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## **Australian Teachers' Perception of their Preparedness to Teach Traumatised Students: A Systematic Literature Review.**

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*Abstract: There are many studies documenting the negative impacts of trauma in childhood. However, despite schools and teachers being a known protective factor which have the potential to modify the negative impacts of complex trauma, limited research examining the perspectives of primary teachers working with traumatised children and their perceptions of preparedness to teach students living with complex trauma has been conducted. Thus a systematic literature review was conducted to collate and synthesise available empirical research on this topic. The review followed PRISMA guidelines and searches were conducted across academic databases for peer reviewed studies published between 2011 and 2022. Only articles which discussed complex trauma, teachers of primary-aged students, and perceptions of preparedness were included. Four articles were ultimately selected as meeting the criteria for review. The lack of available studies in this area is considered a notable finding in and of itself and highlights a need for further research into teacher experiences and perceptions as well as policies and protocols. The results of this review suggest a need for additional training, clarity regarding role of a teacher, support from colleagues and administration, and organisational self-care for school staff. The lack of trauma-specific training reported by teachers highlighted a need for trauma training for pre-service teachers as well as ongoing training for teachers already in the profession in order to assist traumatised students as well as the teachers who work with them.*

**Keywords:** teacher perceptions of preparedness; teacher preparation; teacher education; trauma; teachers; schools; trauma-informed teaching; trauma-informed practice.

### **Introduction**

There is a broad range of research which has contributed to how we understand, define, and conceptualise complex trauma (Bryce, 2017; Felitti et al., 1998; Howard, 2019). However, during comprehensive database and manual searches, a distinct lack of research was located exploring the knowledge, awareness, and confidence of beginning teachers in dealing with trauma and translating trauma-informed theory into practice.

In Australia, new teacher graduates are encouraged to begin their career in rural and remote schools. Many studies have shown that schools in rural and remote areas of Australia

are predominantly staffed by younger and more inexperienced teachers than their urban counterparts (Downes & Roberts, 2018; Handal et al., 2018). Research has also demonstrated that some of these more isolated areas in Australia have some of the highest rates of childhood complex trauma in the country (AIHW, 2021b; Terry et al., 2021). These realities, when considered alongside the evidence that points to schools being protective factors, also lend weight to the argument that beginning teachers require an understanding of how to teach students who are experiencing complex trauma.

In the present study, using a systematic literature review protocol, this research aimed to collect and synthesise all current available research on the topic of beginning teacher feelings of preparedness with regards to working with children experiencing complex trauma. This project also intended to assist teacher educators in identifying gaps in existing training as well as potential obstacles which beginning teachers may face in their ability to translate trauma-informed theory into practice. This project aimed to identify areas which may require additional research, with a particular focus on the needs of early-career teachers working with children living in trauma. The study aimed to answer two research questions, *how prepared do beginning teachers feel to support students living with complex trauma and how can beginning teachers be made to feel more prepared in supporting students living in complex trauma?*

## **Complex Trauma in Australian Children**

Briere and Scott (2015) define complex trauma as “exposure to multiple, often prolonged or extended traumas over time” (p. 515-516), while Gilmore (2010) likened it to global warming in that it involves a culmination of human and environmental factors and is seemingly unsurmountable. Events which contribute to complex trauma can include physical, sexual, or emotional abuse, neglect, witnessing domestic violence, exposure to violence in the community, medical trauma, as well as having a family member who is incarcerated or entangled in addiction (Bryce, 2017; Kliethermes et al., 2014). Complex trauma is a globally recognised term and the term that will be adopted in this paper.

There has been a lack of consensus among researchers on the definition of complex trauma as varying emphasis has been placed on the number or type of traumatic events, the age and development stages in which they must occur, or the resulting catalogue of symptoms (Weathers & Keane, 2007) however researchers agree that there is a unique pattern of symptoms which occur with this type of ongoing, chronic exposure to traumatic events and this pattern of symptoms is distinctive when compared to the posttraumatic symptoms that are more often seen after exposure to single “catalyst” event (Spinazzola et al., 2021).

Complex trauma in childhood can be common and continue to have an impact in a person’s life well into adulthood (Su & Stone, 2020). In Australia, prevalence rates have proven to be difficult to estimate given the wide divergence in cultural understandings of what constitutes abuse or neglect (Child Family Community Australia; CFCA, 2017). The CFCA (2017) conducted a review of studies into five distinct types of childhood maltreatment (physical, sexual, and emotional abuse, neglect, and exposure to familial violence) and they concluded that child maltreatment is seen in Australia in significant numbers (ranging from 2% reporting neglect, to 23% reporting living with familial violence) across all five types. Although the authors did note that care must be taken in interpreting review findings due to variations in prevalence figures being reported within the studies collated, they did also state that maltreatment sub-types rarely occur in isolation, suggesting that complex trauma is also impacting a significant number of Australians (CFCA, 2017).

Similarly, the Australian Bureau of Statistics (ABS; 2019) report that approximately 13% of Australian adults experienced sexual or physical abuse during their childhood. While the Australian Institute of Health and Welfare (AIHW; 2021a) report that during 2019-20, 174,700 children in Australia received child protection services. That amounts to one in every 32 children being a subject of a child protection investigation or intervention (AIHW, 2021a). Perhaps more concerning is the fact that during that same year 67% of children who received child protection services were the subject of repeat investigations or interventions (AIHW, 2021a) as repeated exposure to child maltreatment has been linked to poorer health outcomes and societal issues later in life (Felitti et al., 1998).

