

A Trauma- Informed Approach: what is it and why should you bother?

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Who needs to be where?

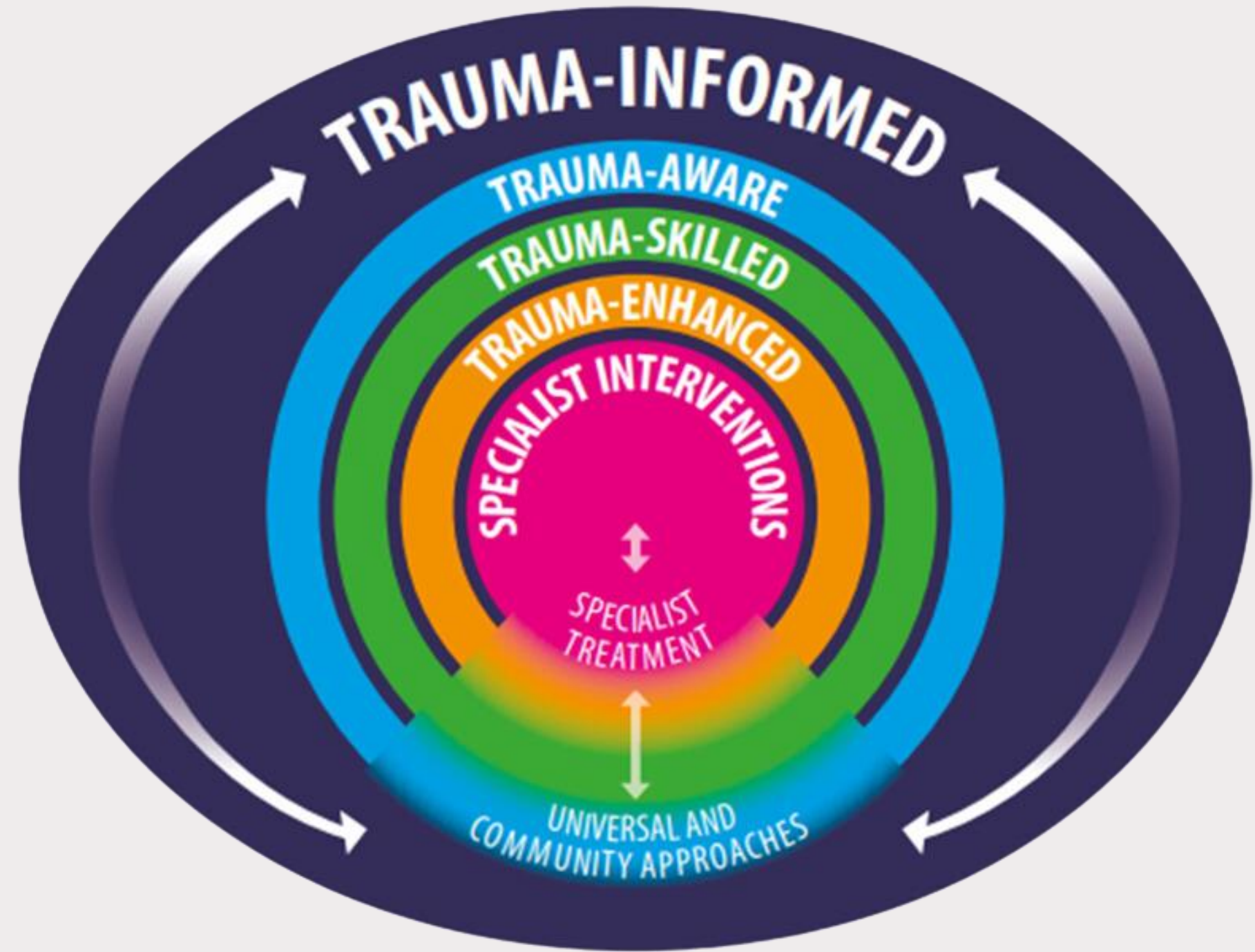


Diagram from ACE Hub Wales



**Where do you think you
are?**



Basic Principles

Trauma Informed Wales Framework (2022):


