before and after the intervention. Unlike Day et al. (2015), self-esteem among students showed a slight yet non-significant decrease, from 32 at pre-test to 31 at post-test. It is unclear what may have caused this mild decrease or how students with such high trauma exposure maintained high self-esteem throughout the observation period. Other socio-cultural factors may have been present among this sample of youth that functioned as protective factors, preventing youth from developing issues with self-image and self-perception.

Nevertheless, findings continue to support the important role that self-esteem plays in youth well-being. Consistent with other literature on childhood well-being and self-perception (Kools, 1997; Luke & Coyne, 2008; Rosenberg et al., 1995; Unrau, Seita, & Putney, 2008), data indicated that students with higher self-esteem were likely to have a greater reduction in trauma symptoms over the course of the school year. This indicates that school interventions that target

self-image may be useful in helping court-involved students to overcome their traumatic histories. Still, further exploration is needed to better understand self-esteem among traumatized, female students and how trauma-informed practice can be leveraged to improve students' well-being.

Strengths & Limitations

This is one of the first studies to provide an empirical assessment of a trauma-informed teaching intervention for trauma-exposed students. As another profound attribute, the research team was comprised of an interdisciplinary group, consisting of researchers in the social work, education, psychology, and occupational therapy fields to provide comprehensive intervention development and evaluation. On the other hand, there are also methodological limitations to consider. Due to high student turn-over, common to this population, longitudinal study was not possible. Therefore, this study was cross-sectional in nature, with data for each student representing one school year. Also, extraneous school changes that occurred from year to year and non-school related factors could not be examined, presenting a potential limitation of the study's internal validity. Finally, no control group existed in this study. Therefore, exploring comparisons and causal relationships between the intervention and student well-being was not possible.

Implications for Policy and Practice

Attention to social and emotional well-being is paramount when attempting to engage students in learning (CASEL, 2015), as these skills are a vital ingredient in improving academic achievement. The Collaborative for Academic, Social, and Emotional Learning, with support from the U.S. Department of Education, has made considerable strides in bringing attention to the importance of focusing on student well-being in addition to academic performance (CASEL, 2015). This is even more relevant for court-involved students, who must meet demanding

academic expectations in the midst of overwhelming emotional barriers and psychological triggers. A trauma-informed school climate allows teachers and school staff to acknowledge these student challenges, as it includes recognition of the prevalence and impact of trauma, as well as appropriate system-wide responses (SAMHSA NCTIC, 2015).

Therefore, school administrators should assess the climate of their school and the potential for implementing trauma-informed practice. School personnel should also receive trauma-focused training that is up-to-date and on-going as a regular part of their professional development regimen to learn how childhood trauma impacts student functioning and how to best address student behavior. This may require policies that promote cross-system collaboration, where social workers, other mental health workers, and OT professionals are brought in to provide school personnel with relevant knowledge, sensory-related tools, and other resources for reducing students' triggers and improving well-being while in school. Moreover, youth spend a large amount of time in school and are often referred into mental health services by school personnel (Ko et al., 2008). This means that strong collaboration and communication is also needed among school staff and external supports, such as mental health professionals, foster care workers, and juvenile justice personnel who are also involved in the youth's well-being.

Findings also illustrate the need for school policy and practices that actively acknowledges the value and worth of students and their unique experiences. Eliciting students' perspectives on new school practices is essential to this effort. This can also be promoted through staff training that emphasizes information on culture and diversity to assist teachers in becoming culturally-responsive in their interactions and relationships with students from varying backgrounds. Such measures may help students to build and maintain better self-esteem, while also reducing the impact of trauma on students' overall well-being.

Conclusion

Childhood trauma creates multiple complex impediments to students' academic achievement. Trauma-informed teaching may be useful in reducing student trauma symptoms, helping them to be focused and engaged in the classroom. Attention to the whole child, both their academic progress and their social and emotional well-being, is key to improving outcomes among court-involved and trauma-exposed youth populations. Such approaches to teaching ensures that the presence and impact of trauma is reduced in these students' lives, and that they are emotionally ready to learn in school.

CHAPTER 4 ASSESSING A TRAUMA-INFORMED BEHAVIORAL INTERVENTION AS A SUBSTITUTE FOR SUSPENSION/EXPULSION IN AN ALTERNATIVE SCHOOL SETTING

Background

Traditionally, schools have used suspension and expulsion practices as a method of addressing student behavioral issues (Planty et al., 2009; Wald & Losen, 2003). School suspension, a school response to student infractions, where students are temporarily removed from their typical academic environment (Christle, Nelson, & Jolivette, 2004), has drastically grown in use throughout U.S. school systems. In 2006, more than 3.25 million students were suspended nationwide (Planty et al., 2009). Court-involved youth, those in the foster care and juvenile justice systems, experience higher proportions of school suspension and expulsion (Burley, 2010; Courtney et al., 2004), impacting their academic achievement and overall success as students (Coleman, 2009; Griffin, 2011). Research on various aspects of educational well-being has shed light on the academic disparities that exist between court-involved youth in out of home care settings and their counterparts. Court-involved youth experience lower academic achievement, higher prevalence of school failure (Burley & Halpern, 2001; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Courtney, Terao & Bost, 2004; Pecora et al., 2005), and lower rates of graduation (Grogger, 1997).

Female youth often have gender-specific experiences, which impact their pathway to court-involvement as well as their school discipline history. In 2012, females made up roughly 48% of foster youth (U.S. Department of Health and Human Services, 2013a) and approximately 29% of juvenile arrests (Office of Juvenile Justice and Delinquency Prevention, 2014). Females are more likely to become court-involved due to sexual victimization (Baynes-Dunning & Worthington, 2013; Sedlak et al., 2010) and status offenses (e.g., curfew violations, incorrigibility) (Bloom &

Covington, 2001; Pasko, 2010; Thibodeau, 2002; Watson & Edelman, 2012), unlike their male peers. Academically, while male students receive more school suspensions in general (U.S. Department of Education, Office for Civil Rights. 2014), female students from racial/ethnic backgrounds are disproportionately suspended from school (U.S. Department of Education, Office for Civil Rights, 2014), and yet remain understudied (Crenshaw, Ocen, & Nanda, 2015). For example, the U.S. Department of Education, Office for Civil Rights (2014) reported that African American, female students are suspended six times more than white, female students. They also experience suspension at a rate of 12% higher than female students from all other racial/ethnic backgrounds. This education issue leaves court-involved females, from racial/ethnic backgrounds, in jeopardy of a host of poor outcomes, which commonly include adulthood poverty, unemployment, and homelessness (Lawrence & Hesse, 2010).

