A PHENOMENOLOGY STUDY- VICARIOUS TRAUMA AMONG SCHOOL COUNSELORS AND TEACHERS WORKING WITH STUDENTS FROM THE NORTHERN TRIANGLE IN ELEMENTARY TITLE I SCHOOLS

Janeth B. Santiesteban

Department of Community Care and Counseling, Liberty University

A Dissertation Presented in Partial Fulfillment

of the Requirements for the Degree

Doctor of Education

School of Behavioral Sciences

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Approved by:

Dr. Michel Weuste, Committee Chair

Dr. Jama Davis, Committee Reader

Abstract

The present phenomenological study aimed to describe the lived experiences of school counselors and teachers working at elementary Title I schools in Maryland with students from the Northern Triangle (a region of Central America comprising El Salvador, Guatemala, and Honduras). The assumption was that these education professionals may undergo struggles and demands that may put them at risk of vicarious trauma due to the trauma those students and their families have endured. The theory guiding this study was the transactional theory of stress and coping (Lazarus,1966; Lazarus & Folkman, 1984) and the stress theory (Cohen et al., 1997), which converge the bidirectional nature between individuals and their environment and how the individuals' stress reactions depend on their social, psychological, and biological responses to that environment. The researcher engaged in extensive interviews to define how these staff members made sense of their experiences and how exposure to students' traumatic experiences and needs may have made staff prone to vicarious trauma. The sampling included twelve in-depth participant interviews and a focus group to provide experiential statements. The literature review comprises the theoretical framework, emotional trauma, children's attachment, students from the Northern Triangle and adverse childhood experiences (ACEs), effects on their academic achievement, vicarious trauma, and post-traumatic growth, and its effects on teachers and school counselors in Title I schools.

Keywords: Vicarious trauma, students from the Northern Triangle, teachers, school counselors, mental health, Title I schools, immigrant children

Dedication

To my husband, Miguel, my best friend and strongest motivator, thank you for believing in me and loving me more than I had ever felt.

To my sons, Miguelangel and Nicolas, because they are simply my everything! They have encouraged me to believe and accomplish this dream since the first day. They reminded me daily how proud they were of me for pursuing this doctoral degree despite the challenges as I struggled with a second language that I was still trying to learn. My youngest son used to sit next to me so we could be together, and he reminded me not to give up. His words served not only as encouragement to me but as validation that, as parents, we have instilled in our children perseverance.

To my beautiful native country, Colombia, because all the obstacles were also opportunities. I was just a little girl who was repeatedly told, “You never will be anything; poor people never get anywhere.” Instead of stifling, those words inspired me to believe in myself and that we can achieve anything we dream of with persistence, vision, and hard work despite the circumstances.

To all the teachers and school counselors in Title I schools whose mission is to care and believe in their students despite the barriers and struggles, they are a light that guides the future. They are real superheroes.

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To my mother-in-law, Aida (suegrita), and my sister-in-law, Maytee, you ladies have been terrific support in my journey. “Suegrita,” your maternal love has given me so much reassurance; thanks for being my other mom. Maytee, without your help during my master's degree, I would not have become the school counselor I am proud to be today.

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CHAPTER ONE: INTRODUCTION

Overview

This chapter provides the framework and background for the research, including the problem statement, its focus and population, information about the theoretical gaps, and the literature context to understand the phenomena. The situation of the self section outlines the motivation for researching the problem and the needs in the school system regarding the Northern Triangle immigrant students and the staff's efforts to support them. The statement's purpose explains the *how*, *why*, and *direction*, followed by the significance of addressing the literature gap about the problem. The research questions section, derived from the problem and purpose statements, covers the Title I staff's lived experiences and how they process and deal with their work with students to help their social-emotional and academic achievement. Clarification and definitions of pertinent terms, such as Title I schools and Northern Triangle, as well as preview conceptualizations of vicarious trauma, are included. These concepts are paramount in understanding the study's context. Lastly, a summary will show an overall synthesis of the main ideas presented in the chapter.

Background

We never know what we can become for others through our Being.

-Martin Heidegger, *Letters: 1925-1975*

Trauma and its effects on individuals have been a concern for most social, psychological, and political fields concerned with its impact on society. During the last 30 years, considerable research has focused on trauma impacts on mental health professionals (Lee, 2014). Through those years, research has maintained that counselors who work with traumatized clients may suffer harmful stress that can lead to post-traumatic stress disorder (PTSD) due to continually

hearing unpleasant and negative client experiences (Lanier, 2019). Research has documented that chronic stress can harm professionals' well-being, making them prone to burnout, compassion fatigue, vicarious trauma, secondary traumatic stress (STS), and disturbance (Figley, 1995). The helping professions are especially at risk of the adverse effects of others' trauma and others' post-traumatic stress symptoms, affecting them emotionally, socially, and physically (Jankoski, 2012).

Furthermore, extra attention has been dedicated to the short- and long-term effects that trauma can cause in the helping professions when the helpers become over-involved in the survivors' pain. The attention to these effects has created an extensive debate about the symptoms of stress and the interventions necessary to protect mental health helpers from the exposition of their clients' trauma. When exposed to the survivors' painful experiences, the helper's unique cognitive schemes or beliefs, expectations, and assumptions of self and others can be adversely affected, causing reactions like PTSD symptoms (McCann & Pearlman, 1990). Signs of vicarious trauma may affect the professional at work, home, and community relationships. Vicarious trauma accumulates and can become permanent if not treated (Jankoski, 2012). This concern has called for research and trauma-informed interventions to support trauma survivors and their helpers.

This research focused on the elementary school counselors' and teachers' experiences as they typically stay with the same group of students during the day and the school year, contrasting with middle and high school teachers who meet different students transitioning during the day. Spending more hours during the day presents more opportunities for elementary teachers and school counselors to spend direct time, develop relationships with their students, and know them better (Craig, 2008). School counselors and teachers in elementary Title I

schools may be exposed to vicarious trauma because they often are exposed to the traumatic stories that some students may unveil. Many children and their families from the Northern Triangle endure stress and trauma before, during, and after migrating to the United States. These staff members face challenges in supporting students suffering from complicated social and emotional situations, risking secondary traumatic stress and compassion fatigue (Newman, 2022). However, little research has focused on school counselors' and teachers' struggles when working with highly traumatized students. Also, though some research has focused on burnout and compassion fatigue among school staff (Abraham-Cook, 2012; Caple, 2018; Kotowski et al., 2022), vicarious trauma has not been researched in depth for those professionals.

Concerning qualitative research on this topic, one discovered that qualitative research was highlighted as limited within the school counseling and teacher literature, representing fewer than 20% of empirical studies (Heppner et al., 2016). Also, Cozby (2009) and Creswell and Poth (2018) highlighted the importance of this type of method in counseling, especially when working with behavioral and multicultural research. Some qualitative research has focused on educators' views of trauma-informed intervention beliefs and behaviors compared to the number of years in the profession (Adame, 2016), but not how exposure to students’ trauma may hinder their mental health. Also, some qualitative research has focused on burnout and secondary trauma (Lee, 2014; Parker & Henfield, 2012). Still, none has assessed the particularity of working with students from countries like the ones in the Northern Triangle and the residue of exposure to those students’ stories and experiences before, during, and after migrating.