In a landmark study begun in 1995, Felitti and his colleagues (1998) explored childhood trauma experiences, which they called Adverse Childhood Experiences (ACEs), of over 9,000 volunteer participants and found that there was a significant correlation between ACEs and adult health risk behaviours and diseases. Felitti et al. (1998) described ACEs as both experiences which impact children directly (such as abuse and/or neglect), as well as those which children experience more indirectly (witnessing familial violence, having family members in the home with mental illness or substance abuse problems, having parents who are jailed, and family conflict or divorce; Centre for Children's Health and Wellbeing, n.d; Hughes et al., 2017). They also discovered that multiple exposures to ACEs during childhood can lead to up to a 12-fold increased health risk for alcoholism, drug abuse, depression, and suicide attempts as well as significantly higher levels of other health risks and diseases (Felitti et al., 1998) when compared to people who reported zero or one exposure. As well as increased health risks to the person who has experienced ACEs in childhood, complex trauma can also have a significant societal and economic impact on the community at large due to increased levels of unemployment, addiction, and imprisonment (Bryce, 2017; Howard, 2019; McCarthy et al., 2016)

A cost of illness study was conducted by McCarthy and colleagues (2016) to determine the range and scale of economic impacts associated with child maltreatment in Australia. The study focused on 52,802 children who had experienced maltreatment for the first time in 2012-2013 and were under investigation from child protective services (McCarthy et al., 2016). McCarthy and colleagues found financial costs directly attributable to the maltreatment, such as costs associated with health care and the actions taken by child protection agencies, associated with each maltreated child of \$176, 437 (McCarthy et al., 2016). Further, the study also stated that there were non-financial costs associated with child maltreatment such as loss of productivity and premature death, and these were estimated to be at a rate of \$328,757 per maltreated individual. These costs may be partly borne by the individual themselves but are largely funded by the government and community at large. These results indicate that child maltreatment and complex trauma are larger societal concerns which require ongoing investigation in order to find ways to mitigate their many impacts.

Complex trauma during childhood has been shown to have a significant impact across an individual's lifetime, beginning at the time of the trauma and having the potential to last into adulthood. In addition to long-term impacts, children who have lived experiences of complex trauma have specific needs and challenges which can be difficult to meet in a school environment. Such children can face impacts to their academic success, school engagement, social interactions, and emotional development (Collier et al., 2020). Complex trauma in children can also manifest in a variety of challenging behaviours such as truancy, aggression, depression, inattention, and refusal to complete work that can be confronting for teachers who have a lack of understanding about trauma (Cavanaugh, 2016; Veltman & Brown, 2001)

For many children who have experienced trauma in the home, forming secure relationships can be challenging (Burdick & Corr, 2021) however, the development of a

trusting relationship and secure attachment with a teacher can provide the feelings of security necessary for children to begin regulating their own emotions, behaviour, and attention and contribute to children feeling a sense of belonging at school (Hobbs et al., 2019; Kinniburgh, 2015). Additional understanding is required from teachers who are attempting to teach as well as build a relationship with children experiencing trauma (Walsh et al., 2019). Given the prevalence rates of childhood trauma in Australia, and the unique potential that schools have to be significant protective factors for their students, it seems crucial that the teachers who are spending the most time with them, are given the adequate training and preparation to fully understand the effects that trauma can have on children.

### **Schools as Protective Factors**

While there have been a multitude of studies which have investigated the negative impacts of childhood trauma (Bryce, 2017; Felitti et al., 1998; Howard, 2019; McCarthy et al., 2016), new research is emerging which instead examines the reasons that some people display resilience and seem to thrive in the aftermath of complex trauma (known as posttraumatic growth; Bonanno & Diminich, 2013; Mohr & Rosen, 2017). Factors which have the potential to moderate the negative long-term impacts of ACEs and foster resilience and posttraumatic growth in individuals are termed protective factors (Mohr & Rosen, 2017; Crouch et al., 2019). When traumatic events are encountered outside of the home, such as bullying or living in a violent neighbourhood, familial protective factors such as supportive parents or siblings can mitigate the risks of this trauma (Herrenkohl et al., 2019). When the traumatic events are being experienced in the home however, protective factors outside the home, and in particular in the school environment, take on increased importance (Chafouleas et al., 2016). Three significant protective factors were identified by Sciaraffa et al. (2018) which contribute to the ability of children to overcome trauma. These are the individual capabilities of the child (self-regulation, the ability to express emotion, and self-assertion), the child's attachment to a nurturing adult, and a sense of belonging to a community which is safe and protective (Sciaraffa et al., 2018). Veltman and Browne (2001) state that schools have the ability to be a significant protective factor and have a modifying effect on the consequences of complex trauma if they have appropriate child protection and trauma-aware practices and policies in place. Trauma-aware policies and programs for schools generally fall within two categories, those which focus on the ability of children to form secure attachments, and those which focus on building children's capability to regulate their emotions and stress response (Brunzell et al., 2016). Both of these categories of trauma-aware programs support the protective factors identified by Sciaraffa and colleagues (2018). These studies along with others which show similar results, have been the motivation behind the movement towards creating schools that are responsive to the needs of trauma-exposed young people (Herrenkohl et al., 2019).

Frameworks for support provisions which consider both the frequency of ACEs as well as the impact that they can have on a child's learning, development, and wellbeing are referred to as trauma-informed practices (TIPs) (Morgan et al., 2015). Pool and Greaves (as cited in Record-Lemon & Buchanan, 2017) stress the importance of creating a school environment which emphasises safety, control, choice, and empowerment while Dorado et al. (2016) describe TIPs as alternatives to behaviour-based and reactive approaches traditionally seen in the schoolyard. TIPs in the school environment must strive towards a more understanding and appropriate way of intervening in problem behaviours while considering student mental and emotional health (Dorado et al., 2016). TIPs can include whole-school approaches such as a focus on empowerment and education for students, families, and

teachers (Perry & Daniels, 2016) as well as more intensive individual interventions that are focused on helping individual children and families understand and recover from specific traumas. (Record-Lemon & Buchanan, 2017; Woodbridge et al., 2016).

### **Barriers to Implementation**

While there is a wealth of research which indicates that both students and staff benefit from the adoption of trauma-informed practices within schools, translation from theory into practice has often been hampered by certain barriers to implementation. There persists a belief in some educational circles that anything to do with trauma in schools is the responsibility of the school guidance officer or counsellor alone (Howard, 2019). This role in schools is usually held by a teacher who has additional training in mental health and trauma or qualifications in psychology and is a role which many researchers believe is already under resourced and over stretched (Costa, 2017; Howard, 2019). In addition to this idea of segmented responsibility, Walkley and Cox (2013) found that some teachers still have a lack of understanding about some of the behaviours that can be displayed by students living in trauma and TIPs are the equivalent of “going soft” on discipline.

As well as difficulties of practical implementation, problems with funding are also evident. In her 2017 paper, Costa designed and evaluated a school counsellor led model of TIP. She found that in New South Wales there often exists a poor perception of the impact that trauma can have on children’s development, and hence a lack of support for funding being spent in this area. Instead there seems a push in many schools to have challenging behaviours, such as aggression or inability to focus and complete work, categorised as behavioural diagnoses which attract additional funding to the school and student (Costa, 2017; Morgan et al., 2015). Findings from Costa’s study (2017) also seem to indicate that there is an unrealistic expectation amongst many teachers that children living with complex trauma will display the same behavioural, developmental, and cognitive abilities as their non-traumatised peers.