Impact of Student Suspension/Expulsion

These negative outcomes may be due in part to the negative impact of school suspension/expulsion on youth development and academic success. First, excluding students from school through suspension practices has not been shown to be effective in reducing negative behavior, and actually worsens student behavior in school (Fenning & Bohanan, 2006; Mayer, 1995; Sugai & Horner, 2002). In fact, Costenbader & Markson (1998) found that students who had been suspended from school demonstrated a lack of remorse for their behavior. Additionally, this discipline practice does not influence students to avoid further instances of poor behavior (Losen & Skiba, 2011; Morrison et al., 2001). Instead, students exhibit feelings of anger and resentment after experiencing school suspension (Costenbader & Markson 1998). Ultimately, disciplinary practices that exclude students from school do not serve their purpose of improving

academic achievement, but are actually associated with lower primary and secondary school achievement in multiple core academic subjects (Raffaele-Mendez, Knoff, & Ferron, 2002).

Second, exclusionary discipline can negatively impact other aspects of student psychosocial functioning. It has been linked to the creation of poor self-image in students (Cameron & Sheppard, 2006; Hattie, 2002), as well as feelings of alienation and shame (American Psychological Association, 2008). Also, it has been associated with the development of various psychological disorders. These include depression, posttraumatic stress disorder (PTSD), and anxiety (Cameron & Sheppard, 2006; Hyman & Perone, 1998; Wu, Pink, Grain & Mole, 1982).

Third, student attachment to school may be disrupted by suspension/expulsion practices. Not only do students become academically disconnected, but also socially detached from the school environment (Christle et al., 2004; Gordon et al., 2001). Schools can assume a strong role in providing students with a sense of belonging (Cameron & Sheppard, 2006), and contact with positive and supportive adult figures, especially for court-involved youth who are separated from their family of origin in out-of-home care. Of course, schools should not be expected to replace caregivers in the lives of their students. However, they can help to facilitate healthy attachment in students by not only assuming the task of educating, but also building nurturing relationships with them. When students experience out-of-school suspensions/expulsions, these relationships are compromised, which may explain the association between these discipline practices and higher rates of school drop-out (Arcai, 2006; Christle et al., 2004).

Finally, students miss out on valuable instruction time, classwork, and other assignments, which impede learning and academic achievement (Borman et al. 2003; Brophy, 1988; Brophy & Good, 1986; Carter, 1984; Cooley & Leinhardt, 1980; Greenwood, Horton, & Utley, 2002; Hattie, 2002). Whether or not students are allowed to make-up missed assignments is generally at the

discretion of teachers and school administrators, and can lead to poor grades if students are not allowed to do so (Rossow & Parkinson, 1999). Multiple suspensions or school expulsion equate to more school absence, and leaves students with increased apathy toward education (Costenbader & Markson, 1998), and feelings of hopelessness as they grow further behind their peers (Casella, 2003).

Zero-Tolerance Policies

Despite the increasing evidence against school suspension, many schools have responded to growing fears over school violence by instituting *zero tolerance* policies, making suspension practices increasingly more common (National Association of School Psychologists, 2001). Zero tolerance in schools was originally defined as the systematic enforcement of predetermined exclusionary practices (i.e., suspension/expulsion) in order to promote safety by deterring the use of drugs, weapons, and violence in schools (American Psychological Association, 2008; National Association of School Psychologists, 2001). However, these practices have also become commonplace in dispensing strict exclusionary punishments for a multitude of other school infractions, including more minor school code violations. Students often receive suspensions for behaviors that in no way infringe on the safety of others (Raffaele-Mendez et al., 2002), including tardiness, wearing inappropriate attire, or being disruptive in class (Bock, 1998; Cameron, 2006; Skiba et al., 1997). Still, after almost 30 years of use, zero tolerance policies remain unsupported by empirical evidence.

Proponents of school zero tolerance policies suggest that such approaches to school discipline provide more disciplinary consistency, improve school climates and academic outcomes, and deter poor student behavior, while addressing the rising rates of school violence (American Psychological Association, 2008). However, research confirms that these policies

actually have the opposite effect (American Psychological Association, 2008; National Association of School Psychologists, 2001). Furthermore, rates of school violence are only assumed to be increasing, but are instead remaining steady, if not decreasing. Unfortunately, such harsh and unfounded school practices are actually impeding positive youth development and opportunities for academic success. Moreover, the execution of zero tolerance policies in many schools has negative implications for students from racial/ethnic minority backgrounds (American Psychological Association, 2008; National Association of School Psychologists, 2001). While tougher discipline philosophies and zero tolerance school policies have been enacted to address school violence, they may actually villainize minority students through racial stereotyping (Gavazzi, Russell, & Khurana, 2009), widening the achievement gap between these students and their white counterparts.

School-to-Prison Pipeline

Racial biases can influence school disciplinary actions and zero tolerance practices, also impacting the academic trajectory of students from racial/ethnic minority populations. This is most commonly seen in the disproportionate amount of school suspensions that minority youth encounter (Raffaele-Mendez et al., 2002; Rausch, & Skiba, 2004; Wu, Pink, Grain & Mole, 1982). Misconceptions about student behavior are not uncommon when dealing with court-involved youth (Cole et al., 2005; Cook et al., 2005; Griffin et al., 2011) and youth of color (Gavazzi, Russell, & Khurana, 2009), and these perceptions can negatively impact students' overall academic success (Cox, 2011). Furthermore, Kayama, Haight, Gibson, & Wilson (2015) illustrate how language used by school staff reinforce the criminalization of these youth. This study found that African American students and their school staff overwhelmingly used legal terminology (e.g., infraction, crime, self-defense) to describe students, student behavior, and the school environment,

further highlighting the current trend toward criminalizing youth in education environments. Additionally, former federal education policies, such as the No Child Left Behind act, systematically stripped under-achieving schools of federal funding, creating an incentive for them to actively rid themselves of troubled students (Noguera, 1995; Sbarra et al., 2001).