- **A universal approach that does no harm**
- **Person centred**
- **Relationship-focused – compassionate and nurturing**
- **Resilience and strengths focused**
- **Inclusive**

From my own practice:

- Do no harm (but take no shit) – care and critical kindness
- Mistakes will be made – acknowledge, make changes
- Ti as practice of social justice and equity
- Discomfort as space of learning – the balancing act
- Trauma-informed pedagogy as practice of recognising students as whole persons in full humanity

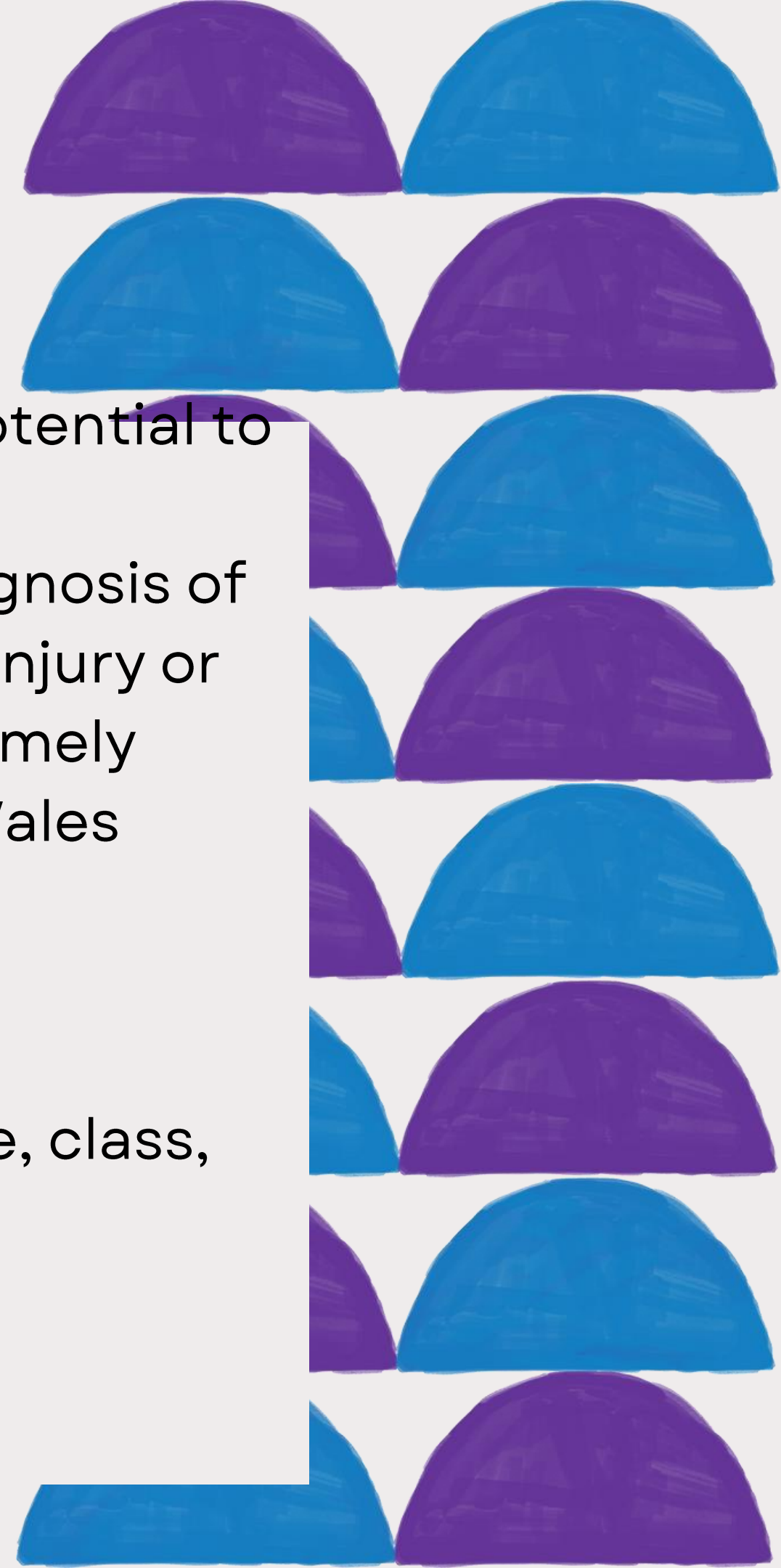
A vertical column of interlocking, semi-circular shapes in red, yellow, blue, and green, arranged in a repeating pattern. The shapes are stylized and overlap each other.

