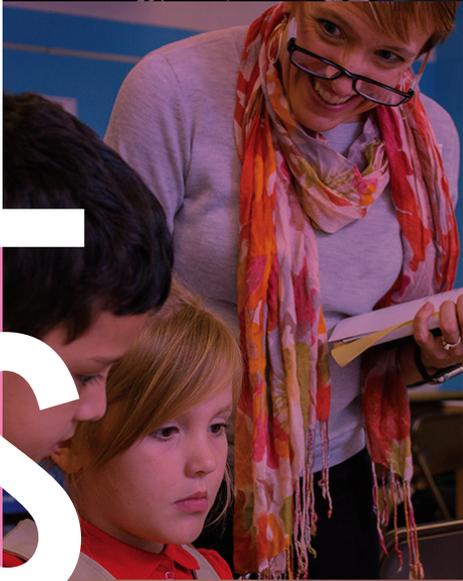




SPECIAL

Trauma-Informed Teaching

ISSUES



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EDITOR'S INTRODUCTION

SAKEENA EVERETT

WE LIVE IN A TIME that requires attention to trauma. Educators and students are learning how to live in this precarious COVID-19 pandemic, which has amplified preexisting health, racial, economic, and educational inequalities as well as how we manage unprecedented natural disasters. The pandemic has shaped us and our students in ways we have yet to understand fully. But we know we must adapt. In an effort to respond to pressing teaching and learning needs, I was asked to curate this special issue on trauma-informed teaching. Specifically, I have been tasked with selecting previously published articles from NCTE journals to help educators implement trauma-informed teaching approaches in K-12 and college classrooms while offering tips for how these articles can be incorporated into our classrooms. In my research for this volume, I learned it is imperative to not only consider *trauma-informed*, but also *healing-centered* teaching practices. This collection is a useful starting point—not ending point—to spark conversation, evoke deep internal and external reflection, and engage strategic pathways forward.

Contextualizing Trauma, Trauma-Informed Care, and Trauma-Informed Teaching

Adverse childhood experiences (ACEs) are potentially traumatic events that occur in childhood. ACEs can include violence, abuse, and growing up in a family with mental health or substance abuse problems (CDC Vital Signs, 2019). The Centers for Disease Control and Prevention (CDC) also argues that ACEs are linked to chronic health problems, mental illness, and substance misuse in adulthood. With ACEs in mind, it is important to explain how I use the

terms *trauma* and *trauma-informed* to explain my approach for curating this special issue. My understandings of *trauma* draw from applied clinical scholarship, which explains that

trauma is the result of an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. (Substance Abuse and Mental Health Services Administration, 2015)

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the governmental agency within the US Department of Health and Human Services that leads public behavioral health efforts. SAMSHA's mission is to reduce the impact of substance abuse and mental illness on America's communities. Furthermore, *trauma-informed care* "views trauma through an ecological and cultural lens and recognizes that context plays a significant role in how individuals perceive and process traumatic events." Trauma-informed care involves vigilance in anticipating and avoiding institutional processes and individual practices that are likely to retraumatize individuals who already have histories of trauma (SAMHSA, 2015). Informed by clinical understandings of trauma, I define *trauma-informed teaching* as teaching that views trauma through ecological and cultural lenses and recognizes how context plays a significant role in how students and teachers perceive and process traumatic events in educational settings.

Neighborhoods and student populations in the United States are largely clustered by racial and ethnic groups. So are rates of exposure to trauma-inducing events and experiences. Yet, trauma may be one of the most underexplored racial equity issues in education (Alvarez, 2020). Trauma can be natural or human-caused. Natural events are typically unavoidable, whereas human-caused traumas are caused by human failure (e.g., technological catastrophes, accidents, malevolence) or by human design (SAMHSA, 2015). The effects of human-caused *historical trauma*—such as genocide, slavery, and internment in concentration camps—can be felt across generations. People's stories, coping behaviors, and stress reactions can be passed across generational lines far removed from the actual event(s) or firsthand accounts.

To effectively engage in trauma-informed teaching, educators must thoughtfully consider the ecological, cultural, and racialized realities that shape exposure to traumatic events. These articles are meant to provide educators with a set of tools to help anticipate and avoid institutional processes and individual practices that are likely to retraumatize students who already have individual, collective, and/or historical trauma histories.