After experiencing school suspensions or expulsions, students are even more likely to become involved in the juvenile justice system (Fabelo et al., 2011). The number of out-of-school suspensions that a student receives has been found to be positively correlated with later delinquent activity (United States Department of Education, 2014). Priming minority students for criminal behavior via school exclusionary discipline is commonly referred to as the *school-to-prison pipeline*, where youth facing the most academic and behavioral challenges are funneled out of schools and into the juvenile and criminal justice systems (Michigan Council on Crime and Delinquency, 2013). While these students are actually in need of more school resources and support to be successful, out-of-school suspensions and expulsions have become a tool that serves the sole purpose of alleviating schools of these students and their disruptive behavior (Bock et al., 1998). However, these practices do not address the real issues impacting student behavior and academic achievement, and only serve to criminalize students, widening the educational gap for students who are already facing significant academic disadvantage (Heitzeg, 2014).

Alternative School Discipline Strategies

Emerging trauma-informed practices in school settings emphasize a consistent and well-communicated disciplinary process that maintains appropriate expectations of traumatized students, while also holding students accountable (Cole et al., 2005). However, school policies should promote positive student behavior without compromising student classroom seat time through suspension and expulsion practices. Teachers should also avoid potentially re-

traumatizing responses to student behavior (e.g., yelling, sarcasm, belittling or embarrassing students) as well as engaging in power struggles in the classroom (Wolpow et al., 2009). Student behavior can be improved through positive student-teacher relationships and safe and supportive school settings (Penner & Wallin, 2012). Traditional school discipline practices, such as power struggles may compromise these relationships (Cole et al., 2005), exacerbate student behavior, and create sanctuary trauma—psychological triggers that occur in environments that are supposed to provide safety (Wolpow et al., 2009).

Instead, trauma-informed educational practices suggest that teachers respond with sensitivity and an awareness of how student behavioral issues may be impacted by previous trauma (Cole et al., 2005; Wolpow et al., 2009). School rules and procedures should be consistent, clearly communicated with all staff and students, and should function with the intention of keeping students inside of safe classrooms so that they do not miss much needed instructional time. Moore, Marlene, & Holland (1997) illustrated the value of alternate disciplinary practices that utilize an attachment lens, as they were more effective than traditional punitive actions. A preliminary study of an emerging trauma-informed school discipline intervention, the Monarch Room (MR), indicated that the MR was associated with less student suspension and expulsion over a three-year period (Baroni, Day, Somers, Crosby, & Pennefather, in press). This intervention demonstrated potential for addressing poor student behavior without using exclusionary disciplinary practices that contribute to the school-to-prison pipeline. These initial findings also illustrate the importance of further exploring this sparsely researched topic—evidence-based, trauma-informed alternatives to disciplining court-involved students in our educational system.

Theoretical Framework

This study examines the impact of trauma-informed school disciplinary practice using both attachment (Bowlby, 1969, 1979, 1980, 1988) and sensory integration theory (Ayres, 2005; Dorman et al., 2009). Attachment theory views individual human development and lifespan functioning as the result of early childhood relationships and interactions with an individual's caregiver (Bowlby, 1969, 1979, 1980, 1988). The abuse and neglect commonly experienced by court-involved youth can directly lead to poor attachments to caregivers (American Academy of Pediatrics, 2000; Manning, 2008), and subsequently removing youth from their family home can further impede the formation of healthy attachments (Rushton, Mayes, Dance, & Quinton, 2003). For foster youth who have experienced multiple home placements, unhealthy attachment styles are even more prevalent (Luke & Coyne, 2008; Unrau, Seita, & Putney, 2008). However, attachment theory would also suggest that engaging in strong, healthy, and positive relationships with caring adult figures can adjust maladaptive thinking and behaviors (Bowlby, 1988). Trauma-informed school discipline that encourages strong and supportive student-staff relationships may provide emotionally-corrective experiences, helping to improve students' attachment styles and functioning, and improving their interpersonal development and overall behavior.

Sensory integration refers to a neurological process, whereby an individual organizes sensations from both their own body as well as the surrounding environment (Ayres, 2005). This theory posits that information from the body and environment is sent to the brain through an individual's sensory system (i.e., eyes/sight, ears/sound, skin/touch), and that this information helps them to respond to the demands of the environment. For youth who experience an inability to regulate their own moods and behaviors, perhaps as a result of psychological trauma, this theory suggests that using tools and activities that stimulate and activate particular senses can help youth

to learn to self-soothe and manage those maladaptive behaviors (Dorman et al., 2009). A trauma-sensitive school disciplinary intervention that utilizes such sensory integration techniques may assist court-involved students in increasing self-regulation, thus improving their school behavior and ability to deal with stressful events and triggers in the classroom.

Present Study

This mixed method study builds on the aforementioned pilot study by Baroni, Day, Somers, Crosby, & Pennefather (in press), examining court-involved, female students' use and experiences with the MR, a trauma-informed alternative to traditional suspension/expulsion disciplinary practices. While the pilot study demonstrated that MR use was associated with reductions in school suspensions/expulsions, specific trends in MR utilization over the course of the school have not been examined. The amount of time (i.e. minutes or hours) that students spend out of the classroom due to MR use remains unknown. However, this information is integral to identifying whether the intervention is more conducive to students' class seat-time than the traditional suspension/expulsion practices that have been linked to the school-to-prison pipeline. Therefore, this study seeks to answer the following quantitative research question: (1) Have students demonstrated statistically significant changes in time spent in the MR over the school year-long observation period? The primary qualitative research aim further explored the perceived impact of MR use on student functioning by asking students for their thoughts on the MR, how it impacts their mood and focus in school, and their suggestions for improvement. I hypothesized that time spent in the MR would significantly decrease over the one year observation period.

Methods

Sample

For the quantitative portion of the study, student participants consisted of all MR users who were consistently enrolled between September 2014 and June 2015 at a public, charter high school, located on the campus of a large Midwestern child welfare placement agency and residential unit. This school exclusively serves court-involved, female students, with histories of abuse, neglect, and home removal. Approximately half of the agency's youth are involved through the foster care system, while the other half are involved due to juvenile delinquency. There were 141 students (35% of the total school population) who made at least one visit to the MR during the school year. However, the majority of students were residents in the residential unit, which has an average length of stay of 4-6 months, typical of the rate of turnover in residential placement units across the U.S. (Sickmund, Sladky, Kang, & Puzzanchera, 2011). Therefore, only 71 students attended the school for the entire duration of the observation period and were included in the analysis. The majority of participants (N=71) were African-American (80%), followed by White (15%), then Hispanic (5%). There was also a majority of underclassmen (i.e., 9th and 10th grade students) who utilized the MR. These demographics are consistent with pilot study findings, as African American and underclassmen students were previously found to more commonly use the MR (Baroni, Day, Somers, Crosby, & Pennefather, in press).