The present research focused mainly on students from the Northern Triangle because of their specific circumstances, the recent increase in immigration in the United States, particularly in some Maryland counties, and the gap the researcher noticed in the literature. In this regard,

research has been dedicated to children and immigrants from Central America, but primarily to Mexican students (Todd et al., 2018). As explained in depth later, students from the Northern Triangle come from countries with a long history of corruption and violent political, social, and economic circumstances. Therefore, the vision for the present dissertation was to develop a qualitative analysis that allowed an understanding of the experiences and professional demands that staff working with students from the Northern Triangle face in Title I schools through an interpretative approach that includes the participants' voices. The belief is that school counselors and teachers may develop vicarious trauma that significantly affects them and usually passes unnoticed by the school system and society.

Situation of Self

Ontological and epistemological assumptions represent the main constituents of research, as they provide the framework of understanding for qualitative research (Palagolla, 2016). The researcher's ontological assumption is that each Title I staff member interprets and lives their experience in the school system in particular manners that frame their performance and solve their reality at work and in life. The researcher believes that participants in this research brought their unique views, descriptions, and depths to help comprehend the phenomena being researched (Creswell & Poth, 2018). The epistemological assumption is that the understanding of the phenomena can be gained through an empathic approach to the participants' lived experiences and be described under their subjective lived realities, experiences, and insights.

Researchers often bring their beliefs and philosophical assumptions to their research (Creswell & Poth, 2018). This investigation is not different from that position as a school counselor in two elementary Title I schools, one has witnessed firsthand the struggles that professionals in the school system face with students' emotional, academic, and psychological

gaps. She has witnessed how teachers feel burned out and counselors are exhausted and devastated as the emotional demands from their students have increased significantly after the COVID-19 public health response. These experiences have influenced how, as a researcher, one will seek the information and serve as a basis of evaluation to answer the research question.

The author was born in an impoverished neighborhood in Medellin-Colombia; she lived in social and political situations similar to those of the low-income communities described in the countries from the Northern Triangle. Due to the lack of work and academic opportunities, she migrated first to Spain and then to the United States. As an immigrant, her background has helped her effectively work in one of America's most diverse cities as a school counselor with children who have experienced interpersonal trauma. Often, her students demonstrate symptoms of Post Traumatic Stress Disorder (PTSD) that influence their academic performance, classroom behavior, and relationships with peers, school staff, and family members. Many of them never obtain a PTSD diagnosis nor receive mental health services due to the high mental health demands and the lack of bilingual counselors. Though she works collaboratively with other agencies to support these students, she has experienced the frustration and pain of not finding enough therapeutic resources to help them and their families. She has discovered, meeting with other staff members working in Title I schools, how these professionals struggle to support several of their students who often have been exposed to significant traumatic life events such as rape, negligence, sexual and physical-emotional abuse, political, social, and family violence, prolonged separation from parents due to immigration, and other different situations where they and their families fear for their lives. Adverse Childhood Experiences (ACEs) undermine children's sense of safety, stability, and bonding. They are potentially traumatic, adversely affecting health, well-being, education, and life opportunities (Centers for Disease Control and

Prevention [CDC], 2022). Due to the frequent demonstration of ACEs by students, teachers, and school counselors often must call Child Protective Services (CPS) to denounce maltreatment and abuse. At its worst, counselors must contact the Crisis Center due to suicidal ideation and self-harm, experiences that are challenging to toil through for the staff. The researcher has been compelled to testify and provide documentation relevant to the investigation that CPS has issued against guardians for sexual and physical abuse against some of her students. She has denounced cases where the students have been removed from their biological parents and placed in foster homes. She has witnessed how students' mental and emotional health is imperiled due to inadequate help and coordination between agencies.

Several students frequently have crises where they destroy school property and attack other students or staff members due to their dysregulation and arousal. For instance, one of her students in foster care with whom she has worked intensively tried to attack her with a teacher's scissors in one of his crises. Another student was choking a teacher in front of the class, then ran, threatening and hitting staff, students, and people around him. Her students often have come to reunify with parents whom they barely know. Once reunited with their parents, they must leave behind those who reared them and relearn to attach to their progenitors. They have vast years of academic and emotional gaps. For instance, several fifth graders have arrived without academic education, but because of their age, they are placed at that level with minimal support for their deep educational needs. They struggle with adaptation, language, cultural, and social barriers.

Problem Statement

Although the federal government is taking steps to reduce the influx of undocumented immigrants, less attention has been dedicated to what happens after the families and their children are inside the United States and how to address the demands placed on public services

such as K-12 public schools (Culbertson et al., 2021). Camarota et al. (2017) reported statistics that show the impact of immigration on public schools in several areas of the country where schools have already struggled to educate students from disadvantaged backgrounds, like Title I schools. Many immigrant students have little formal education, come from impoverished households, and demonstrate several trauma symptoms, creating significant challenges.

School counselors are responsible for addressing students' mental health and developing interventions to help their social-emotional academic achievement (Beames et al., 2022). Similarly, staff members must play the role of advocates for students and their families in schools. However, this endeavor seems more challenging when they work in schools with a substantial concentration of students who have suffered trauma and are undocumented. Several studies have denounced how students' and families’ legal status become a significant stressor in their lives and general functioning (Greenfield & Quiroz, 2013; Patel et al., 2016; Cebolla & González, 2021), with critical academic, emotional, and social consequences. These students and their families must survive in a new country with immense language, cultural, social, and economic challenges and barriers. In addition, their impaired childhood and trauma may have put them at risk of numerous severe medical and mental health conditions, such as PTSD, affecting school performance and overall life (Brown et al., 2020). School staff must advocate for students' equity and academic access (Crawford et al., 2019). However, this is not an easy endeavor in the circumstances expressed, as it has considerable empathy and stress implications for those professionals. Research has documented that if cumulative stress becomes chronic, it can harm professionals' well-being, affecting their ability to perform their duties and making them prone to burnout (Lee, 2014). Thus, staff working in low-income schools (Title I) may be more exposed

to vicarious trauma, secondary traumatic stress, compassion fatigue, emotional distress, and burnout due to engagement with their students' trauma and exposure to their experiences.

The adverse events disclosed by students and families may be distressing and psychologically overwhelming for teachers and school counselors often exposed to those stories. They are not encouraged to talk about their feelings in working with traumatized students nor address concerns about vicarious trauma in spaces that help them process and self-care at their work (Levkovich & Ricon, 2020). Individuals working with trauma victims may feel vulnerable because they may absorb their students suffering (Figley, 1995). This painful process for helpers of trauma victims was named vicarious traumatization by McCann and Pearlman (1990). The researcher believes this topic continues to be frequently under-attended and often ignored by the school system, community, and society, and it is taking a significant toll on educators and school counselors, leading to physical and psychological difficulties.

Purpose Statement

This phenomenological study aims to describe the experiences of school counselors and teachers working in Title I schools and the possible risks of vicarious trauma due to their work with students who may have suffered traumatic experiences in their homelands or during their immigration to the U.S. To the author's knowledge, no previous research has reviewed how the work in Title I schools with students from the Northern Triangle may affect the school staff's roles and mental health, increasing the risk of vicarious trauma. Vicarious trauma will be outlined as the staff's harmful changes in the view of themselves, others, and the world due to secondary exposure to their students' trauma. In addition to students' primary physicians, school staff members are likely to be the first professionals who traumatized students contact before being referred to mental health services, functioning as the first line of intervention for students

in crisis (Parker & Henfield, 2012). School staff may see their practice, responses, and self-mental health compromised due to the risk of internalizing students' emotions associated with traumatic events. McCann and Pearlman (1990) stated that limited frameworks of burnout and compassion fatigue are not enough concepts to explain the impact that working with trauma victims may have on individuals. Thus, they developed vicarious trauma to present the therapist's long-term and unique strains when processing their clients' graphic, violent, and painful traumatic experiences. Teachers and school counselors are not therapists, but as schools strive to address the needs of students who have suffered trauma, it becomes clear that they are often the first line in supporting those students and need support to implement effective practices for the care of those students and themselves.