### **Teacher Preparation: Preservice and Workforce Training**

Bixler-Funk (2018) interviewed a sample of pre-service teachers to determine their understanding of trauma and its impact on learning. Study participants expressed a lack of confidence in knowing how to meet the needs of children in their class who were experiencing trauma and described little or no coursework during their teaching degree which focused on the impacts of complex trauma on children (Bixler-Funk, 2018). Likewise, a study focused on teachers’ understanding of the impact of familial divorce in children found that teacher participants had a moderate understanding of the effects of divorce on children (Atiles et al., 2017). Perhaps more telling, the study also found a positive, statistically significant correlation between a teacher’s understanding of the effects of stress on children and their sense of efficacy in meeting the needs of these children (Atiles et al., 2017).

In similar studies focused on teachers’ perceptions of preparedness to help children after natural disasters (Green-Derry, 2014) and suicide attempt (Buchanan & Harris, 2014), researchers found that teachers expressed a lack of confidence in understanding the emotional and mental health needs of their students. Participants in both studies expressed a lack of course work focused on emotional and mental-health needs of children after trauma. Teachers in Green-Derry’s (2014) study had all lived in New Orleans at the time of Hurricane Katrina and stated that although their teacher preparation coursework was lacking, their experience

on placement, as well as their lived experience had left them feeling somewhat confident in their ability to assist students after a natural disaster. Although these studies were all conducted in the United States and are limited both in geographical location as well as sample size, they give insight into the importance of equipping pre-service teachers with knowledge and skills to work with children experiencing trauma.

The lack of coursework designed to educate pre-service teachers about the impacts of complex trauma on children may be less concerning if this education was being provided to beginning teachers within their schools. However, when looking into Queensland schools and the availability and effectiveness of teacher training programs focusing on TIPs, Howard (2019) found a concerning lack. In her mixed-methods study where she studied attendance data as well as responses to questionnaires, Howard concluded that although the vast majority (96.60 percent) of staff in school leadership positions regarded trauma training as extremely important, or important, this training was predominantly delivered only to key members of staff in small groups. Over 44 percent of teacher respondents in Howard's study stated that although they had heard of trauma-informed practices, they had, in fact, never attended training on the topic. This lack of systemic training strengthens the notion that TIPs are the responsibility of only select members of staff (Costa, 2017) and leads to a lack of knowledge needed to fully understand the social and behavioural implications of children living with trauma (Costa, 2017; Walkley & Cox, 2013).

## Method

A Systematic Literature Review was undertaken to gather, interpret, collate, and synthesise all existing empirical research, in order to better understand the challenges and experiences that beginning teachers face when exposed to students who have lived experiences of complex trauma. The intent was to examine the experiences of beginning teachers in order to answer the research questions *how prepared do beginning teachers feel to support students living with complex trauma?* and *how can beginning teachers be made to feel more prepared in supporting students living in complex trauma?*

## Search Strategy

This project utilised the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) protocol. The PRISMA protocol was chosen due to its ability to reduce bias and improve the quality of data selection (Gholizadeh et al., 2020; Moher et al., 2009). Articles were identified by using the PRISMA protocol to search several databases (EBSCO, ProQuest, Pubmed and Scopus) as well as via manual searches of grey literature and reference list and citation searching.

The research questions and article inclusion/exclusion criteria were devised using the PICO protocol for qualitative research as described by Schardt et al. (2007). This protocol denotes the Population (beginning teachers), Intervention/Exposure (complex trauma) and Outcome/Context (preparedness). A preliminary search of databases was conducted which returned no Australian, peer-reviewed articles. International research was then included in the search and search terms were revised and applied to three Boolean search strings. Following these modifications, 245 hits were identified from database searches after the removal of duplicates. A manual search was also undertaken using Google Scholar as well as reference lists and recommended readings which returned 163 hits after removal of duplicates.

## Article Selection

Articles were selected using Cohen’s (1990) method of Preview, Questions, Read, and Summarise (as cited in Cronin et al., 2008). The first stage of screening involved previewing the abstract of articles for relevance and then categorising them as qualitative, quantitative, or mixed method. In order to examine perceptions of preparedness, only articles which included empirical research were included in the study. The next stage of questioning included reading the whole text and assessing the article against the inclusion criteria. The inclusion criteria included empirical peer reviewed studies, publication between 2011-2021, in English language, and focusing on complex trauma, beginning teachers of primary aged children, and perceptions of preparedness. Studies whose participants were teachers of varying experience were included if teacher experience was one of the measured variables and early-career teachers were included. Please refer to the PRISMA diagram in Figure 1 for an explanation of this selection procedure.