For the qualitative portion of the study, participants consisted of 23 students, recruited through random sampling among the entire school population. Approximately 70% of these participants utilized the MR at least once during the observation period, and the majority were African-American (70%), followed by White (30%). All quantitative and qualitative participants ranged in grade (9-12 grade) and age (14-18 years old). Participant demographics were generally

consistent with the racial makeup of youth in the surrounding urban communities adjacent to the school of interest (Data Driven Detroit, 2013). Table 5 provides all participant demographic information for this study.

Table 5

Participant Demographics

	N	%		N	%
Quantitative Sample	71	100	Qualitative Sample	23	100
Race			Race		
African American	57	80	African American	16	70
White	10	15	White	7	30
Hispanic	4	5			
Grade			Grade		
9 th	6	8	9 th	5	22
10 th	33	46	10 th	5	22
11 th	16	23	11 th	6	26
12 th	16	23	12 th	7	30

Note. Racial comparison between samples
(excludes Hispanic students): $\chi^2(2)=3.45, p=.18$

Description of Intervention

The intervention consisted of the Monarch Room, designed as an alternative to traditional school discipline practices to increase student attendance and seat time in class. Named after the school's mascot, the monarch butterfly, the MR is a designated classroom, available throughout the school day, and managed by trauma-trained staff to provide positive support to help students de-escalate when needed. In addition to staff, the room is equipped with sensory integration tools, such as sensory puzzles, weighted blankets, fidget toys, a stationary bicycle, and other exercise equipment, to assist in the management of mood and emotions, and to also teach students how to use large and small motor skills to de-escalate and self-soothe. Sensory tools were selected through consultation with occupational therapy (OT) professionals, who also trained school staff on how to properly use them.

When students' emotional states or behavior begin to interfere with learning in the classroom, they may be referred by school staff or may self-refer themselves to the MR. Teachers and school staff are intentional about emphasizing the supportive nature of the MR, encouraging students to view it as resource rather than a punitive action. Once in the MR, brief intervention strategies, including problem solving, talk therapy, and sensory-motor activities are utilized to assist students in regulating their emotions in order to return to the classroom in 10 minutes or less. All student visits to the MR are documented by school staff in tracking logs, including the reason for the visit, time student arrived, time student returned to class, and the strategies used to assist the student. This data is regularly reviewed by school administration to improve policy and practice around MR implementation and efforts are made to maintain intervention consistency.

Data Collection

This study utilized a secondary analysis of school administrative data and qualitative data gathered using a convergent parallel mixed method study design (Creswell, 2014). Information from MR logs was linked to administrative data from the school's PowerSchool system, and then examined to assess changes in MR use over the one-year observation period.

Independent variables. The major independent variable of interest was time (over the course of the school year). This was measured in 3 levels of time points, as the first third of the school year (September 2014 to December 2014), second third of the school year (January 2015 to March 2015), and final third of the school-year-long observation period (April 2015 to June 2015). Each time point was approximately 12 weeks long.

Dependent variables. The main dependent variable for this study was time spent in the MR. This was measured as the average amount of minutes spent in the MR during each time point.

Qualitative approach. The phenomenological approach was also used to inform the development of a semi-structured interview protocol, asking students to respond to open-ended questions regarding their experiences with the MR and perspectives on how it has influenced their mood and behavior. See Appendix D for full interview protocol. Students were provided with blank paper to write and share their comments with the facilitator in the event that they prefer not to verbalize their thoughts during the focus group. Three focus groups were held for approximately one hour, convening at the school building in June of 2015. Approval was received from the Institutional review board at Wayne State University, and school administrators obtained informed consent/assent from students during the school registration process.

Data Analysis

Quantitative data analysis. Administrative data were entered into SPSS 22 statistical software and descriptives, normality, and sphericity were examined. Data met the assumptions of normality and sphericity, and a one-way repeated measures analysis of variance was used to explore changes in the dependent variable, average minutes spent in the MR, over the 3 time points (the independent variable). The effect size was calculated using eta-squared in order to devise the strength of the change in MR use over time.

Qualitative data analysis. Focus groups were audio-recorded and transcribed verbatim. Transcripts were coded independently by the researcher, using reflexive bracketing for confirmability (Padgett, 2008). Then, transcripts were uploaded into NVIVO 10 (QSR International, 2012) and content was analyzed for themes using constant comparison methods to look for commonalities, differences, and main ideas (Dye et al., 2000). Although uncommon to phenomenology, focus group data can be useful with this approach when group interaction, subject matter, and group language are accounted for during analysis (Palmer, Larkin, de Visser, &

Fadden, 2010). This qualitative approach allowed the researcher to explore students' shared experiences and unique perspectives as experiences are contradicted or corroborated during group interaction (Bradbury-Jones, Sambrook, & Irvine, 2009).

In Vivo coding uses the direct language of the participants as codes rather than researcher-generated words and phrases (Saldaña, 2009). Therefore, the analysis was grounded in the voices of the student participants. The results were reviewed by a subsample of the focus group participants, providing a member-check on the validity and interpretation of the data. Quantitative and qualitative data were interpreted together to assess the overall association between the implementation of the MR intervention and student functioning.

Findings

Quantitative results. Administrative data show that a total of 9 students were suspended from school during the observation period. Of this small number of suspensions, only 2 students were MR users. This demonstrates that the majority of students suspended were non-MR users, and also indicates that the majority of MR users returned to class—instead of escalating to the point of suspension—after their MR visit.

The repeated measures analysis of variance was found to be statistically significant at an alpha level of 0.05, $F(2, 140) = 11.44$, $p < 0.01$. A Bonferonni post hoc test indicated that the mean time spent in the MR from September to December ($M = 24.79$, $SD = 32.76$) was statistically significantly lower than the mean time spent from January to March ($M = 53.00$, $SD = 54.78$), $p < 0.01$. See Table 6. The post hoc test also indicated that the mean time spent from January to March was higher than the mean time spent from April to June ($M = 39.20$, $SD = 35.30$), but was not statistically significant. Further observation would be useful to see if time spent in the MR might continue to decrease if given a longer observation period. The mean time in December was also

statistically significantly lower than the mean time in June at $p < 0.05$. See Table 7. Therefore, I failed to reject the null hypothesis, as one can conclude that there was a significant increase in student MR use over the observation period, rather than a decrease. The eta-squared value for change over time was 0.035, demonstrating a small to medium effect size.