Another set of principles

- **Realize** the ubiquitous nature of trauma and its manifestation in humans, society, and history;
 - **Recognize** the signs and symptoms of trauma in others;
 - **Respond** to trauma by incorporating what we know about trauma into effective policies, procedures, and practices;
 - **Resist retraumatization** in others (adapted from Gunderson, Mrozla-Toscano, and Mao 2023)
- 
- A vertical column of interlocking, semi-circular shapes in green, blue, yellow, and red, arranged in a repeating pattern. The shapes are stylized and overlap each other.

What / Where

- “any experience that is unpleasant and causes, or has the potential to cause, someone distress and/or anxiety ... Not all traumatic experiences would fall into the categories required for a diagnosis of PTSD or complex PTSD (actual or threatened death, serious injury or sexual violence), but all traumatic experiences may be extremely distressing and significantly impact the person” (ACE Hub Wales 2022)
 - Vicarious trauma
 - Secondary trauma
- Reflect on intersecting systems of oppression – gender, race, class, dis/ability, sexuality, migration status
- Students arrive having been exposed
- University as site of traumatising events
- Staff too





Trauma-informed Pedagogy

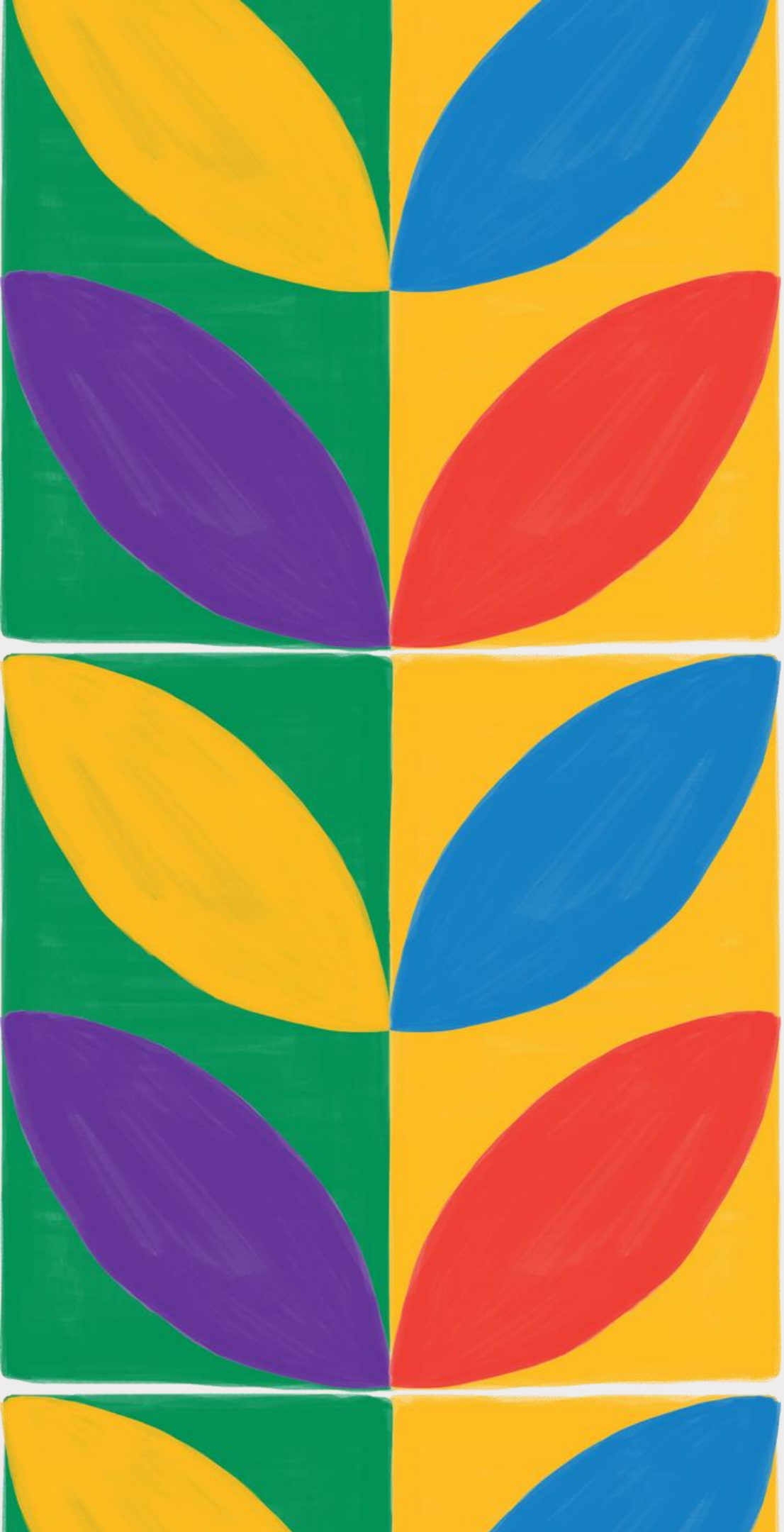
- "Whether or not we consider the affect and effects of trauma on pedagogy is a choice only for those whose lives are not already shaped by trauma. For us, there is no choice; our experiences of trauma shape how we move through the world. The consideration of trauma in our classroom is not a question of pedagogy or academic labor. It is not about academic freedom, the latest administration of neoliberal policy, or even a debate at all. Teaching with trauma is our daily life. We do it everyday, because we have to if we want to survive in the academy." (Carter 2015)