A Brief Snapshot of Prepandemic Trauma in the US

Millions of young people in grade school and college are processing trauma. Approximately 22 percent of students ages 12–18 reported being bullied at school during the school year in 2019. About 16 percent of students in grades 9–12 reported being electronically bullied during the previous 12 months (National Center for Education Statistics, 2021). Younger people are at the highest risk of sexual violence. According to Smith et al. (2018), 81.3 percent (approximately 20.8 million victims) of women under age 25 and 70.8 percent (approximately 2 million) of men under age 25 reported being victims of rape. A decade before the pandemic began, US school shootings became commonplace. According to a CNN report, in the decade leading up to the pandemic, there were 180 school shootings and 365 students killed at school (Walker, 2019). People who experience a tragic event—such as a school shooting, hurricane displacement, or pandemic—endure a *collective trauma*. Even if our students did not directly experience some of the named traumas, they might be processing *vicarious trauma*. Our students might be the children, siblings,

partners, and friends of people with individual, collective, and/or historical trauma histories.

Depression and anxiety are the most common mental health issues in the country. Approximately 21 million people in the US struggle with depression (CDC Vital Signs, 2019). I was deeply alarmed to learn that “suicide is the second leading cause of death among 10 to 24 year-olds in the U.S.” (Heron, 2021, p. 10). Some of those young people who were lost due to (un)intentional self-harm—how the government defines suicide—were our students. You may know their names. It is also worth noting this recent report, published in 2021, only includes death rates up until 2019. It does not include death rates in 2020 or 2021, when the unexpected impact of compounded traumas prompted by COVID-19 deaths and related pandemic losses like food and housing security, jobs, and mental wellness settled in. We need trauma-informed and healing-centered teaching approaches because we do not know our students' trauma histories. We may never know them.

Cultivating Trauma-Informed and Healing-Centered Teaching Frameworks in the Pandemic

Trauma before the pandemic did not go away. Rather, it has only been compounded by the complex traumas of the pandemic. Governmental agencies are still trying to document the ways the pandemic has amplified mental health issues. As Keisha L. Green aptly notes in this volume, “We have never been more in need of frameworks for considering counternarratives and perspectives from the margins toward justice-centered futures.” In addition to compiling trauma-informed teaching resources, my research led me to healing-centered care, which acknowledges but extends the work of trauma-informed care. Ginwright (2018) has argued that “while the term trauma-informed care is important, it is incomplete . . . it presumes that trauma is an individual experience, rather than a collective one.” Therefore, *healing-centered care* has four explicit tenets: (1) to build an awareness of (in)justices and is explicitly political; (2) to view healing as a restoration of cultural identities; (3) to focus on wellbeing, recognizing that people are more than the traumas they experience; and (4) to support adults in their healing as they work with young people. By overlapping trauma-informed and healing-centered frameworks, this volume attempts to support students and educators who are hurting too.

I am not a distant educator or writer. I, too, am entangled in the complexities of understanding, living, and supporting trauma-informed and healing-centered teaching in myriad ways. During the pandemic, our profession has become more stressful. Our schools and institutions of higher education rarely equip educators with the necessary interdisciplinary knowledge and skills we need to meet the increasing demands of teaching or attending to students' social-emotional needs. Furthermore, educators need to be mentally and emotionally well themselves. How can educators provide the trauma-informed teaching and healing-centered ELA classrooms our students desperately need, if we are struggling?

What You Will Find in This Special Issue

Any serious approach toward trauma-informed or healing-centered teaching must include a combination of micro- and macro-level supports. Micro-level supports include skills or individual practices that can support trauma-exposed people. Macro-level support includes programmatic and large-scale initiatives. No one single approach will be sufficient to minimize harm. I have divided this special issue into four sections: (1) navigating pandemic-specific trauma, (2) nuancing the diverse spectrum of trauma, (3) building healing-centered ELA pedagogies, and (4) supporting hurting educators. In carefully curating this special issue, I have examined a combination of micro- and macro-level supports that educators need to engage in trauma-informed/healing-centered teaching and learning.