Table 6

MR Use by Minutes (N=71)

	Mean Minutes	SD
December 2014	24.79	32.76
March 2015	53.00	54.78
June 2015	39.20	35.30
F(2, 140) = 11.44, $p < 0.01$		

Table 7

Changes in MR Use (N=71)

From	To	Mean Difference in Minutes
December 2014	March 2015**	-28.21
	June 2015*	-14.41
March 2015	December 2014**	28.21
	June 2015	13.80
June 2015	December 2014*	14.41
	March 2015	-13.80

* $p < 0.05$; ** $p < 0.01$

Qualitative findings. Students selected to participate in focus groups described their perception of how the MR impacts student functioning, mood, and classroom focus, and also provided suggestions for improvement. Findings from the qualitative data demonstrate a distinct paradox, where participants view the MR as a strong resource, but also a potential crutch for students. Analysis of the data yielded the most commonly reported themes, as reported below.

Theme 1: “It helps you stay still”. The majority of focus group participants reported that the MR was helpful or assisted them in improving their behavior, mood, or focus upon returning to the classroom. Participants reported that the methods of engagement used by MR support staff, as well as the intervention activities, and sensory tools (e.g., sensory puzzles, weighted blankets, exercise equipment) in the MR help students to manage difficult emotions and maladaptive behavior. The following quote illustrates how this intervention assists in improving student functioning:

In the Monarch Room, she [MR staff person] kinda gives you space to yourself, and then she asks you, ‘Are you ready to talk? Do you want to talk?’. Other than that, she just gives you space...there’s puzzles in there to help get your mind off of different things...and then she allows you to take that stuff into other classrooms too. So you got people, like me, who always gotta move....you can concentrate on that [puzzles] and it helps you stay still.

Theme 2: “It’s a good thing to have the Monarch Room here”. Participants also expressed that the MR helps to mediate conflict and distraction in the classroom. When students become escalated, demonstrating disruptive classroom behavior, the MR provides an outlet for the affected student, while also stabilizing the classroom environment so that other students can continue to learn. One participant provided the following quote to express this effect:

I feel like, in some cases, it’s a good thing to have the Monarch Room here in this specific environment...the girls that are disruptive and got attitudes and just set a negative mood in the room can get away from everybody...don’t nobody want to be around that....So sometimes it’s just like you need to just give them a limited time to be in there [the MR], and tell them to get their self together. Do whatever they need to do for fifteen, twenty minutes, and go back to class.

Theme 3: “You gotta learn to work your problems out”. However, participants also discussed the potential for negative student behavior to persist after experiencing the intervention. While students identify the MR as being helpful for addressing their present mood and behavior,

they are unclear on how the social and emotional skills that they learn in the MR relate to future settings, when the MR will no longer be available to them. One student expressed this by stating:

Eventually you gotta learn to work your problems out cause when you turn into an adult you ain't gonna have that place or that counselor between you and that other person to help y'all work your problems out. Y'all adults and you are going to have to learn how to do that on your own.

Theme 4: “It’s up to the girls”. Participants also provided suggestions on how to improve the MR to better serve students’ needs. These improvements included allowing students to remain in the MR for longer than the prescribed duration, adding media devices to listen to music, and providing a wider selection of exercise equipment to release negative energy. However, participants most prominently reported student buy-in as a factor to improve the utilization of MR services. This is illustrated in the following quote:

It’s up to the girls [the students]. The Monarch Room, it’s there for you to use it, but once you go in there and you not trying to make your mood good or whatever—you just trying to keep that attitude—it’s not going to be helpful to you.

Discussion

The aim of this mixed method study was to assess how court-involved students utilized a trauma-informed school disciplinary approach, as well as how they experienced and perceived the intervention. The study quantitatively examined whether students demonstrated significant changes in time spent in the MR over the course of the school year. It also qualitatively explored the perceived impact of MR use on student functioning. Overall, quantitative data show that students consistently used the MR over the 2014-2015 school year, as use increased over the observation period and suspensions remained low. Qualitative findings also indicate that students generally found it to be an effective tool in helping them to improve their mood and behavior in school. Four prevalent themes emerged from focus group data, including: (1) It Helps you Stay

Still; (2) It's a Good Thing to Have the Monarch Room Here; (3) You Gotta Learn To Work Your Problems Out; and (4) It's Up to the Girls.

Altogether, the data suggest further potential for the use of trauma-sensitive school disciplinary methods in schools that serve court-involved students. In particular, the intervention's attachment-driven methods and sensory integration activities were perceived by students as being helpful in improving students' moods, and assisting with de-escalation and self-soothing. Students described positive relationship-building with MR staff, explaining how such connections helped them to address difficult emotions, which impacted their behavioral responses throughout the day. Students also discussed how sensory tools provided an outlet for them to address triggers, hyperactivity, and aggression, allowing them to manage their own emotions before and during their return to the classroom.

However, the data also leave some lingering questions regarding the general trend of MR utilization, as use increased drastically by the middle of the school year, then slightly decreased by the end of the year. On one hand, the increase in MR use may be attributed to students experiencing an increasing amount of stress and a genuinely greater need for the MR over the course of the school year, as academic demands became more pronounced. On the other hand, students might have spent less time in the MR during the first time point due to their lack of initial trust and connection to MR staff, as positive attachments had not yet formed. Youth who have experienced trauma often demonstrate difficulty with trust and interpersonal relationships (Cole et al 2005; Cook et al., 2005), which may have impacted initial MR utilization. By the second time point, students might have built relationships with MR staff and begun to recognize the intervention as a resource, therefore utilizing the intervention more often. Then, as students learned new skills for de-escalation and became better equipped to apply these skills, their use of

the MR—albeit not statistically significant—began to decrease during the final time point.

Additionally, the availability of the MR intervention throughout the school day provided a trauma-sensitive option for managing classroom conflict, briefly removing escalated students and allowing others to resume learning. While these students significantly increased their MR use from time point 1 to time point 2, it is still highly likely that they experienced more in-class time than they would have under the traditional suspension/expulsion protocol. This is an important distinction, as suspensions in this school setting have generally ranged from 1 to 10 school days, while MR use is only, on average, 10 to 20 minutes of class time, per visit. Students using the MR were able to return to class, remaining on the school grounds and receiving positive support from school personnel, rather than being sent back to their home, neighborhood, or residential unit for the duration of the school day or week. Therefore, the MR may be a more education-friendly option than school suspension and expulsion as a school disciplinary strategy for negative student behavior.