- "To be trauma-informed, in any context, is to understand how violence, victimization, and other traumatic experiences may have figured in the lives of the individuals involved and to apply that understanding to the provision of services and the design of systems so that they accommodate the needs and vulnerabilities of trauma survivors" (Carello and Butler 2014)



Where in your work do you ...

- **encounter 'difficult' topics?**
- **encounter people living with trauma?**



Why Bother?

- **"We know of no evidence to indicate that experiencing fear, horror, and helplessness are precursors to effective learning or that the development of PTSD symptoms is evidence of effective teaching"** (Carello and Butler 2014 p160)
- We don't need to know before we make changes
- "For the most part, you may never know if a student's performance in your class is driven by trauma, their understanding of the material, learning capabilities, or something completely unrelated (and it is not your job to know)" (Miller, Yogn, and Trochmann 2024, p40)



Which of these have you noticed in your students?



Impacts of Trauma

- Mental health crises
- Poor attendance
- Disengagement
- Poor performance
- Dropping out
- Loss of focus
- Reduced ability for abstract and/or critical thinking
- Reduced memory
- Poor concentration
- Feeling overwhelmed
- Fear of taking chances
- Fear of new situations
- Anxiety
- Outbursts of anger
- Helplessness
- Dissociation
- Migraine
- Stress
- Passivity
- Outbursts of aggression

AUTHOR'S NOTE

This book mentions childhood neglect and anti-autistic ableism. If these topics are sensitive for you, please read with care. (And feel safe in the knowledge that joy triumphs in the end.) You should also know that, while writing this book, I elected to ignore the existence of COVID-19. I hope this book provides some form of escape.

We would encourage any viewers or readers who have been affected by the content of this story to get in touch with Samaritans, who can listen and offer confidential support 24/7. You can call Samaritans free of charge on 116123, or find the details for your local branch at www.samaritans.org.

Calls to Samaritans' helpline do not show up on phone bills.

What is the purpose of these?