The theory that guided this study is the constructive self-development theory (CSDT) developed by McCann and Pearlman (1990), which focuses on three psychological systems: 1)The self, 2) psychological needs, and 3) cognitive schemas. This theory would be preponderant in understanding the endeavors that Title I school counselors and teachers who serve students who may have been exposed to one or more ACEs endure, as well as the support and successful practices to avoid vicarious trauma while supporting their students effectively.

Significance of the Study

This study addressed a gap in the literature about teachers and school counselors in elementary school staff in Title I schools and the potentially harmful effects, such as vicarious trauma, they may suffer. An essential aspect of this study was to unveil the struggle that elementary school students and families endure when migrating to the United States country and the limited resources when suffering from PTSD and other mental battles due to past and present traumatic and immigration experiences. Mental health intervention is limited as these students do

not have any insurance or have a limited one for qualified uninsured children (Maryland Health Connection, n.d.). The high demand for mental health resources and the language barriers make these referrals difficult and sometimes impossible. Considering that existing data suggests undocumented students may have a higher risk for mental health problems and lower service utilization than other populations (Cha et al., 2019), it is urgent to understand how immigration status hinders mental health services due to eligibility and insurance coverage barriers and how school staff battle to make those referrals.

Families also belittle the need for mental health treatment because they normalize the psychological strain as a natural product of their unstable immigration status (Cha, 2019). Those are the barriers that school staff find in dealing with the challenges that working with these populations brings to their work and the many other responsibilities they have in the schools. Research indicates that the staff's perceptions of the school's responsibilities and partial role in students' mental health significantly influence students' physical and psychological development (Beames et al., 2022). In this regard, it is essential to have an overview of educators' challenges in supporting students with extreme trauma to support them in addressing mental health issues (Newman, 2022). Concerning school counseling, Lanier (2019) focused on understanding the relationship between vicarious trauma symptoms and subthreshold Post-traumatic Stress Disorder (PTSD) and the frequency of this occurrence among practicing counselors. Beames et al. (2022) addressed how secondary school teachers and counselors in Australia perceived the school’s role in student mental health, suggesting that schools often have more reactive than proactive actions in matching their students' mental health needs. Another study focused on the challenges of underserved students in schools and the influence that training on school counselors' self-efficacy may have in those students' lives (Bunch, 2019). However, none of

these investigations focus on the elementary school level or the specific challenges that school staff working with students from the Northern Triangle with various traumas and language barriers may bring to the profession in Title I schools.

In sum, this phenomenological study captured the stories and experiences of school staff working in Title I schools and how students' traumatic stories may have affected their lives. The central issue is that the school system and staff often ignore the emotional toll of working in high-stress, ostensibly hopeless situations, seeing, listening, and responding to students who suffer emotional pain. Thus, they do not count on optimal resources and spaces where they can share their experiences and decompress. There is a need for trauma-informed interventions and mental health services for undocumented students, mechanisms for vicarious trauma prevention for Title I staff, early identification, and rapid response that enables self-care for all.

Research Questions

The Central Question

What meaning do teachers and school counselors from elementary Title I schools in Maryland ascribe to their work with students from the North Triangle, and how prone are they to vicarious trauma?

Sub Questions

1. How do teachers and school counselors working in elementary Title I schools with students from the Northern Triangle describe their lived experiences?

It takes an army to educate a child! Teachers, the most recognizable personnel in this endeavor, are only part of the big team that educates and supports students in schools (Craig, 2008). The school faculty is integrated by teachers, school counselors, special education teams, intervention specialists, coaches, paraeducators, drivers, maintenance, and administration. They

all have a substantial role in schools, and although at different levels, they develop unique relationships with their students. Even though every staff member in these schools may be exposed to the students' traumatic stories, this study opened an invitation to elementary Title I school teachers and counselors. For instance, teachers of English for Speakers of Other Languages (ESOL) aimed to address newcomers' linguistics and academic needs, hoping to help close the gap for those students. However, these teachers encounter barriers when enhancing motivation and engagement due to the effects of trauma and educational gaps on their students (Craig, 2008). These experiences and possible closer relationships with these students and exposure to their traumatic stories may impact these professionals' mental health (Conrad, 2019). Concerning homeroom teachers' experiences, they are the force that initiates and puts in place interventions that support their students during the day. They must understand how trauma manifests and its implications for the student's academic growth, behaviors, and safety (National Council of State Education Associations [NCSEA], 2019). However, this endeavor is arduous when working with students who have experienced two or more adverse childhood experiences, as they often exhibit violent outbursts and interrupt instruction (Camarota, 2017). The students' unpredictable behaviors demand teachers' decisive action to control the situation without affecting educators' and students' psychological well-being and safety, which can also cause significant distress.

Research has focused on teachers' perspectives in working with students with trauma, such as the sudden loss of a loved one, serious traffic accidents, violence, and disasters (Alisic, 2012). However, little has been found in the literature regarding how school staff manage their feelings and emotional struggles when dealing with the students' traumatic material and the specific circumstances that the students from the Northern Triangle suffer. The present question

allowed the researcher to explore the interviewees' experiences working with students who have experienced trauma and the potential to suffer vicarious trauma.

2. How do school counselors and teachers from elementary Title I schools describe their feelings when listening to the students' traumatizing experiences?

3. What support or resources are in place in their institution to support teachers and school counselors when working with these students?

There is a need for strategies to support students who have suffered trauma to access education and support those teachers in their work. Stress and burnout are significant in elementary schools, especially in Title I schools, where teachers and school counselors serve students from prevalent poverty areas with challenging life situations and high-stress environments (Brown, 2017). The perceived support teachers in Title I schools feel from the system influences how teachers feel under their occupational stressors. Research has shown that these teachers often struggle with emotional burnout and lack of job satisfaction because their students struggle, as well as because of deficient leadership support and high demand in their work. These experiences may interrelate with their feelings about their job and students (Solomon, 2017).

4. What are the relational and professional practices that school counselors and teachers in elementary Title I schools feel must have to help students' social-emotional academic achievement?

Substantial research has focused on the mental health of therapists and first responders' vicarious trauma (Sprang et al., 2019). Still, scarce literature has focused on the risk that school counselors and teachers have of this burden. For this reason, research is needed to help prevent and identify symptoms, best practices, approaches, and treatments for secondary traumatic stress

that may help staff avoid possible vicarious trauma (Sprang et al., 2019). As schools attempt to address the mental health needs of students who have suffered trauma, it has become apparent that school staff also need support. For this reason, the National Council of State Education Associations and the NEA Center for Great Public Schools reported concerns about school trauma, its impact on education, and the need for trauma-informed practices that include educators' self-care to ensure their success and retention (NEA, 2019). However, the reports do not reflect the specific endeavor of working with students with several ACEs, language, and cultural barriers, as many children from the Northern Triangle continue to arrive in growing numbers at our schools. That report was also published before the COVID-19 pandemic, which has been demonstrated to have exacerbated the issue of compassion fatigue for educators in multiple ways (Newman, 2022). These two last questions will help to inquire about the interviewees' feelings and perception of adequacy when working in Title I schools and with children who have experienced trauma and the possible impact on their lives.