Nevertheless, steps need to be taken to help students to make connections between the MR intervention and their future behavior. Theme 3 highlights how some students are struggling to relate skills learned in the MR to settings outside of school. For example, MR staff can initiate conversations with students about how sensory activities used in the MR (e.g., riding the stationary bicycle when triggered) can be translated into other academic or professional settings later in life (e.g., taking a walk on a lunch break when upset). MR staff can also assist students in developing buy-in and gaining ownership of the MR intervention. Students need to understand its purpose and the potential benefits of such a cultural shift toward trauma-sensitive discipline. The challenge may lie in helping students to develop such ownership, given that student buy-in requires a level of trust and relationship-building that might be initially difficult for this population due to their

issues with complex trauma and attachment.

Strengths & Limitations

As a major strength, this study utilizes students' perceptions to examine a trauma-informed school disciplinary intervention. This is one of the first studies to explore trauma-informed school discipline and to also utilize the perspectives and lived experiences of the students themselves to inform the intervention. However, there are limitations that should also be noted. These include the inability of the researcher to assess the degree to which MR staff adhered to the intervention curriculum and fidelity of the model over time. Also, the study examines the quantity of time spent in the MR, but cannot account for the quality of each individual visit to the MR. Factors such as student-staff match and quality of the relationship between each student and MR staff member was not examined. While efforts were made to maintain consistent intervention implementation, extraneous school changes and other events in the participants' residential and social environment could not be accounted for in this study. Finally, the MR has limitations on how many students it can accommodate at one time. Therefore, if any students were ever turned away once that capacity was reached, those occasions were not accounted for in this study.

Implications for Policy and Practice

Given the consistent efforts across the U.S. to reform the school-to-prison pipeline, schools that serve court-involved students should implement trauma-sensitive disciplinary practices and policies. Such an emphasis on may serve to shift the school culture and assist educators in closing the achievement gap between court-involved youth and their non-court-involved peers. Schools may need to re-evaluate the use of traditional forms of school discipline and zero tolerance policies, which exacerbate academic and socioemotional outcomes among youth in this population (American Psychological Association, 2008; National Association of School Psychologists, 2001;

United States Department of Education, 2014). School administrators should explore their school's readiness to implement and sustain trauma-informed strategies for addressing negative student behavior, including attachment-driven solutions to encourage strong student-staff relationships and sensory integration tools to support student self-regulation. As seen in this study, both teachers and students will utilize such suspension alternatives when they are available.

This study and its focus on school discipline reform may also be relevant to the emerging discourse on culturally-responsive school practice and pedagogy, which encourages educational environments to embrace students' cultures as an embedded part of their learning (Ladson-Billings, 1995). Similar to the participants in this study, racial/ethnic minority youth are generally overrepresented in court-involved student populations (Sickmund, Sladky, Kang, & Puzzanchera, 2013; U.S. Department of Health and Human Services, 2013b), and schools should consider culturally-sensitive, trauma-informed discipline as a method of engaging such youth. Behavioral interventions that are sensitive to students' adverse life experiences, rather than based in racial stereotyping and biased perceptions, may build a school climate where minority students feel more valued and understood by school staff. Also, acknowledging the unique experiences of female students of color, and their gender-related needs may also help to improve outcomes. Ultimately, moving away from punitive and exclusionary practices may allow for greater flexibility to integrate cultural elements that might be more effective while also keeping students in school.

Conclusion

School staff, policies, and disciplinary practices can greatly impact the academic, social, and emotional development of students. In particular, the persistent and unique challenges that court-involved students face make schools an even more important institution with the potential for both academic growth and socioemotional healing. However, status quo responses to negative

student behavior are simply detrimental to students' educational well-being. As schools endeavor to educate and care for their students, trauma-informed discipline may meet the urgent need that exists in our educational system today. Using trauma-sensitivity, schools can create environments where court-involved students can become engaged, remain connected, and even dare to succeed.

CHAPTER 5 CONCLUSION

This three-part dissertation explores the academic experiences of trauma-exposed youth and evaluates the relationship between a trauma-informed teaching intervention and students' educational well-being. Findings from this dissertation project illustrate the potential for trauma-informed practices and policies in schools serving court-involved and trauma-exposed, female students. In chapter 2, student perceptions and experiences were used to explore the use of trauma-informed teaching practices. In chapter 3, students' trauma symptoms and self-esteem were directly examined in relation to these practices. Finally, chapter 4 highlights student utilization of a trauma-informed school discipline intervention, the Monarch Room (MR). These three studies provide insight into various aspects of how trauma-informed school strategies influence students and their relationship to school.

Taken altogether, chapters 2, 3, and 4 provide a promising direction for improving the academic experience of trauma-exposed youth. Findings revealed that students in a trauma-informed school environment described more positive and corrective relationships with school staff when compared to students at a comparison school. Also, trauma-informed teaching was associated with reduced trauma symptoms in students, with youth self-esteem functioning as a moderator of student trauma reduction. Finally, students increased their use of the MR over the course of the school year, reported positive perceptions of the intervention, and provided suggestions for improvement. This chapter will identify remaining considerations, as well as implications for future research on trauma-informed school practice to improve educational well-being. The following three issues emerged in relation to future research: (1) Tackling the school-to-prison pipeline, (2) Translation to general education settings, and (3) School & education policy reform.

Tackling the School-to-Prison Pipeline

Literature has given considerable attention to the prevailing issues present in the school-to-prison pipeline (Gavazzi, Russell, & Khurana, 2009; Heitzeg, 2014; Kayama, Haight, Gibson, & Wilson, 2015), and ways that current school practice exacerbates student outcomes (Fabelo et al., 2011; United States Department of Education, 2014). Findings from this dissertation project suggest that school interventions that acknowledge the adverse experiences of students may have the potential for improving student behavior, building a positive learning climate, and reducing student exclusion from school, moving our educational system away from these detrimental trends. In chapters 2 and 4, students' perceptions provided deeper context for how such trauma-sensitive strategies impact their mood and behavior, and overall learning environment. However, research is only beginning to explore the connections between trauma-informed interventions and student outcomes. Experimental and quasi-experimental study of interventions is necessary to establish the causal impact of trauma-informed teaching, and longitudinal study may also be appropriate for examining youth progress into adulthood. Future research should investigate how trauma-informed teaching practices impact, not just student perceptions and well-being, but also specific youth behavior, school attachment, inclination toward prosocial attitudes versus delinquency, academic achievement, and development of other social and emotional skills that can reverse the pipeline and change students' trajectories.