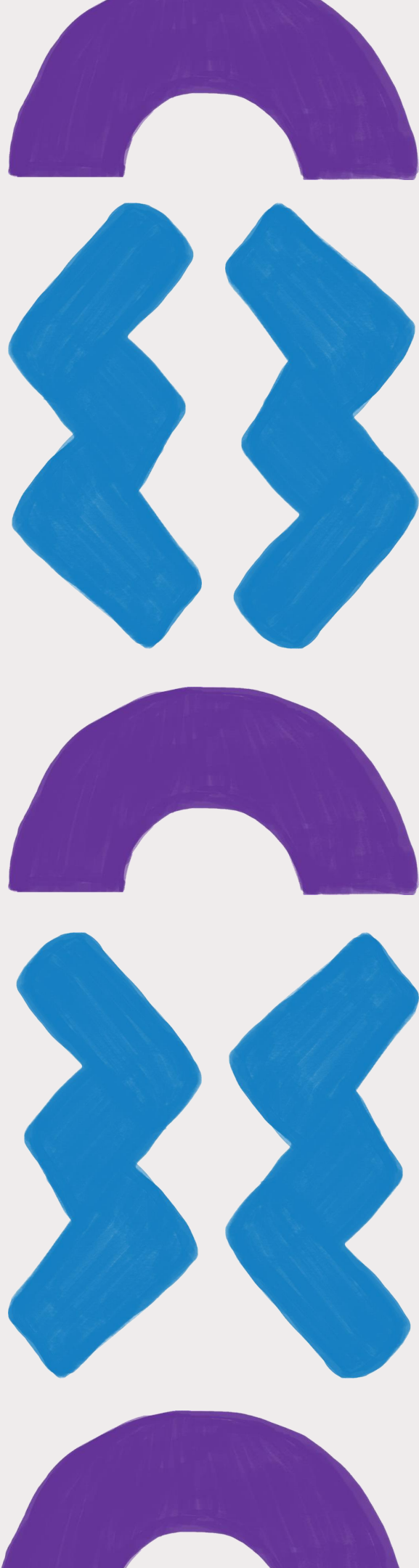
Warning: This preface begins with a story about Seven Charles, a young Black boy who died by suicide after bullying and stigmatization. This discussion does not go into specific or graphic details; nonetheless, it is disturbing. To avoid this content, please begin at the section break on page ix.

CONTENT GUIDANCE

This display shows photography and film where artists use their bodies in performances as a form of activism. Some images include nudity

A decorative graphic on the left side of the page, consisting of a vertical column of alternating purple and blue brushstroke shapes. The shapes include semi-circles at the top and bottom, and zig-zag patterns in the middle. The purple shapes are at the top, followed by blue zig-zags, then purple semi-circles, blue zig-zags, purple semi-circles, blue zig-zags, and finally a purple semi-circle at the bottom.

No single right approach

- Sometimes we bring trauma into spaces that aren't about that trauma
 - Some trauma responses are unpredictable
 - It isn't just about 'trigger warnings' (but those can be a good place to start)
 - Your own capacities, capabilities, and needs are important too.
 - Context of your practice
 - An *ongoing* process (not 'one and done')
- 
- A decorative graphic on the right side of the page, identical to the one on the left, consisting of a vertical column of alternating purple and blue brushstroke shapes: purple semi-circles, blue zig-zags, purple semi-circles, blue zig-zags, purple semi-circles, blue zig-zags, and a purple semi-circle at the bottom.

Levers of influence

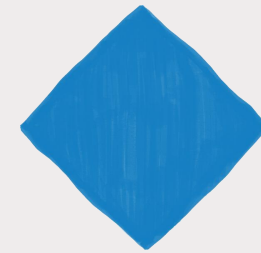
What can you do for each of these?

Decide on one practice per category.

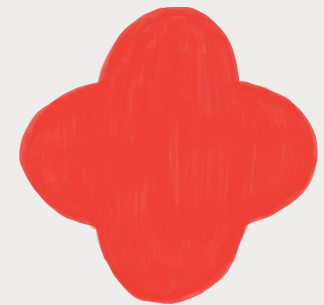
How might these differ in different modules or subjects?