Definitions

Before providing the theoretical framework that guided this study, there is the need to clarify the Title I schools, Northern Triangle, and vicarious trauma concepts as they are fundamental to the present research.

Title I Schools

Title I schools are designed to serve high-poverty communities where needs are greatest. Those schools often have the highest percentage of children growing up in poverty and English Learners (Els). Many Els and their families do not have legal status in the U.S. (Camarota et al., 2017). They are regularly affected by immigration enforcement politics that put their families in a complicated situation, sometimes having to contemplate breaking apart (Perreira & Ornelas,

2013). Educators report students' declining academic performance and increased absenteeism as profoundly serious issues in school due to emigrants' high mobility (Ee & Gándara, 2020). Students in Title I schools are more likely to experience homelessness, hunger, unstable home life, hunger domestic and family abuse, and unresolved medical issues (NEA, 2019).

Title I schools receive federal allocation funds to operate programs designed to benefit students from low income based on census poverty estimates and the cost of education in each state (Maryland State Department, 2022). Maryland's student population has become increasingly diverse, and according to the Maryland State Department (2022), the 2022 school year enrolled 21% of Hispanic/Latino students, with several families living in concentrated poverty per housing unit. This report also reveals how the Hispanic student population has been a primary group growing significantly between 2017 and 2022 in different areas of the state, with a significant amount of Central American immigrants.

Northern Triangle

The "Northern Triangle" is the term given to the region of Central America, encompassing El Salvador, Guatemala, and Honduras. This region ranks among the top ten countries experiencing violence worldwide due to state repression, political instability, and sustained violence (Cheatham & Roy, 2022). For instance, El Salvador had a murder rate of 109 per 100,000 inhabitants in 2015, turning this country into one of the most violent in comparison with other dangerous countries that year, like Syria, Iraq, and Somalia (Stromquist, 2019). The history of violence that the Northern Triangle has experienced includes a long record of prolonged civil wars, armed conflicts, and political and State-sponsored violence (De Jesus & Hernandes, 2019). These countries are caught between the world's largest drug producers and consumers, high poverty rates, and armed conflict. Moreover, Central America has one of the

most elevated rates of femicide or gender-motivated crimes. For example, Musalo and Bookey (2013) have explained how Guatemala has become a dangerous place, especially for women and girls, demonstrated by the increased rates of violence against them and the lack of interventions and impunity, often resulting in their deaths.

Gang involvement is a significant risk factor for many families fleeing their countries from the Northern Triangle. These families come to the U.S. fleeing for their lives because they have either received threats by gangs aimed at their entire family or fear their own lives when they can't pay the extortion groups impose. Ambrosius (2021) explains that the gangs that lash Central America have often formed from deported convicted gang members from U.S. metropolitan areas. The incursion of the extradited felons becomes an exodus that sparks violence in the northern triangle cities when these gang members reproduce and become the dominant force in the area with all the tradecraft of organized violence they have learned. Ambrosius (2021) explained that, unfortunately, the governments and international intentions to control the violence in the Northern Triangle have been unsuccessful because of the lack of social, institutional, and economic capacities to prevent the spread of gang organizations. Names like MS-13 and the 18th Street Gang are part of the extensive transnational criminal network that has reached out from the U.S. to Central America. Perreira and Ornelas (2014) explained how pre-migration poverty and adverse situations combined with clandestine entry to the U.S. increased the risk of trauma and post-traumatic stress disorder (PTSD) among the children and their primary caregivers.

Vicarious Trauma

McCann and Pearlman (1990) developed the term vicarious trauma to explain the therapist's unique forms to understand and process the graphic and painful long-term exposure to

their clients' traumatic experiences and trauma material. Vicarious trauma may adversely influence mental health helpers and professionals in the caring professions, such as first responders, health care, and social workers, possibly leading to symptoms of post-traumatic stress disorder (PTSD) (Michalopoulos & Aparicio, 2012). It may affect their worldview, beliefs, and mental health from the emotional impact of listening, seeing, or responding to trauma survivors' pain (Jankoski, 2012). Some symptoms include continued preoccupation with patients outside of work, being overly involved emotionally with the survivor, feelings of anger or sadness about the survivor's victimization, and difficulty maintaining professional boundaries.

Numerous terms with overlapping characteristics related to vicarious trauma have been used, leading to vocabulary mismanagement and incorrect terminology. Those terms include burnout, secondary trauma, and compassion fatigue (Branson, 2019). Burnout is the emotional exhaustion, strain, and excessive and prolonged stress in dealing with people's pain; it may cause job dissatisfaction, low performance, absenteeism, and adverse physical and mental well-being (O'Connor et al., 2018). Secondary stress relates to the emotional investment and act of compassion in helping those suffering from trauma, generating tension, preoccupation, and negative psychological symptoms such as fear, difficulty sleeping, intrusive thoughts, or avoidance (Figley, 2002). Then, Figley (1999) called compassion fatigue the "cost of caring" (p.10), meaning the helper's empathetic engagement with the survivor's pain. The difference between these terms is very subtle; while burnout, secondary stress, and compassion fatigue result from the helper's exposure to the survivors' traumatic incidents on an empathetic level, vicarious trauma is the accumulative concern about the survivors and their trauma, affecting the helper in the cognitive realm by embodying the trauma survivors' emotional responses (Bledsoe, 2012).

Summary

The present chapter offered background on the need for a qualitative narrative that helps explain the professional demands that school counselors and teachers endure in working with students from the Northern Triangle due to the trauma that these students may undergo. The researcher disclosed how her experience had shaped her interest and concern about this phenomenon and how it continues to be ignored by the school system, community, and society. The main terms used during the research, Title I schools, Northern Triangle, and Vicarious trauma, were explained. The background explained establishes the need for research that helps comprehend those demands to advocate for effective practices for teachers and school counselors while serving their students effectively.

CHAPTER TWO: LITERATURE REVIEW

Overview

While chapter one provided an overview of this study, chapter two addressed the theoretical framework that guided it. It encompassed the stress and transactional theories of stress and coping, the literature gap about elementary school staff's experiences in Title I schools, their work with students from the Northern Triangle, and the physical, cognitive, emotional, mental, social, and spiritual effects that it may have on them. To this end, terms such as cognitive appraisal, problem-focused, and emotional-focused coping are described. The related literature part focuses on trauma, development, and its impact on individuals' social, emotional, and healthy growth as a base to explain the presence of childhood trauma for some students in Tite I schools. In addition, this chapter focused on the Title I staff's unique emotional demands, preparedness, and concerns when working with traumatized students, the risk of vicarious trauma, and the challenging impact that COVID-19 had on the world, specifically on students and the school community. Finally, aspects of post-traumatic growth are discussed, ending with a chapter summary.