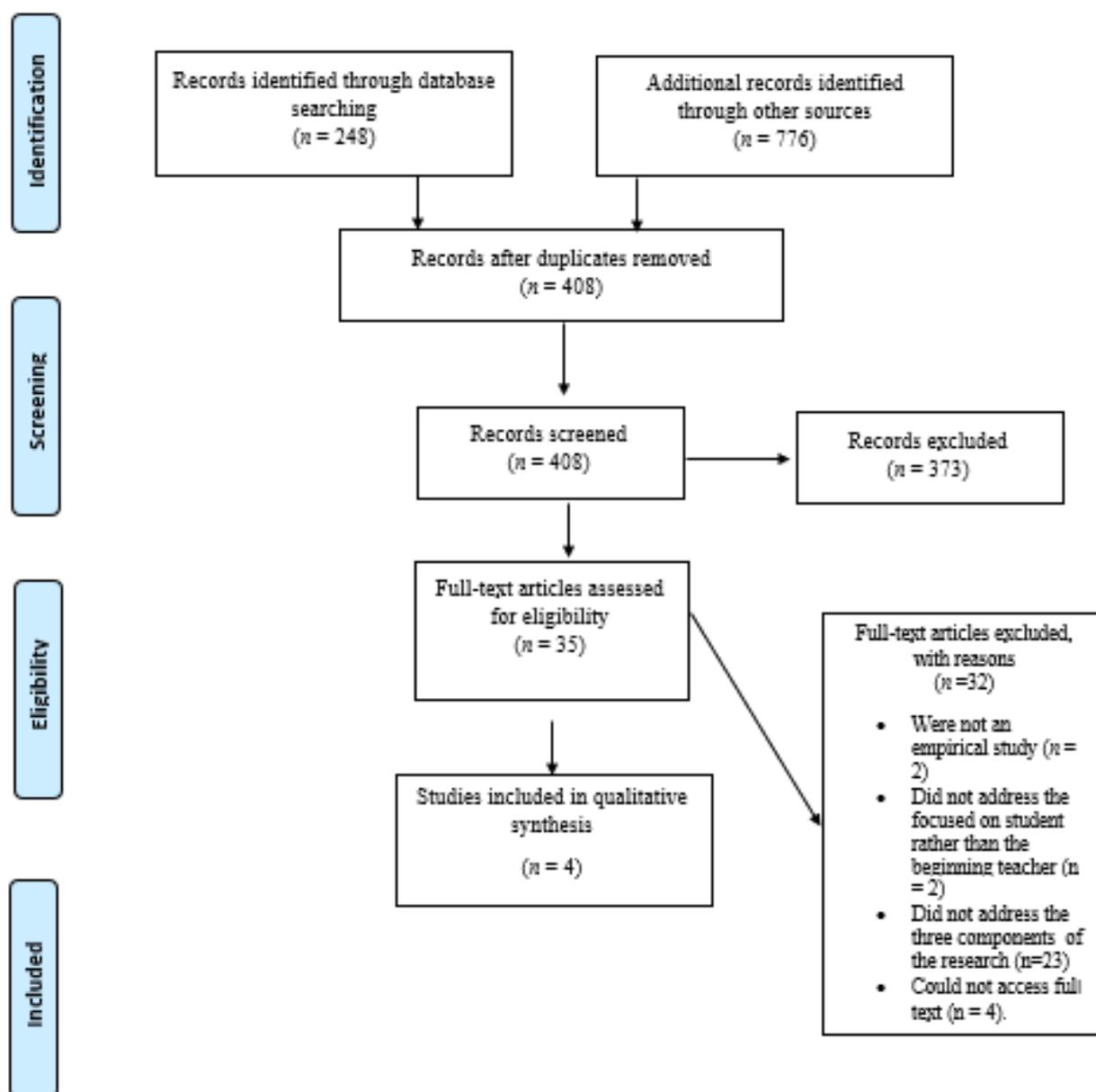


Figure 1: PRISMA Flow diagram of review search for research question.

## Quality Assessment

Four studies met the inclusion criteria and were subsequently categorised according to their methodology. The two identified qualitative articles were assessed and ranked against the Critical Appraisal Skills Programme (CASP) (Long et al., 2020) criteria as shown in Appendix 1. The remaining two articles were quantitative and mixed method and so were assessed and ranked against the Strengthening the Reporting of Observational Studies in Epidemiology (STROBE; Vandembrouke et al., 2007) criteria detailed in Appendix 2. Following the CASP and STROBE assessments, the findings and academic rigour of both qualitative articles were deemed of value, while the mixed-methods study were assessed as being of moderate or high quality. However, concerning the *ethical considerations* criterion, both qualitative articles were rated as “unclear”. Due to purposive and convenience sampling, one of the mixed-methods studies was rated as low concerning the *bias and generalisability* criterion (Robinson, 2014). Due to the lack of relevant research located on the themes of this study, these incongruities were considered acceptable.

## Data Synthesis: Emerging Themes

Following the quality assessment, the four articles remaining were entered into a synthesis matrix tool to explore the overall quality of the research, categorise the identified themes, relationships, and key findings of the research, and provide a summary of the data (Wright et al., 2007). Although the entire data sample for this systematic literature review consists of only four articles, a multiphase thematic analysis was applied with regards to the research questions (Braun & Clarke, 2006; Meier et al., 2006). A descriptive evaluation was undertaken to assess, summarise and organise the studies and to identify the preliminary themes that emerged. A narrative synthesis was established as the most appropriate method of analysis (Wright et al., 2007). First order themes were displayed within the synthesis matrix tool (Appendix 3) under the heading themes (Braun & Clarke, 2006; Meier et al., 2006; Wright et al., 2007) and these formed the entire data sample of the systematic review. Following the initial gathering of themes, the selected articles were re-read and coded in order to derive second-order themes (Meier et al., 2006) and these themes were analysed to check for agreeance between articles. This process was then repeated to identify third-order themes and to generate headings for the results section of this review.

Four main themes were derived for this study as well as several more sub-themes. The four main themes were: *Teacher feelings of competence* which included the beginning teacher’s feelings about their lack of training and understanding; *The role of the teacher* in supporting children experiencing trauma; *Emotional burdens on teachers* when working with children experiencing trauma; and finally the *recommendations* from beginning teachers. The themes were derived with the lens of beginning teachers and preparation as well as with the intent to answer the research questions *how prepared do beginning teachers feel to support students living with complex trauma?* and *how can beginning teachers be made to feel more prepared in supporting students living in complex trauma?*

## Results

Four articles ( $n = 4$ ) were selected for inclusion in this review, only one (Ciganek, 2020) focused solely on beginning teachers while the remainder included participants with a variety of teaching experience including beginning teachers. One of the four studies (Berger et al., 2020) included Australian participants while one (Ciganek, 2020) was based in the United States and the remaining two (Alisic, 2012; Alisic et al., 2012) studied teachers in the Netherlands. After data collection and analyses were applied, the following third-order themes and their subthemes were derived.

### Teacher Feelings of Competence/Efficacy

Teacher participants in all four articles were questioned about their feelings of competence and efficacy directly related to teaching traumatised students. They were asked questions about their experiences regarding traumatised students in their classes and led to discuss their feelings regarding those experiences. When results across the four studies were collated, the following subthemes emerged which directly spoke to the first research question *how prepared do beginning teachers feel to support students living with complex trauma?*

#### Lack of Training

Within all four of the articles included in this study there was a recurrent theme of teachers entering the profession with a perceived lack of training in the area of childhood trauma. Ciganek (2020) reported that none of the participants in her study had completed any trauma-specific courses as part of their teacher preparation programs and they described feeling “ill-equipped” to manage the needs of traumatised students with some even expressing that they felt “shocked” or “startled” when first being exposed to stories of trauma. All participants in the study expressed the opinion that having more training on the science behind and developmental impacts of trauma would be beneficial in helping new teachers feel more confident to meet the needs of their class (Ciganek, 2020).