Translation to General Education Settings

Schools across the U.S. are beginning to recognize the value of social and emotional learning, as several school districts, particularly in urban communities, have started exploring these strategies (Blad, 2015; CASEL, 2015). Literature has also emerged on how to implement trauma-informed practices in schools (Australian Childhood Foundation, 2010; Cole et al., 2005; Perry,

2009; Wolpow et al., 2009), and chapters 2, 3, and 4 provide findings on how a particular trauma-informed intervention has functioned in an alternative school environment for court-involved, female students. However, there continues to be a dearth of empirical evidence to support specific strategies and practices in traditional school environments. Future research should test whether the trauma-informed intervention, as described in this project, has similar outcomes in traditional school settings, and how to transfer these practices into schools with a different student makeup. For example, studies should evaluate the experiences of trauma-exposed and court-involved male students as well as students in mixed-gender school settings and younger student populations (i.e., elementary and middle school students) in traditional schools. This line of research might also benefit from specific qualitative exploration and quantitative measurement of cultural-responsiveness and how racial/ethnic distinctions between students, peers, and school staff are addressed by the intervention in traditional education settings.

School & Education Policy

Literature has explored the impact of federal education policy, such as the No Child Left Behind act, which incentivized the expulsion of low-scoring students (Noguera, 1995; Sbarra et al., 2001). Recent legislative changes to this policy through the new Every Student Succeeds act, provides schools with greater flexibility in addressing student achievement gaps while still holding them accountable to their most troubled students (Camera, 2015). Given these changes, research will need to examine the impact of state and district-wide school policies on trauma-exposed students and their educational well-being. As discussed in Chapter 4, trauma-informed disciplinary policies have served to reduce student suspensions (Baroni, Day, Somers, Crosby, & Pennefather, in press) and has been positively perceived by students. Still, research should further investigate the implementation of trauma-informed school policies, such as new disciplinary

procedures and the allocation of supports and resources to better meet the needs of traumatized students.

Future Research

Moving beyond this dissertation project, I intend to pursue the aforementioned areas of study. More specifically, I plan to examine the following research questions:

- Does the trauma-informed teaching intervention impact student trauma symptoms when compared to students in a non-trauma-informed school environment?
- Does the trauma-informed teaching intervention impact students' school attachment, attitudes toward delinquency, and orientation toward the future, when compared to students in a non-trauma-informed school environment?
- Does the trauma-informed teaching intervention impact student academic achievement when compared to students in a non-trauma-informed school environment?
- How do male students perceive and experience the trauma-informed teaching intervention?
- How do students perceive and experience the trauma-informed teaching intervention with regard to cultural responsiveness?
- What do school administrators view as barriers to the implementation of trauma-informed practice in schools?

APPENDIX A STUDENT SCHOOL PERCEPTIONS FOCUS GROUP INTERVIEW PROTOCOL

Pre-Intervention Focus Groups

1. If your mood changes throughout the day, what makes it change?
2. When I am having a bad moment at school, what helps is:
3. When I am having a bad moment at school, what makes it worse is:
4. How do your teachers and the school staff react to you when you are having a bad moment at school?
5. How would you describe your reaction when you are really upset at another student or staff member at school?
 - a. Do you fight (verbally or physically) or do you think through or problem solve before you react?
 - b. Do you avoid the situation/person?
6. Are you sensitive to touch, light, or sound?
7. If you were principal for a day, what advice would you give to teachers to work with students like yourself?

Post-Intervention Focus Groups

Same as above, plus:

1. In what ways have you seen teachers change in regards to how they react to you and other students?

APPENDIX B CHILD REPORT OF POST-TRAUMATIC SYMPTOMS MEASURE

Please circle the response that best reflects your feelings.	None	Some	Lots
1. I daydream.	0	1	2
2. I “space out” when people are talking to me.	0	1	2
3. I find it hard to concentrate.	0	1	2
4. I think about bad things that have happened.	0	1	2
5. I try to forget about bad things that have happened.	0	1	2
6. I avoid reminders of bad things that have happened.	0	1	2
7. I worry that bad things will happen.	0	1	2
8. I do special things that make sure nothing bad happens.	0	1	2
9. I do some things that I’m probably too old for.	0	1	2
10. It’s hard for me to go to sleep at night.	0	1	2
11. I have bad dreams or nightmares.	0	1	2
12. I get headaches.	0	1	2
13. I get stomachaches.	0	1	2
14. I feel sick or have pains.	0	1	2
15. I feel tired or have low energy.	0	1	2
16. I feel all alone.	0	1	2
17. I feel strange or different than other kids.	0	1	2
18. I feel like there’s something wrong with me.	0	1	2
19. I feel like it’s my fault when bad things happen.	0	1	2
20. I’m a jinx or bad luck charm.	0	1	2
21. I feel sad or depressed.	0	1	2
22. I don’t feel like doing much.	0	1	2
23. Things make me upset or mad.	0	1	2
24. I’m on the lookout for bad things that might happen.	0	1	2
25. I am nervous or jumpy.	0	1	2

APPENDIX C ROSENBERG SELF-ESTEEM SCALE

Please circle the response that best reflects your feelings.	Strongly Disagree	Disagree	Agree	Strongly Agree
1. On the whole, I am satisfied with myself.	1	2	4	5
2. At times I think I am no good at all.	1	2	4	5
3. I feel that I have a number of good qualities.	1	2	4	5
4. I am able to do things as well as most other people.	1	2	4	5
5. I feel I do not have much to be proud of.	1	2	4	5
6. I certainly feel useless at times.	1	2	4	5
7. I feel that I'm a person of worth.	1	2	4	5
8. I wish I could have more respect for myself.	1	2	4	5
9. All in all, I am inclined to think that I am a failure.	1	2	4	5
10. I take a positive attitude toward myself.	1	2	4	5

APPENDIX D MONARCH ROOM FOCUS GROUP INTERVIEW PROTOCOL

1. What do you think about the Monarch Room?
 - a. Is it helpful?
2. Does your mood change after using the Monarch Room?
3. When you return to class are you better able to focus on the work?
4. If you think changes are needed, what would you change?
 - a. What would you keep?
 - b. What would you take away?