Theoretical Framework

Compassion fatigue (Figley, 1995), secondary traumatic stress (Stamm, 1995), and vicarious traumatization (McCann & Perlman, 1990; Pearlman & Mac Ian, 1995; Sexton, 1999) are terms that have been developed to explain the emotional demands that professionals in the helping professions overpass because of their exposure to the survivors' traumatic memories. However, these trauma-related constructs have focused more on healthcare professionals, first responders, social workers, and therapists. Though new literature has merged focusing on teachers' and school counselors' burnout (Caple, 2018; Lawson et al., 2019; Levkovich & Ricon,

2020; Newman, L., 2022; Kotowski et al., 2022), no studies have focused on school staff' vicarious trauma risks when exposed to students' trauma stories or symptoms. Moreover, when their work is in Title I schools with a significant influx of undocumented students.

Stress is a complex phenomenon influenced by environmental demands, internal psychological processes, and physical outcomes rooted in theoretical perspectives like social, psychological, and biological to explain our reactions to the environment (Surachmn & Almeida, 2018). Using the stress theory and applying it to professionals in the school system, one can say individuals may react differently to the stressors that working with students impacted by trauma may create. Some may respond to developing social-emotional and physical adverse reactions. In contrast, others may develop psychological growth and resiliency depending on their innate strengths, expectations, and supportive connections like family, peers, and work (Buck, 2012). Professionals may react differently to the stressors of their profession and the type of cases they are exposed to; some may thrive, while others may struggle according to their vulnerabilities and individual coping mechanisms (Hankin & Abela, 2005). The next part will explain the theoretical frameworks that will situate this study and embrace the phenomenological effect that exposure to students' traumas may cause on Title I school staff in the threshold of their work.

The Stress Theory History

Stress is a social concept from psychobiology, sociology, psychiatry, and anthropology that explains the potential damage caused by external environmental demands (Cohen et al., 1997). Research about stress is abundant in the present, mainly referring to negative experiences related to the pressure that health, work, relationship issues, and general life may cause in the person (Robinson, 2018). However, this term is relatively new in the behavioral field. In its early years, it mainly used physical content to describe different types of bodily tensions or physical

injury (Bernard, 1872; Selye, 1956; Cannon, 1898). Though still an elusive term, stress has evolved to include the cognitive process in which an individual responds to ordinary and extraordinary conditions and where environmental demands, internal psychological strategies, and physical outcomes play a critical role (Surachman & Almeida, 2018).

Critical Exponents

Claude Bernard (1813 - 1878). The French physiologist Bernard has been considered the father of experimental medicine because of his devotion to experimental treatment. He coined the term *milieu intérieur* and the associated notion of homeostasis, referring to the body's ability to stabilize against disturbances from outside (Robinson, 2018). Bernard used stress to explain the threats of anything that can jeopardize homeostasis (Schneiderman et al., 2005).

Sir William Osler (1849- 1919). Osler was a Canadian pathologist and one of the first contributors to the use of stress concerning health outcomes. His observations focused on the long-term consequences that health responses to environmental conditions might have on the individual (Robinson, 2018).

Walter Cannon (1871–1945). He was considered one of the most respected American physiologists of the 20th century (Brown & Fee, 2002), and he centered his interest on acute bodily changes due to human stress response (Wilson & Keane, 2004). Cannon was drawn to problems in the physiology of emotion as he noticed that when animals were scared or disturbed, their bodies released adrenaline to mobilize as an emergency response of "fight or flight," displaying tremendous energy (Brown & Fee, 2002).

Hans Selye (1907–1982). Recognized as the father of stress theory, he incorporated stress for the first time in medical literature to explain the "nonspecific response of the body to any demand" (Tan & Yip, 2018, p. 170). Unlike his predecessors, which focused on specific

physical signs and symptoms, Selye focuses on the patient's reactions to illness (Tan & Yip, 2018). He coined the general adaptation syndrome (GAS), which he later renamed the stress response, referring to a consistent three-stage pattern of physiological responses to stress (Robinson, 2018). Selye noted acute stress from the heightened response to chronically applied stressors, known as the 'general adaptation syndrome,' also acknowledged in the literature as Selye's Syndrome (Tan & Yip, 2018).

Richard Lazarus (1922–2002). A cognitive American Psychologist. Lazarus was recognized for his cognitive-mediational theory within emotion. Lazarus played an essential role in advancing stress research, bringing a multi-dimensional appraisal of the evaluation of external events and other factors to explain the responses to psychological stress depending on the personal meaning and emotions to interpret or appraise stressful conditions (Robinson,2018).

Stress can be viewed as delineated for three components: stressors, stress appraisal, and distress; each of these elements is accentuated in one of three theoretical stress perspectives: social, biological, and psychological (Cohen et al., 1997). The social stress perspective focuses on the origins of stressful life experiences where exposure to external demands is inserted into the person's position in society, social structure, social organizations, roles, and other social constructs (Surachman & Almeida, 2018). The biological stress perspective focuses on the severe and long-term changes in the body due to the activation of physiological systems (sympathetic-adrenal medullary system and the hypothalamic-pituitary-adrenocortical axis) that result from social stressors and their associated psychological assessments (Uhernik, 2017). The Psychological Stress Perspective focuses on people's perceptions and their evaluation of the potential danger in the external environment demands (Cohen et al., 1997). Psychological stress and appraisal and coping are two significant concepts to this perspective. They will be explained

in depth in the following part, as this perspective will frame the theoretical component of the present research.

The Transactional Theory of Stress and Coping

Lazarus and Folkman (Lazarus,1966; Lazarus & Folkman, 1984) have shaped a stress theory to describe the relational, dynamic nature of the transactions in which stress may evolve. Their transactional approach maintains that the individual's judgment of the situation dramatically influences their subsequent emotions, coping strategies, and following outcomes (Biggs et al., 2017). Lazarus and his graduate student Susan Folkman posited that people use two coping styles based on the appraisal of their situation: problem-based and emotion-based. The first refers to the practical steps taken to manage the problem, and the second relates to how emotions are contained when the individual is stressed (Folkman & Lazarus, 1980). Integral within this transactional approach is the bidirectional nature between individuals and their environment and a relationship between them where neither the individual nor the environment alone produces stress but a complex transaction between them (Biggs et al., 2017). In sum, the key concepts in this theory include cognitive appraisal and problem-emotion-focused coping strategies that individuals have when managing stressful situations.

Cognitive Appraisal

This concept is essential to understanding and dealing with the significant individual differences in emotional intensity, quality, and fluctuation observed in comparable environmental settings (Lazarus et al., 1980). Folkman and Lazarus (1980) posited that in the manner people perceive threats, they evoke responses to cope with the problem. However, if the stressor is something beyond the person's control, they tend to indulge in what the authors called emotion-focused coping. Emotion-focused coping is an ego-defense mechanism for individuals

to prevent emotional response to a stressor, reacting with avoidance, denial, distraction, procrastination, and distancing (Folkman & Lazarus, 1980). Lazarus distinguishes primary and secondary appraisals based on several sources of information in each evaluation process. Preliminary appraisal denotes the interpretation of an individual about external events and how they align with their values, beliefs, or perceptions about the self and the world and their well-being (Lazarus et al., 1980). Secondary appraisal refers to the individual's judgment of who or what is responsible for the threat in order to place blame or credit for an outcome issue. The transaction may be considered benign-positive, irrelevant, or stressful because the event could signify harm (Lazarus & Folkman, 1984). The distinction of stress into primary and secondary appraisals is important to psychology because it moves stress from the solely physiological analysis of stimulus and response to a rational conciliation of cognitive and somatic responses (Biggs et al., 2017).