Alisic (2012) interviewed teachers with a wide range of experience and identified a need for teacher training courses to include information specific to trauma. While the experienced teachers in her study expressed some confidence in their ability to manage trauma-related behaviours in the classroom, they agreed that they had learnt “on the job” and expressed a belief that being thrown in the deep end was “not the best way” for new teachers to gain the skills necessary for meeting the needs of students living in trauma (Alisic, 2012). In the largest study in this review, Alisic et al. (2012) gathered results from 765 teachers with varying experience. They found that although 89% of respondents stated that they had directly worked with at least one child who was experiencing trauma, only 9% had participated in any training during the past 3 years that they deemed relevant in supporting those children (Alisic et al., 2012).

Berger et al. (2020) conducted the only relevant Australian study located for this review. Twenty-seven teachers were interviewed with a teaching experience which ranged from five to 40 years. Participants gave a variety of responses when asked to report on their level of training with some indicating that they had received no training in their pre-service program and others recalling limited training (Berger et al., 2020). When discussing the benefits of training in complex trauma, a small number of teachers reported that although they recalled no pre-service training, they had received a satisfactory level of professional

development in trauma through their school since beginning work, accessing outside agencies such as Calmer Classrooms (n.d), MindMatters (2014), Peaceful kids (n.d), REACH (n.d), and Mental Health First Aid (2022) and these teachers also suggested that there was a positive relationship between their level of training and their feelings of confidence and effectiveness as a teacher (Berger et al., 2020).

The participants' belief that their level of training was insufficient is concerning given that for many children the school environment is their strongest potential protective factor against the ongoing impacts of complex trauma. If their teachers have not received training in trauma-aware practice, many students may not be receiving the best support available.

### **Knowing When to Refer and to Whom**

Teachers in three out of the four studies expressed some confusion about policies and protocols within their school regarding how to access specialised help for traumatised students. Berger et al. (2020) found that while some of their participants expressed knowledge of mandatory reporting policies, others reported no knowledge of policies regarding trauma. Participants in the Berger et al. (2020) study also expressed different opinions about their ability to access specialised care for traumatised students. One teacher expressed concern that in referring her student to an outside specialist, she was losing the trust of her student. While another stated that "children who are able to access the therapies through the psychological service that's provided, that's wonderful" (Berger et al., 2020, p.8).

Alisic (2012) found that participants in her study expressed uncertainty about when students' behaviours were part of a normal childhood reaction to stress and when more specialised mental health care may be needed. Teachers in this study also indicated that they were unaware of care and support facilities which were available in their area and felt that they were in the dark about when to refer students for additional support and where they could be referred to (Alisic, 2012). While they acknowledged that there were staff in their schools who would be able to help them with advice about available support, teachers felt that they required a basic knowledge of a "map of available services in their region" (Alisic, 2012, p. 56) in order to fully support their students. Likewise, Alisic et al (2012) found that 63% of their participants were not able to tell when a student required mental health care and 51% were not aware of where to find information on traumatic stress. These figures are troubling as both of these skills are required for professionals to decide if a student requires a referral to specialist mental health services (Alisic et al., 2012). Although these studies (Alisic 2012; Alisic et al., 2012) refer to referral systems and agencies in the Netherlands, the lack of knowledge about trauma and how to access care is also reported in the Berger (2020) study which was conducted in Australia. This reported lack of knowledge regarding which type of behaviours could mean that a referral is warranted suggests a concern that some students will not be offered the support that they need.

### **Role of The Teacher**

Across all four studies, participants discussed feelings of confusion regarding their role as teachers. Differing understandings of where a teacher's role ends and another professional's role begins arose when teachers were discussing their experiences of traumatised students. Again these statements assist in answering the first research question *how prepared do beginning teachers feel to support students living with complex trauma?*

### **Responding to Student's Behaviours**

Knowing how to respond to the behaviour of students in the classroom was another recurrent theme within all four articles. Ciganek's (2020) participants who were all beginning teachers described students "lashing out" with one participant admitting that she had experienced a student who needed to be removed from her classroom as both she and the student were unable to control his anger. All eight participants in the study acknowledged that this type of behaviour is a form of communication and a response to trauma however seven of the eight agreed that they felt no clear understanding of how to address the social-emotional needs of students experiencing trauma (Ciganek, 2020). Teachers in the Berger et al. (2020) study discussed a domino effect where teachers who were affected by student violence or aggression found that their ability to engage in confident and effective behaviour management was impacted.

In contrast to the Ciganek study, Berger et al. (2020) found that although some experienced teachers had a good understanding of trauma-informed practice, teachers who were new to the profession had a limited or non-existent understanding of the way that trauma can affect behaviour. Alisic (2012) found that not only were beginning teachers struggling in dealing with acting-out (screaming, fighting, throwing things) and attention seeking (excessive crying, calling out) behaviours, but they also struggled dealing with withdrawn and dissociated (being in their own world, "blanking out") behaviour as it required additional effort to engage that student in lessons. All four of the studies also reported participants feeling torn between meeting the needs of traumatised students and those of the class as a whole. Teachers reported that children who were requiring extra attention monopolised their time while the rest of the class were left to take care of themselves (Alisic, 2012) and stated that they found it difficult to balance this attention with the academic needs of the class (Alisic et al., 2012). One participant in Berger's (2020) study stated that "it's very hard to balance the needs of a traumatized child and keep the rest of the class not feeling traumatized" (p. 7). Beginning teachers in Ciganek's (2020) study discussed being prepared with whole-class behaviour plans, rules, and reward systems but feeling that they lacked the skills to adapt these plans when faced with students with specific needs.

### **Academic Role vs a Mental Health Role**

Several teachers expressed that teaching was changing and that there was an expectation that teachers would take on more of the care-giving or social-work roles than in previous times (Alisic, 2012). While some experienced teachers accepted this change as a natural progression due to the increasing number of traumatised students in schools, others felt that the lines were too blurred and that teachers should focus on teaching academic skills and leave social-emotional work to other professionals (Alisic, 2012; Alisic et al., 2012). Beginning teachers expressed concern that they were unsure of the limits of their role and whether they were encroaching on the roles of other professionals if they were to attempt to support their students in an emotional or mental health capacity (Ciganek, 2020). In addition to the role confusion, teachers reported a difficulty in responding to the pressure to demonstrate educational development of traumatised students who are often not able to progress at the same rate as their peers. As one participant stated "the government is telling me to teach them ..... and it's currently the last thing [they] need, because if they don't deal with the trauma first, they're not ready to sit and learn anything else" (Berger et al., 2020, p. 7). In a caring profession such as teaching, there may be a potential for stress when expectations placed on teachers fail to meet their own beliefs about student care. When this is

coupled with teachers' own admissions that they don't know how to support traumatised children, this is a concern regarding teacher retention and efficacy.