In the first section, "Navigating Pandemic-Specific Trauma," you will encounter Waffle's poem "A School Is Not Meant to Be Empty," which captures what many educators felt when we were forced to shift our instruction to completely remote. Then, Green prompts us to historicize this unique moment. Garrigues explains how historic moments like the pandemic shape a generation, so we must change our curriculum in the process. Kittle challenges the now common discourse of "learning loss" and urges educators to reevaluate what counts as learning. Silvas describes, "writing is one way to confront, resist, and heal" in the face of trauma. Pazur explains learning management systems (LMS) are vehicles, not substitutes, for compelling teaching and learning and provides a framework for school districts to (re)design the future of distance learning pedagogy. Baxley and Sealey-Ruiz unpack the historical and

contemporary significance of the arts in the Black radical imagination, namely poetry, to push back against anti-Blackness. Garcia problematizes pedagogical complicity in ELA classrooms. Through the tenets of opportunity-centered teaching, Milner et al. invite educators, administrators, and policy makers to assess and disrupt opportunity gaps to build humanizing curriculum, assessment, and relational policies. Kim provides context for the spike in anti-Asian violence during the pandemic and describes how honoring diverse name genealogies and identities might serve as decolonial English education.

The second section, "Nuancing the Diverse Spectrum of Trauma," makes often hidden traumas visible so educators are able to engage trauma-informed teaching in more equitable ways. Jiménez Garcia illustrates how transnational colonial violence against communities of color inform the very concepts of childhood, literacy, and knowledge production that is imagined and rewarded in schools. Nxumalo, through a lens of "Black geographies," expands perceptions of Black children's early childhood literacy learning and offers "decolonial world-building" through "pedagogies of relational reciprocity." Sabzalian centers Indigenous international "sovereign pedagogies" to disrupt colonial erasure of Indigenous peoples, relations to lands and waters, and to expand childhood literacy education. Saeed describes how childhood bullying made school unsafe and hindered her ability to participate in school until a teacher intervened. Homrich-Knieling invites educators to build sustainable relationships with students to "foster empathetic, democratic, and supportive communities." Konrad describes how issues of access appear to be procedural matters, but in reality impact the mental, emotional, and physical labor and wellness of people who live with disabilities. Rogers and Shafer prompt educators to (re)consider the precarious nature of homelessness in the US and Canada and how we work with students. Hadley offers transformative moments for educators to become more effective LGBTQ+ allies for their students. An anonymous parent calls for trans* narratives to support teachers, students, and families in navigating schools. Also, Tayles uses a trauma-informed lens to redesign course syllabi, course documents, assignments, classroom routines, student feedback, and conferencing strategies.

The third section, "Building Healing-Centered ELA Pedagogies," explores the truth that we are

more than our trauma histories. As Ginwright (2018) explains, healing-centered approaches are holistic, involving culture, spirituality, civic action, and collective healing. Flores designs writing workshops for Latinx mothers and daughters to share their collective wisdom through stories about their lives. Ramirez and Donovan activate a guided antibias/antiracist (ABAR) reading protocol to nurture the capacity to notice harm and healing within texts and communities. Hunter and Colón provide a multimodal unit on critical micropoetry to support students in asserting and reclaiming their dignity and humanity. Gallo and Herrmann contextualize adverse childhood events (ACEs) and support teachers in using texts on “heavy topics” in the classroom to help trauma-exposed youth feel seen and validated. Eisenbach and Greathouse destigmatize mental illness and promote mental health support through classroom texts. Clark et al. use picture-books to teach *with* and *against* social and emotional learning. Additionally, Durkin redesigns reading workshop to include flexible strategies for sparking empathy during COVID-19.

The fourth and final section, “Supporting Hurting Educators,” acknowledges that while teachers have capacity to support students, they hurt too. Building from a healing-centered framework, the articles in this section consider ways to support educators in their own healing. Czaia’s poem “I Don’t to Write a Poem for My Dead Students” captures the angst and sorrow teachers might feel when they lose students. Husbye et al. name difficulties teachers might have in teaching texts that involve death and grief, and they provide modeled support for teachers. Dunn makes the “emotional labor of teaching” among preservice, inservice, and teacher educators both visible and valuable. Finally, Everett and Dunn advance a new framework, “intersectional grief,” and offer practical micro- and macro-level considerations for educators and administrators to support grieving colleagues.

Being a trauma-informed or healing-centered educator is a career-long pursuit. This volume is designed to help educators build the capacity to do the arduous but necessary work of trauma-informed and healing-centered teaching. As you move

through this volume, I invite you to consider: Who is most harmed by a given trauma? What can be done to support them? How might a shared trauma impact different groups of students and educators differently? As we think through ways to support the most harmed people in our teaching and learning communities, we will move closer to a more equitable and just healing-centered profession. In the pages that follow, you will find valuable insights, diverse perspectives, innovative and exciting pedagogies, as well as thought-provoking research methodologies that engage micro- and macro-level supports you need to get started today. ■

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