Problem-Focused Coping (PFC) and Emotion-Focused Coping (EFC)

According to Lazarus and Folkman (1984), coping is an ego-defense mechanism that mediates between the environment and the emotional response. Coping can be categorized into problem-focused and emotion-focused, where if conditions are evaluated as stressful (primary appraisal) and require endeavors to manage or resolve the event (secondary appraisal), coping measures are enacted (Folkman & Lazarus,1980). According to Lazarus and Folkman (1984), coping involves "constantly changing cognitive and behavioral efforts to manage external and internal demands that are appraised as taxing or exceeding a person's resources" (p. 141). The coping efforts, coupled with new information from the environment, allow the individual to determine if the coping attempt has been successful or if they must initiate further coping strategies; situations of continued failure will result in psychological disturbances and negative

effects. Research has connected EFC with adverse outcomes, while PFC has been associated with positive effects (Biggs et al., 2017).

Stress because of the environmental and internal psychological processes in working with trauma may impact the professionals' view of the world and human nature and undermine their sense of safety (Figley, 1995). Moreover, repeated stress and exposure over time to traumatic material can become overwhelming, hindering professionals' sense of power and hope (Sanderson, 2013). To address the stress experienced by professionals, Figley (1995) coined the secondary stress concept, which he also referred to as the "cost of caring" (p.10). He maintained that individuals who care for others might develop compassion fatigue due to their exposure to the traumatic material of the suffering person. These professionals may undergo the same array of symptomatic reactions as the traumatic event victims. Staff working in Title I schools are often exposed to high levels of trauma because of the specific circumstances surrounding these schools, their students, and their communities. Therefore, they may be at increased risk of suffering from excessive stress, compassion fatigue, and secondary and vicarious trauma. These terms and the relationship with school professionals are explained next.

Related Literature

The following section will focus on themes of trauma during childhood and the possible lasting adverse effects throughout a person's life. This foundation will explore further the specific circumstances surrounding the risk of trauma in children from the Northern Triangle and the likelihood that school staff working with them develop vicarious trauma. Then, previous and present conceptualizations about vicarious trauma and post-traumatic growth are discussed.

Trauma Framework

The word trauma is used indiscriminately in society today and often underestimated by the general population. However, its characteristics usually include severe threats to the person's psychological integrity and physical, social, emotional, or spiritual well-being (Briere & Scott, 2015). Trauma is the response to an overwhelming experience or several events, harmful or life-threatening, that overcome the individual's coping process (National Institute for the Clinical Application of Behavior Medicine [NICABM], 2023). Trauma is not only about the event or events; it depends on the victim's variables, the characteristics of the stressor, and the responses of those around the victim. Briere and Scott (2015) described them as follows: the victim's variable includes the specific circumstances in place at the moment of the event, such as gender, race, or socioeconomic status often associated with discrimination or marginalization. The characteristic of the stressors refers to the post-traumatic effect and traumas of longer duration; for instance, rape and physical injury have the likelihood of producing post-traumatic stress. Finally, the social response, support, and resources around the victim are essential in helping reduce the intensity of post-traumatic outcomes.

The Effects of Trauma

Trauma is a normal reaction to abnormal situations with short and long-term consequences for the person. Its impact can affect the individual's belief system, faith, and expectancies; their concept about others and humanity; their patterns of intimacy, self, and personal identity (Wilson & Keane, 2004). The stress response is psychobiological as it is the organism's way of coping in situations of threat. Still, physical reactions often influence the person's health and quality of life. Trauma and its consequences are expressed in unique ways depending on the situation, individual-specific circumstances, and protective or risk factors. According to the *Diagnostic and Statistical Manual of Mental Disorders (5th ed., text rev.)* by

the American Psychiatric Association [APA], 2022), trauma occurs when an individual has "Exposure to actual or threatened death, serious injury, or sexual violence in one or more ways" (p. 271). Those criteria include direct exposure, being a bystander of the traumatic event, seeing the event(s) as it occurred to others, or knowing it happened to a loved one. However, this definition does not include emotionally upsetting events like abuse, neglect, significant separation, or losses, which researchers consider underestimates the extent of trauma among children and the general population (Briere & Scott, 2015).

Biological Response. Every part of the brain gets affected by trauma as the connections between different parts of the brain get fumbled (NICABM, 2023). The body contains receptors carrying information about pain, stress, and everyday sensations around the body that activate in case of any perceived adversity. These receptors inform the brain about danger and motivate individuals to modify behaviors to reduce that pain (Sapolsky, 2004). The autonomic nervous system (ANS) connects to glands and organs to maintain balance and homeostasis. It is also in charge of the responses to stress, acting like a sentinel, keeping the internal and external experiences on guard. One-half of the ANS, the sympathetic nervous system (SNS), activates to respond, and the other half, the parasympathetic nervous system (PNS), suppresses in response to stress (Uhernick, 2017). The SNS detects those threats using the five senses and acts during emergencies or what is thought to be an emergency. It helps the individual to be vigilant, active, and ready (fight, flight reaction). Oppositely, PNS activates the vegetative freeze responses in preparation for the perceived threat (Sapolsky, 2004). The reactions by the SNS and PNS are normal to maintain the body's homeostasis; however, they threaten the individual's well-being when they become chronic.

Post-Traumatic Responses. As pain, trauma is part of the human experience. Most people are resilient and develop appropriate responses and coping strategies to recover with time. However, ongoing pain and constant stressors can cause illness when maintained for extended periods, depending on the sensations, feelings, and thoughts that coincide with that pain (Center for Substance Abuse Treatment, 2014). There are three types of traumas: acute, chronic, and complex. Acute trauma is the response to a single event in which the individual feels in danger, such as a car accident or natural disaster (Jacobs, 2016). Chronic trauma is repeated and prolonged exposure to stressful events, such as bullying or domestic violence (Levers, 2012). Complex trauma is the exposure to repeated and severely distressful events that involve multiple violations, such as sexual assault, emotional abuse, and neglect, that often begin early in life by someone known to the victim (Sanderson, 2013). Research associates multiple and repetitive trauma with much more significant psychobiological disruption in the individual (Sanderson, 2013). Regardless of one-time or long-lasting events, each person reacts differently to trauma as it is subjective nature. Thus, the expression of suffering and healing may differ across cultures and worldviews. Some people may exhibit resilience responses, while others develop disorders that can elicit overwhelming out-of-control reactions impacting how they feel about themselves and others and how they feel about their bodies (Sanderson, 2013).

Levers (2012) described how trauma exposure that occurs during childhood and earlier years interferes with the psychobiological development of children. The different brain areas are affected, harming the children's ability to reason, communicate, and regulate their emotional/cognitive processing. Those symptoms most likely last through adulthood, affecting many areas of the individual. Furthermore, constant stress can impact the person's sexuality and reproductive system and cause startling reactions, panic attacks, anxiety, depression, and sleep

disorders in children and adults. Research has demonstrated that children who are psychologically abused and neglected may develop significant psychological dysfunction from a young age and across their lives since they are likely to repeat dangerous patterns of additional interpersonal traumas (Abrams, 2021). Some common childhood trauma types include physical, emotional, and sexual abuse, neglect, domestic violence, the loss of someone beloved, community violence, deportation and incarceration, changes in family structure, housing insecurity, divorce, and bullying.