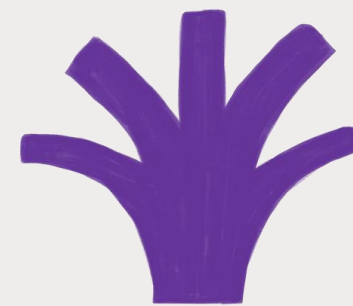
ensure safety



establish trustworthiness



maximise choice



maximise collaboration

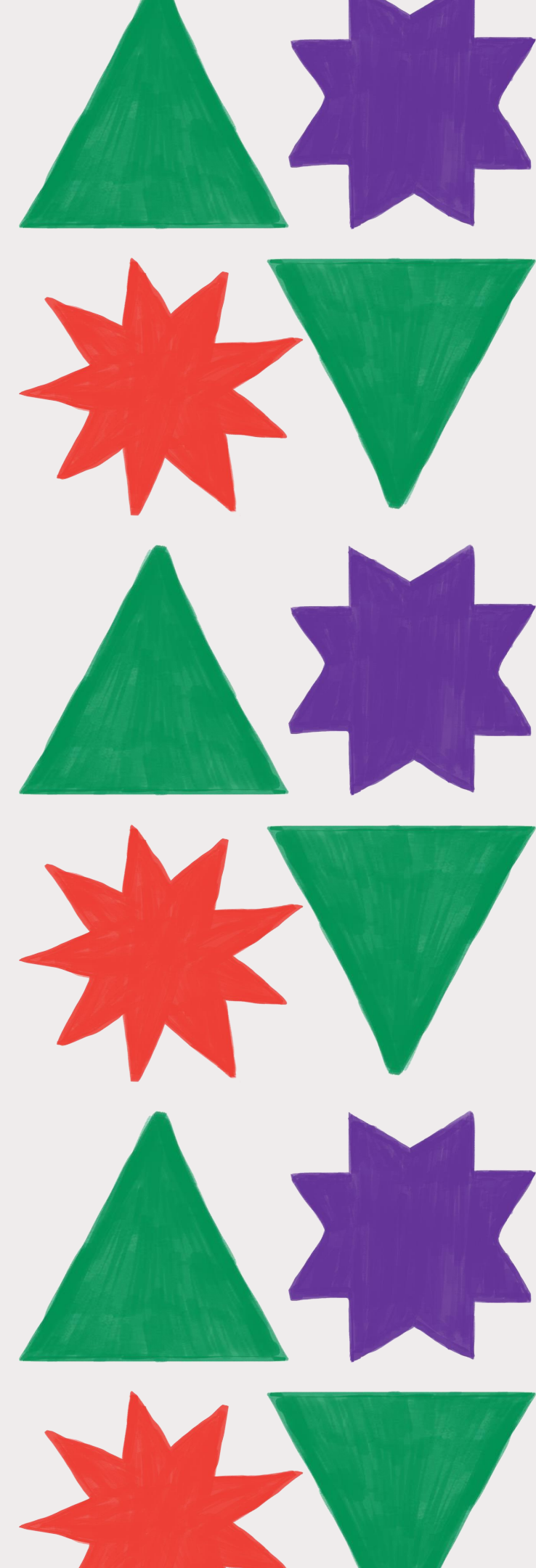


prioritize empowerment

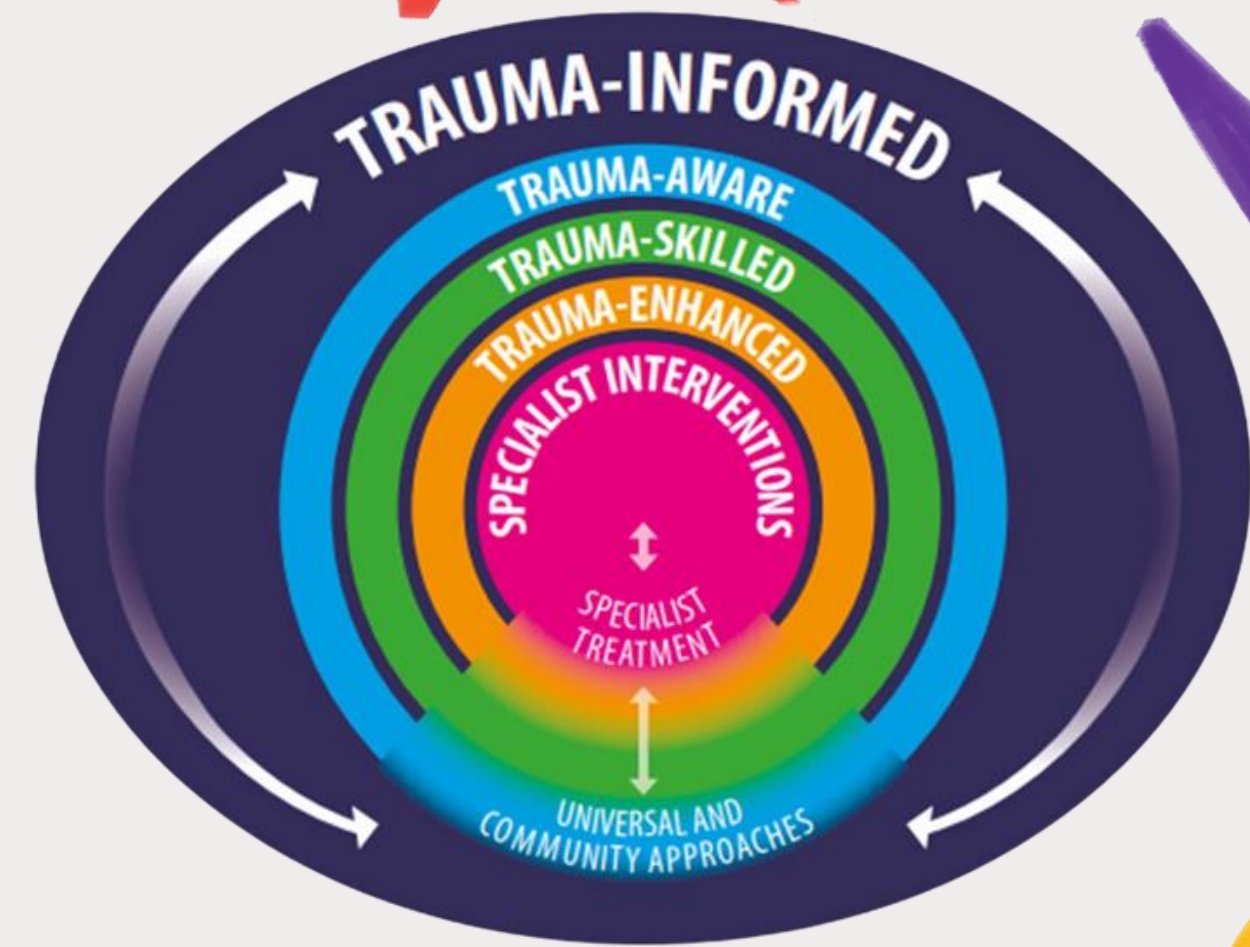
More ideas

- Classroom presentation of 'difficult' topics
- Signposting resources
- 'trauma syllabus' – signal intentions and attempts to create safety and care
- Discuss (and model!) self care
- Not romanticising or minimising trauma in course content
- First person/own voices content
- Short breaks built in
- Easy exit – and permission to do so
- Rationale for chosen materials
- Engaging students with active learning
- Consistency

- Reflect and come prepared for difficult conversations – as well as owning our privileges and lived experiences
- Clarity
- Boundary-setting
- Decision making and choice – co-creation of T&L
- Flexibility in terms of meeting students where they are
- Scheduling of free and structured discussion
- Space for change – response to student interests/needs
- Discussion/conversation guides – co-created



**Now where are
you?**



References and Sources

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