### **Emotional Burdens on Teachers**

Teachers working with traumatised students are not only potentially impacted by the stories of the trauma, they can also be affected by students' behavioural responses to trauma. These stories and classroom experiences led many of the participants in these studies to discuss the emotional burdens placed on teachers while working with students living with complex trauma. This theme discusses the first research question *how prepared do beginning teachers feel to support students living with complex trauma?* not only from the point of view of supporting the student but also supporting the beginning teacher.

As well as the needs of the student and role of the teacher in dealing with trauma, three of the four studies in this review also discussed in depth the emotional needs of the teacher and consequences of working in a caring profession and with children suffering trauma. Berger et al. (2020) describe inexperienced school staff as feeling a greater amount of "shock, disbelief, fear, powerlessness, guilt, ruminating thoughts, emotional pain, and feelings of depersonalisation and exhaustion" (p.6) while Alisic et al. (2012) found that half of their respondents indicated a difficulty with emotional involvement and Alisic (2012) indicated that her more inexperienced participants struggled to avoid becoming overly involved in the emotions of a student's trauma, whilst still being committed to the wellbeing of that student. Many teachers recounted examples of situations where they felt that their own emotional wellbeing had been disregarded.

In addition to the secondary trauma that can be caused by having traumatic experiences recounted to you or witnessing emotional and behavioural breakdowns in the classroom, a small number of participants in two of the studies also discussed their own traumatic pasts and the difficulties they faced being able to support students whilst also being reminded of their own trauma histories (Alisic, 2012; Alisic et al., 2012). Alisic et al. (2012) discussed the need for a study into compassion fatigue and secondary traumatisation of teachers in the same way that impacts on first responders and mental health care workers have been explored. Teachers in Berger's study (2020) described witnessing staff absenteeism and high levels of teacher stress in the aftermath of student violence and explosive behaviours.

### **School and Collegial Supports**

While many participants across all four studies indicated that they had some difficulties feeling that they were prepared to work with students living in trauma, others discussed how the support that they had received from colleagues and administration had been a factor which had helped them cope (Alisic, 2012; Berger et al., 2020; Ciganek, 2020). However, a lack of support from colleagues and administration led some teachers to feel overwhelmed and isolated (Alisic, 2012; Berger et al., 2020; Ciganek, 2020). Participants related situations where they had felt dismissed by administration and expected to carry on and solve any issues regardless of feeling a lack of confidence (Alisic, 2012). Results from the four studies included in this review seem to indicate that a strong sense of support and teamwork with colleagues and administration can be a protective factor against teacher emotional exhaustion and burnout.

## Teachers' Recommendations

In order to begin to answer the second research question *how can beginning teachers be made to feel more prepared in supporting students living in complex trauma?* It was important to gather the recommendations of teacher participants, particularly beginning teachers. Across all four studies, teachers felt that they knew what was required in order to help them in feeling more prepared to work with traumatised students. While some beginning teachers admitted that it was difficult to know how to better prepare teachers before they began in the profession (Ciganek, 2020), most participants across all studies agreed that there were changes that could be made in order to enable teachers to feel more confident.

Teachers suggested that specific pre-service training about trauma and traumatic stress response would be helpful in knowing how to manage traumatised students in the classroom (Alisic, 2012; Berger et al., 2020; Ciganek, 2020). Teachers indicated that this training should not only take place in teacher-training programs at universities but should also be ongoing and repeated throughout a teacher's career in order to ensure that knowledge and skills remain current (Alisic et al., 2012; Berger et al., 2020; Ciganek, 2020). Content suggested included types of trauma and impacts of trauma on the brain (Berger et al., 2020; Ciganek, 2020), how to talk about the trauma with an affected child (Alisic, 2012), and how to respond to the parents of a traumatised child (Berger et al., 2020). It was suggested by some that the information was largely available but making it easy to access would improve the confidence and efficacy of teachers (Berger et al., 2020). As well as course work and theoretical training about trauma, early-career teachers agreed that they would have benefitted from being exposed to real-life scenarios regarding traumatised children in their pre-service training. These beginning teachers agreed that exposure to these scenarios and the procedures that schools put in place to support traumatised children would have been most effective during placements (Ciganek, 2020).

Teachers also indicated a need for additional support for teachers who work with traumatised students. The addition of specially trained staff who are available to assist in different classrooms as needed, or to allow teachers to take some time out was another recommendation (Berger et al., 2020) as was the need for teachers to be able to access counselling, debriefing, and secondary trauma support (Alisic et al., 2012). Often when discussing trauma-informed practices in schools, the focus is on the child who is experiencing trauma. The evidence collated across these four studies demonstrates a need for the impacts on teachers to be further investigated.

## Lack of Available Articles on the Topic

In addition to the themes discovered within the articles included in this review, the lack of research surrounding the perceived preparedness of teachers, and in particular beginning teachers, to teach students affected by complex trauma has been an interesting discovery in itself. This finding has directly given rise to the recommendations for further research discussed in the following section.

## Discussion

Teacher perceptions regarding their own preparedness to support traumatised students is a largely understudied topic as evidenced by the lack of literature available for this review. Although a significant proportion of the population are impacted by childhood complex

trauma (ABS, 2019; AIHW, 2021; CFCA, 2017) and schools have been found potentially be an important protective factor (Chafouleas et al., 2016; Veltman & Browne, 2001) there remains an absence of research specifically focused on the views and beliefs of primary school teachers regarding their own preparedness. This study aimed to examine beginning teachers' perceptions in order to explore any gaps in training, knowledge, or skills they may have regarding student trauma. Only one study focused on beginning teachers could be found using search protocols detailed in the methodology section of this review however comparisons between teachers of varying experience within the other three studies demonstrated a specific lack of perceived preparedness in beginning teachers. Across the four studies, although some experienced teachers reported feeling prepared to work with traumatised students, the vast majority of both beginning and experienced teachers indicated feeling a lack of confidence and preparedness for the realities of working with students living in trauma. Even amongst those who indicated feelings of confidence, teachers agreed that they had gained this confidence through experience and had not felt this way as beginning teachers.