Child Attachment and Trauma

Healthy development in children is critical to becoming mentally wholesome adults. Children need caregivers who deliver a loving environment that provides shelter, food, and a safe atmosphere where the child's social, emotional, and educational needs are met (Jeong et al., 2022). The first years of an individual's life are the most important to brain development, and deficiencies can profoundly impact the person's nervous system (Levers, 2012). Skills grow within the context of individuals' earliest relationships and environment as the young child learns essential skills that will shape the rest of their development. Children must successfully negotiate relationships with caregivers to learn crucial skills that provide the foundation for more complex and new competencies like their affect tolerance and regulation strategies (Blaustein & Kinniburgh, 2019). A responsive parent-child relationship that provides soothing love, care, and stimulation during the earlier years is crucial to promoting a healthy connection and attunement with the world. Attachment is essential to the child as it provides the foundation for understanding self, others, and others concerning others (Jeong et al., 2022). Accordingly, a healthy attachment will allow individuals to predict, control, and manipulate positive interactions with themselves and others.

On the contrary, poor maternal psychological states or distressed parental relationships and adverse challenges can cause disturbances in attachment, expressive language development, struggles with self-regulation, and healthy emotional well-being among children (Briere & Scott, 2015). They may fail to extend healthy life skills and suffer from anxiety, high avoidance, or fear of others and relationships (Levers, 2012). In an unsafe family system, the children will have a less predictable understanding of the world, impacting their exploration and knowledge of their surroundings and causing constant danger and hopelessness that may extend across all the child domains (Abrams, 2021). Thus, secure attachment styles in the early years will mainly yield healthy later relationships. In contrast, the absence of a safe and responsive bond with the primary caregiver may cause destructive and detrimental relationships in their future relationships. According to Blaustein and Kinniburgh (2019), infants depend on their parents to provide soothing, comfort, and stimulation, but their arousal rapidly increases when their needs are unmet during their first years. Then, they turn to primitive regulations that guide their lives, like self-harming, inappropriate sexual behaviors, bullying, and substance abuse, among other risky behaviors that the individual sheaths, failing to develop competent relationships with others.

Therefore, children with an interrupted and impacted attachment often suffer from chronic and acute trauma; thus, they may invest more energy in survival than developing and growing personal and everyday life skills and critical progressive competencies (Blaustein & Kinniburgh, 2019). The long-term consequences of children exposed to trauma are reflected in essential domains experiencing long-life problems for cumulative damage that may extend to adulthood. These are some of the many circumstances that affect children from the Northern Triangle. Too often, parents migrate to other countries, mainly the U.S., to provide economic

means for their families in their original countries. They leave behind their kids, hoping to reunite with them soon. Still, it does not happen soon enough, and years may go in between before they can reunify if they ever do. These long separations regularly occur during the children's most critical emotional developmental stages, affecting their attachment and development. The effects are long-lasting, echoing several adverse consequences, including behavioral dysregulation, relationship difficulties, finding meaning in life, and interaction styles. Then, when the ultimate reunification happens, the transition becomes complex and double traumatic. Children may manifest depression, anger, and behavioral difficulties due to resentment, abandonment, cultural confusion, yearning for life, and people left behind (Delgado et al., 2021).

Adverse Childhood Experiences (ACE). ACE is a term used by the Centers for Disease Control and Prevention (CDC) to explain the relationship between repetitive adversative child experiences and the harmful consequences later in life (Steele & Malchiodi, 2012). According to the CDC (2022), ACEs are daily potentially traumatic experiences between the ages of 0 and 17 that are very common in the general population. The CDC declares that about 61% of adults surveyed across 25 states reported having experienced at least one type of ACE before age 18, and nearly 1 in 6 said having experienced four or more ACEs. For this reason, the CDC is advancing the understanding of the relationship between ACEs and adverse outcomes in adulthood (CDC, 2022). The short-term and prolonged effects of repeated exposure to dangerous and stressful events include many health and social problems that have the potential for repeated traumatic symptoms (Steele & Malchiodi, 2012). Family violence denies children the opportunity of a caring adult who helps them attain strategies for responding to regular demands in life; instead, they become the source of pain (Craig, 2008). The results are children with a

deep sense of terror, shame, betrayal, and desperation that, on several occasions, is the cause of psychiatric diagnoses (Steele & Malchiodi, 2012). According to the American Psychiatric Association (2022), in 2020, mental health–related emergency visits increased 24% for children aged 5 to 11 and 31% for those between 12 and 17. Similarly, before COVID-19, one in five children had a mental disorder, but only about 20% received mental health help. This data reflects the urgency for interventions that help address students' mental health and bring trauma-informed strategies to support them.

An additional stressor that has affected children, causing profound stressful effects, was the COVID-19 pandemic. The pandemic exacerbated the stress levels of individuals and families. Children and adolescents' mental health levels of anxiety, depression, loneliness, stress, and feelings of loneliness were the most observed symptoms, some with deep marks of child abuse and neglect (Theberath et al., 2022). Indeed, the pandemic left deep scars on children and families, and they need even more support due to the trauma responses to unpredictable routines, child abuse, or anxiety. Many students lost family members, or the pandemic increased a family crisis that was already taking place. All those things and a significant shortage of children's mental health resources have become a massive concern for schools, families, and society (Abramson, 2022). Based on the previous background, the specific circumstances surrounding the Northern Triangle children migrating to the U.S. are discussed next.

Students from the Northern Triangle and Adverse Childhood Experiences (ACEs)

Though immigration slowed during the COVID-19 pandemic, there was a high increase in immigration in the previous two years (Montoya-Galvez, 2022). Indeed, the United States is experiencing a large wave of immigration, with more than two million immigrants from Cuba, Venezuela, Mexico, Guatemala, Honduras, and El Salvador (Culbertson et al., 2021). Montoya-

Galvis (2023) denounced in CBS News that besides the fluctuating immigration policies passed after 2016, unaccompanied children who traveled to the United States (US) border jumped by 102% from 2015 to 2016. In 2022, the number of unaccompanied migrant children entering U.S. border custody reached record levels of 130,000 unaccompanied minors processed by officials along the southern border; nearly 60,000 of those children came from the Northern Triangle, with 17% entering unaccompanied.

According to the Department of Labor (2023), the massive increase in unaccompanied migrant minors has set huge records of exploited children in worksites across the U.S. (Montoya-Galvez, 2023). Those children cite reunification with a parent who migrated to the United States before them and the opportunity to lift their families out of poverty as the main reason for taking the risk of crossing the border (Delagado et al., 2021). During the past years, more than 1,000 immigrant children traveling without parents have reported being sexually abused in shelters under government custody or during their trajectory to cross the border (Gonzalez, 2019). Many end up working in harsh and dangerous jobs that severely restrict the physical work a minor can endure (Delgado et al., 2023). While trying to reach the U.S., children often lose arms, legs, hands, or feet trying to board the freight train known as "La Bestia" (The Beast), perseverating to reach U.S. borders and reunite with their parents (Nazario, 2007). The U.S. government blames Central American parents and asks them not to send their kids through smugglers and all those dangers mentioned above, but many parents do not have any other option to reunite with their kids. They have decided to choose migration risks as secondary to the endemic dangers in their communities. Their motivations for sending their kids alone on this challenging journey respond to several needs that include family reunification, avoiding gang violence, domestic abuse, and persecution, in addition to work opportunities and education (Thomson et al., 2019). However,

the scars caused by the early separation from their caregivers are deep enough to mark those children's lives forever, leading to behavioral concerns and depressive symptoms (Delgado et al., 2021). As stated previously, infants depend on their parents to provide soothing, comfort, and stimulation, but their arousal rapidly increases when unmet needs during their first years (Blaustein & Kinniburgh, 2019). Therefore, many children from the Northern Triangle are left behind by their parents, hoping to reunite soon; instead, they grow up with unreliable caregivers and interrupted attachment, causing them to fail to develop competent relationships with peers, teachers, and other adults. They often become helpless and hopeless, replicating their early frustrated attachments and treating others with mistrust. Navarro (2014) describes Enrique in the following words, referring to the main character in her narrative, "He was five years old when his mother left him. Now, he is almost another person. In the window glass, he sees a battered young man, scrawny and disfigured. It angers him, and it steals his determination to push northward (p. 67)."