APPENDIX E WAYNE STATE UNIVERSITY INSTITUTIONAL REVIEW BOARD APPROVAL



IRB Administration Office
87 East Canfield, Second Floor
Detroit, Michigan 48201
Phone: (313) 577-1628
FAX: (313) 993-7122
<http://irb.wayne.edu>

CONCURRENCE OF EXEMPTION

To: Angelique Day
Social Work Instruction Un

From: Dr. Scott Millis _____
Chairperson, Behavioral Institutional Review Board (B3)

Date: October 30, 2012

RE: IRB #: 107312B3X
Protocol Title: Assessing the Impact of Trauma on Learning Among a Sample of Alternative Education Students Who Are in Residential Placement
Sponsor:
Protocol #: 1210011408

The above-referenced protocol has been reviewed and found to qualify for **Exemption** according to paragraph #4 of the Department of Health and Human Services Code of Federal Regulations [45 CFR 46.101(b)].

- Protocol Summary Form (received in the IRB Office 10/22/12)
- Protocol (received in the IRB Office 10/22/12)
- A waiver of consent has been granted according to 45CFR 46 116(d) and justification provided by the Principal Investigator in the Protocol Summary Form (data used for this study will be a secondary data pull of de-identified school records). This waiver satisfies: 1) risk is no more than minimal, 2) the waiver does not adversely affect the rights and welfare of research participants, 3) the research could not be practicably carried out without the waiver, and (4) Providing participants additional pertinent information after participation is not appropriate.

This proposal has not been evaluated for scientific merit, except to weigh the risk to the human subjects in relation to the potential benefits.

- Exempt protocols do not require annual review by the IRB.
- All changes or amendments to the above-referenced protocol require review and approval by the IRB **BEFORE** implementation.
- Adverse Reactions/Unexpected Events (AR/UE) must be submitted on the appropriate form within the timeframe specified in the IRB Administration Office Policy (<http://irb.wayne.edu/policies-human-research.php>).

NOTE: Forms should be downloaded from the IRB Administration Office website
<http://irb.wayne.edu> at each use.



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NOTICE OF EXPEDITED AMENDMENT APPROVAL

To: Angelique Day
Social Work Instruction Un

From: Dr. Scott Millis S. millis PhD/5B
Chairperson, Behavioral Institutional Review Board (B3)

Date: April 25, 2013

RE: IRB #: 107312B3X
Protocol Title: Assessing the Impact of Trauma on Learning Among a Sample of Alternative Education
Students Who Are in Residential Placement
Funding Source:
Protocol #: 1210011408

Expiration Date:

The above-referenced protocol amendment, as itemized below, was reviewed by the Chairperson/designee of the Wayne State University Institutional Review Board (B3) and is APPROVED effective immediately.

- Key Personnel Addition: Shantel West (Graduate Student Assistant)

WAYNE STATE UNIVERSITY

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NOTICE OF EXPEDITED AMENDMENT APPROVAL

To: Angelique Day
Social Work Instruction Un

From: Dr. Deborah Ellis or designee C. Zulawski / AB
~~for~~ Chairperson, Behavioral Institutional Review Board (B3)

Date: September 30, 2014

RE: IRB #: 107312B3X

Protocol Title: Assessing the Impact of Trauma on Learning Among a Sample of Alternative Education Students Who Are in Residential Placement

Funding Source:

Protocol #: 1210011408

Expiration Date:

The above-referenced protocol amendment, as itemized below, was reviewed by the Chairperson/designee of the Wayne State University Institutional Review Board (B3) and is APPROVED effective immediately.

- Protocol - Data Collection methods modified to reflect addition of Vista Meadows Academy for data collection of de-identified survey data for use as a comparison group.
- Protocol - Change in Accrual - Accrual for Clara B. Ford increased from 90 to 280 participants. Accrual for Vista Meadows Academy will be 100 participants.

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ABSTRACT**EVALUATING TRAUMA-INFORMED EDUCATIONAL PRACTICES WITH
TRAUMA-EXPOSED, FEMALE STUDENTS**

by

SHANTEL DEANNA CROSBY**May 2016****Advisor:** Dr. Angelique Day**Major:** Social Work**Degree:** Doctor of Philosophy

Youth who have experienced psychological trauma, such as court-involved youth, encounter unique challenges and barriers to their academic success (Burley & Halpern, 2001; Courtney et al., 2001; Courtney, Terao & Bost, 2004; Pecora et al., 2005). For court-involved students, many of whom come from racial/ethnic minority backgrounds (Brandt, 2006; Lawrence & Hesse, 2010; U.S. Department of Health and Human Services, 2013b), a school's response to student behavior can further complicate these challenges (Cole et al., 2005). Unfortunately, little research exists on the educational well-being of female students in this population (Crenshaw, Ocen, & Nanda, 2015) and trauma-informed educational practices have not been extensively tested. In response, this three-paper study examined the use of a trauma-informed teaching intervention in a school that exclusively serves court-involved, female students. First, I qualitatively explored the perceptions and experiences of students at both a trauma-informed school (N=42) and a non-trauma-informed comparison school (N=34). Next, I quantitatively assessed the associations between the intervention and 109 students' trauma symptoms and self-esteem over the first three years of implementation of the trauma-informed intervention. Finally, I used mixed methods to examine 71 students' use and perceptions of the Monarch Room (MR),

the school's trauma-informed alternative to suspension/expulsion practices. Findings illustrate more positive student experiences in the trauma-informed school environment, decreased trauma symptoms across three years of intervention implementation, increases in student use of the MR, positive student perceptions of the MR, and suggestions for MR improvement. Implications for policy and practice are addressed, along with considerations for future research.

AUTOBIOGRAPHICAL STATEMENT

Shantel Crosby, LMSW is a fully licensed clinical and macro social worker and a former mental health therapist in a metro-Detroit community mental health agency. As a practitioner, she provided home-based, outpatient, and school-based mental health services to children and families. Throughout her doctoral program, she has worked in mixed-method research on the educational well-being of court-involved youth (i.e., youth in the foster care and/or juvenile justice system). She also served as staff of the Transition to Independence Program (TIP), an organization designed to increase college access and retention rates of foster care youth at Wayne State University. Her on-going research interests include well-being and adverse childhood experiences among youth who are court-involved or at risk of court-involvement—particularly among youth of color. She is also interested in examining innovative practices and interventions utilized within child-serving systems to improve youth outcomes.