The aims of this study were not only to collate current available research but also to begin to identify gaps in existing training as well as potential obstacles which beginning teachers may face when in their ability to support traumatised students. One theme that emerged was a lack of pre-service trauma-specific training leading to feelings of shock when teachers were initially faced with traumatised students. These findings are consistent with earlier research into praxis shock felt by beginning teachers who feel unprepared by their teacher-training programs (Ballantyne & Retell, 2020). These findings also align with the results gained from earlier studies which have found that teachers report a lack of training designed to assist them in helping traumatised students (Buchanan & Harris, 2014; Green-Derry, 2014). Teachers also reported feeling uncertain or confused about their school policies and protocols regarding traumatised students and stated that there seemed to be a lack of consistency regarding responses to trauma. These results give additional evidence to support Howard's (2019) call for a systematic framework for trauma-informed education in order to assist teachers in knowing how to respond.

Teachers indicated that they faced some frustration in balancing the educational needs of students with the fact that some children require specific help in dealing with traumatic situations which happen in their home life. Previous research has discussed this dilemma at a school level (Crosby et al., 2018) and across all four studies included in this review, teachers agreed that the lines between being an academic professional and a mental health supporter became blurred on occasion. These results demonstrated some of the obstacles faced by beginning teachers and pointed to a perceived inconsistency regarding appropriate responses to traumatised students and a lack of understanding of policies and protocols.

The emotional health of teachers and the ways that it had been impacted by working with traumatised students was another theme which emerged from all the studies reviewed. Various participants across the studies discussed feelings of emotional exhaustion and reduced feelings of efficacy which are both dimensions which have been linked to teacher burnout (Skaalvik & Skaalvik, 2017) which can impact attrition and job satisfaction as well as personal wellbeing (Leiter & Maslach, 2017). Teachers reported feeling overlooked and unsupported when they were expected to keep working in the aftermath of a traumatic disclosure or event had taken place, while other teachers discussed how working in a highly supportive environment enabled them to feel more prepared and confident in working with traumatised children.

## Implications

The second question that this review aimed to answer was “*How can beginning teachers be made to feel more prepared in managing students living in complex trauma?*” Several suggestions were made by participants across all four studies as to how changes could be made in order to increase confidence of teachers, and particularly beginning teachers, to work with traumatised students. Many teachers indicated that they saw a need for specific trauma training for teachers during their pre-service education in order to increase their initial feelings of preparedness as well as ongoing training throughout their professional career to keep this knowledge current. This pre-service training would address topics such as identification of trauma, trauma responses in children, cognitive, behavioural, and social impacts of trauma, balancing roles, and responding to students and families experiencing trauma and could possibly fit side by side with placement programs that include scenarios including traumatised students. There is evidence that trauma training for teachers can alter practice and increase confidence (Brunzell et al., 2019) as well as combat feelings of teacher burnout and high attrition rates (Kim et al., 2021). This evidence, coupled with teachers’ own identification of a perceived gap in their training suggests the need for further research to explore if it would be feasible or effective to make specific trauma-informed training available to all pre-service and current teachers in a similar way to current mandatory training topics.

While many of the teachers involved in the studies indicated a lack of knowledge about trauma, others stated that they were aware that there was information available but were unsure where or how to access it. These findings indicate a need for information to be disseminated in a way that makes it easy for practicing teachers to translate trauma-informed theory into practice. Heavy workload, narrow timelines, and unrealistic expectations from administration have been identified as the largest contributors to teacher stress (Carroll et al., 2020) and so in order for dissemination to be most effective, information should be distributed and be able to be accessed easily and quickly, in order to make a valuable addition to teacher practice without adding to workload. These materials could be available physically or digitally and further investigation is recommended to determine which would be most effective.

A need for structural supports for school staff dealing with traumatised students was identified by many of the participants in the four studies. While research on the impacts of secondary trauma and how to prevent it is in its infancy (Sprang et al., 2019), models of self-care and organisational supports for professionals in field such as child welfare (Miller et al., 2018) should be investigated for potential adaptations for a school environment. Teachers in all four studies described possible signs of secondary trauma such as exhaustion, feelings of overwhelm, and lack of efficacy with some even citing teacher stress as a possible reason for high staff absenteeism.

## Limitations

Several limitations were identified within the current review. While the lack of available peer-reviewed, empirical studies identified through database searches has indicated a need for further research in this area, it has also resulted in this review considering only four studies. Three out of the four studies considered in this review were conducted in countries other than Australia and although several of their findings were similar to the Australian study, the applicability of their findings to an Australian teaching cohort may be

uncertain. The one Australian study was conducted in New South Wales and as education is a state responsibility, responses may only be relevant to teachers in that state.

In addition to three of the studies being conducted outside Australia, all but one of them had such a small number of participants that the generalisability of any findings must be questioned. The study with the largest number of participants (n= 765) was a Dutch study and so generalisability to an Australian population could be problematic.

Previous research has highlighted differing terminology and a “lack of clearly articulated definitions” as a challenge to the effective implementation of trauma-informed practice (Wall et al., 2016, p.2) and it may be possible that the differences in teacher responses to questions about trauma-informed practice both within and between studies in this review may reflect differing terminology rather than understanding. This may highlight a need for systematic training and consistent language regarding trauma-informed practice.

This review has identified a major gap within the Australian context in understanding teachers’ perceptions of their preparedness in teaching students who are experiencing trauma. In light of this, the following recommendations are made for future research in this area: first, a scoping study including grey literature and non-peer reviewed articles to collate a greater sample of research conducted on this topic, specifically within an Australian context; second, a mixed methods study into the views of Australian teachers regarding their preparedness to teach traumatised students through surveys and semi-structured interviews; third, a search and review of policies in place within the education departments of each state to determine the scope and strength of trauma-informed policies; and fourth, a search of teacher training materials currently available and a test of selected materials in order to determine their effectiveness and ease of use.

## **Conclusion**

This review collated teacher reactions, experiences, and responses to teaching traumatised students including the need for increased training, clarity around the role of a teacher, support from colleagues and administration, and a level of organisational self-care protocols for school staff. The lack of trauma-specific training reported by teachers highlighted a need for trauma training for pre-service teachers as well as ongoing training for teachers already in the profession. The recommendations made here for ongoing research to facilitate teacher training and assist teachers in translating trauma-informed theory into practice may eventually lead to an improvement in organisational development of trauma-informed practice in schools.

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**Appendices**

<b>CASP Qualitative studies assessment - Table II</b>									
Study	Clear statement of the aims of the research	Appropriate use of qualitative methodologies	Appropriate research design to address the aims of the research	Recruitment strategy appropriate for the aims of the research	Data collected in a way that addresses the research question	Relationship between researcher and [participant adequately/ explicitly considered	Ethical issues explicitly taken into consideration	Sufficiently rigorous data analysis	Research is of value
Alisic, 2012	Yes	Yes	Yes	Yes	Yes	Yes	Unclear	Yes	Yes
Berger, 2020	Yes	Yes	Yes	Yes	Yes	Yes	Unclear	Yes	Yes

**Appendix 1: Quality Assessment of qualitative articles using CASP checklist**

<b>STROBE Quantitative studies assessment - Table III</b>								
Study	Title/Abstract	Introduction	Methods	Results	Participants	Summary and outcome measures	Bias /Generalisability	Overall quality based on authors independent review Research is of value
Alisic, Bus, Dulack, Pennings & Splinter. 2012	High	High	High	Moderate	Low	High	Moderate	Moderate
Cigank, 2020	High	High	High	High	High	High	Low	High

**Appendix 2: Quality assessment of quantitative and mixed methods articles using STROBE checklist**

Synthesis Matrix Tool – Table III

Reference	Quality of resource (peer reviewed)	Participants	Aims of study (underlying arguments)	Methodology (research design)	Limitations	Results (themes)	Conclusions of paper
Alisic, 2021	Peer reviewed	21 primary teachers from 13 schools.	In order to facilitate school psychologists' assistance of teachers working with traumatised children, this study aimed to explore elementary teachers' perspectives	Qualitative. Participants were interviewed and summative analysis was applied.	Purposive and convenience sample. Cohort is predominantly female. Potential researcher designed questionnaire bias.	Several teachers in the study struggled with their role as a teacher and wondered where the teacher role ended and the social work or psychologist's role began. Teachers indicated a difficulty balancing the needs of a student who is struggling with the needs of the whole class. Teachers struggled with giving students extra help or attention but not creating an outcast position. The majority of teachers expressed a lack of competence regarding how they should act when a child has been exposed to trauma. There was also discussion amongst many participants	Although participants identified helpful factors, such as support from colleagues, the main finding is that they struggled with providing support to children after traumatic exposure. Further quantitative research is needed due to the limited number of studies on this topic and to identify characteristic of the teachers struggling the most with the topic.

						about the emotional burden of working with traumatised children.	
Berger et al., 2020	Peer reviewed	27 Primary and Secondary teachers	The study aimed to identify how teachers respond to student trauma, the availability of resources and training for trauma response, and the wellbeing and professional practice issues of teachers regarding student trauma.	Qualitative. Semi-structured interviews were conducted and member checking was completed. Inductive thematic analysis was carried out.	Differing terminology used by participants could not be entirely controlled for. Small sample size and lack of other research on the topic makes generalisation difficult.	Participants described a variation in their experiences of responses to trauma and understanding of what to do to respond to trauma. The emotional consequence of working with students in trauma were discussed. Teachers noticed the behaviour of traumatised students having an impact on teachers' ability to engage in effective and confident behaviour management. There was a variation in responses about the level of training which had been available for staff, school policy for responding to student trauma, and supports available for staff including within the	The study suggested that teachers require ongoing training specific to the identification of trauma, impacts of trauma, balancing roles, responding to students and parents impacted by trauma, and management of the professional and personal impacts of student trauma. Research indicated that training should be provided with structural changes and collegial support, as well as ongoing consultation and feedback to teachers regarding responses to traumatised students.

						school and externally. Participants discussed the barriers to responding including parental denial or detachment, lack of teacher training, and lack of feedback or consultation.	
Alisic et al., 2012	Peer reviewed	765 teachers across 2000 schools in the Netherlands	This study aims to examine the extent that teachers working with students aged 8-12 years report concerns working with students who have been exposed to traumatic stressors.	Quantitative. Participants completed a questionnaire that included 9 items measuring difficulties on a 6-point Likert scale. A multiple regression analysis was then undertaken	Potential bias towards difficulty in Likert scale. Potential self-report limitations. Absent variables (traumatic history of participant, support received from colleagues) This study utilised a new testing instrument which needs further testing to determine psychometric characteristics.	Participants responded to measures in several areas but in particular noted difficulties with high levels of emotional involvement, finding their position as a teacher of academic skills vs mental health care provider, knowing the best ways to support students after trauma, knowing when to refer to mental health care, knowing where to find more information about traumatic stress.	One out of every five teachers who participated in the study expressed high levels of difficulty supporting children after trauma. Given the high number of children who experience traumatic events, the results indicate that many traumatised children receive less than optimal care. This points to a need to develop a institutional trauma-informed practice in elementary schools.
Ciganek, 2020	Peer reviewed doctoral dissertation	Novice teachers in one US school district. 521 Survey	The purpose of this study was to explore how graduates of traditional teacher	Mixed Method. Online survey was made available and then certain	Small sample in one school district in the US. Limited to schools in low socioeconomic	Participants shared common experiences involving classroom	This study established the need for leadership and faculty in traditional

		<p>invitations sent out (Quant) and 8 participants interviewed (Qual)</p>	<p>preparation programs perceive their preparedness to teach students experiencing trauma stemming from adverse childhood experiences.</p>	<p>participants were followed up with a semi-structured interview. Multiple analysis techniques were undertaken.</p>	<p>areas. Sample willingness to participate.</p>	<p>interactions with students experiencing trauma. Participants described examples of positive and negative behaviours seen in students. Participants revealed that they did not feel prepared to work with students experiencing trauma. They stated that there were no specific trauma-related courses in their teacher preparation and so they felt ill prepared. Participants felt that specialised coursework related to trauma was a necessary part of teacher training. Participants also felt that they would have benefitted from clinical experience working with students experiencing trauma.</p>	<p>teacher preparation programs to purposefully transform university coursework and clinical experience to include aspects of trauma-informed care.</p>
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Appendix 3: Synthesis Matrix Tool