Immigrating as a child has been linked with increased anxiety, depression, and emotional and behavioral problems in adulthood (Patel et al., 2016). Perreira and Ornelas (2013) examined how migration influences the risk of experiencing trauma and developing post-traumatic stress disorder (PTSD) in immigrant children. They found that from 281 adolescents and their parents, 29 percent of adolescents and 34 percent of parents experienced trauma during migration, and 9 percent were at risk of PTSD. Many of the children interviewed were separated from their parents for at least one year before immigrating to the U.S.; also, many have migrated with a stranger or alone. Children and their families exposed to repeated trauma often become desensitized and normalize the traumatic events they must overcome to immigrate. Thus, parents may not perceive adverse events as traumatic for their children, negating necessary treatment and

understanding of their behaviors when struggling in school and their new lives in the U.S. (Cohen et al., 2012). Some of those children were separated from their parents when crossing the border for several months or saw them being beaten by coyotes (smugglers) or immigration agents. Other children have come by themselves as their parents were deported when trying to cross or have been sent with friends to any relative in the U.S. They cry daily for their mothers. Still, they are reminded that they must stay here for a better future, as if a child would not change anything in the world to be able to hug their parents one more time (Nazario, 2007). These children must live with those adverse experiences and still be good at school, but they often cannot. They struggle to learn, concentrate, behave, and make sense of their lives. According to Delgado et al. (2021), another challenge after children finally reunite with their parents is reestablishing the parent-child relationship that may have become deceptive. That eagerness to be together gets hindered by the anger, distress, exposure, and abuse the child may have experienced during the separation, symptoms that often manifest in behavioral difficulties, and depressive symptoms exhibited at home and school. Mothers also may have shifted their meaning of motherhood due to the spatial and temporal accommodation to fit immigration and employment separation. It becomes a shock when they reunite, and the past lodging has to change again (Delgado et al., 2021). Migrating mothers believe that their children would be better in their original country as they may have a better ability to pay for better childcare at home and that their children can receive a better upbringing with the extended family and be protected from racial and anti-immigrant prejudice (Schapiro, 2012)

Students from Northern Triangle and School Concerns

As explained previously, adverse experiences before, during, and after immigrating may leave deep scars that affect health, behavior, academic achievement, and future success (Delgado

et al., 2021). School can be a strategic source to determine the protective factors the students count if trauma contributes to the student's behavioral or academic difficulties. Similarly, government organizations must focus on providing effective community interventions that create resilience and opportunities to grow in addition to merely providing food and shelter. (Fleming & Waheed, 2014). According to research reports on the K-12 public schooling for undocumented children in the United States, it was estimated that 575,000 children from the Northern Triangle and Mexico arrived in the U.S. Still, only about 321,000 were enrolled then (Culbertson et al., 2021). Statistics have discussed that these children suffer multi-dimensional trauma and are subject to multiple adverse traumatic events (Physicians for Human Rights [PHR], 2019). These circumstances may trigger behaviors and emotional and academic struggles that impact students at school. For instance, UNICEF (2020) declared that thirty percent of unaccompanied migrant children have witnessed violence affecting their ability to access essential milestones fundamental to learning. Also, research has found that children whose parents immigrated without them present more anxiety, developmental problems, depression, and learning disabilities in the immediate years after reunification than children who were never separated (Delgado et al., 2021). These circumstances relate to many undocumented families in Maryland who have come looking for safety away from their original countries, where they have been victims of complex violence.

This background precedes many students who come to Title I schools in Maryland in the last ten years. Though Title I schools have substantial support from non-profit agencies providing food, medical, and mental health care, the needs are so abundant that those resources are insufficient to support the school community. Parental unfamiliarity also becomes a barrier to the educational system as immigrant parents must adapt with their children to a school system

that differs from theirs and their language. Necessary resources such as enrichment programs offered for the school to advance these students' cognitive skills are dismissed or ignored, and the families' high mobility inhibits students' engagement and successful learning (Delgado et al., 2021).

More often, schools see a growing immigrant population of students with impressive academic and social-emotional gaps and significant vulnerability due to past trauma. However, school staff is not sufficiently prepared to deal with the continuous complex trauma cases they see due to a lack of sufficient trauma-informed training in their academic programs (Parker & Henfield, 2012). Lawson et al. (2019) advocated for trauma literacy and connecting for more trauma-informed interactions with traumatized students as school staff feels lost in supporting them. Students who suffer trauma are more prone to face mental health challenges from trauma-inducing experiences. Adaptive coping skills mediate adversity's impact on children to survive and gain growth and stability. Regarding students' reunification with their parents, Delgado et al. (2021) advocate for school programs with a trauma-inform framework that addresses these children's unmet mental health needs, especially after the COVID-19 pandemic that has disproportionately affected the education attainment of immigrants and racial minorities. Thus, strategies in schools within a developmental trauma-informed context can help relieve the emotional and physical tension that these students carry while building resilience (Steele & Malchiodi, 2012).

Teaching Under Unique Emotional Demands

Exposure to violence changes how children learn and perceive themselves and others, which, coupled with poor impulse control, impacts children’s problem-solving and learning skills (Craig, 2008). Research has found an interactive relationship between family separation,

acculturative family conflict, and family life events among newcomer immigrant adolescents and their school outcomes (Patel et al., 2016). The same research found that family separation was the most complex and prevalent among those students but not necessarily the cause for lower grades, perhaps because such students learned to manage their daily responsibilities and build resources that help them in school.

Educators, school counselors, and related support staff's collaboration with families is critical in supporting students who have suffered trauma. These staff members provide care and support and run essential programs for students to succeed academically. They are also in a crucial position to create safe learning communities and advocate for disadvantaged students regarding their emotional well-being and academic access to culturally responsive practices. Research shows that students are most likely to trust and forge relationships with counselors and teachers that positively impact their lives (Hiskey et al., 2018). A sense of belonging in school is essential for students to feel respected, loved, and accepted, which also helps to process their adverse experiences. There is a high relationship between ACEs and the risk of poor school attendance, behavioral issues, and failure to meet grade-level standards in mathematics, reading, or writing at the elementary level (Craig, 2008). Students who suffer from trauma may have problems regulating emotions while being inserted into a new culture and lifestyle. Thus, it is substantial that school personnel train, understand, and respond to students' ACE profiles as an essential strategy for improving the academic trajectory of at-risk children (Blodgett & Lanigan, 2018).

School counselors are responsible for addressing students' mental health and developing interventions to help their social-emotional academic achievement (Beames et al., 2022). However, school counselors suffer from role ambiguity and unclear job expectations when their

work overlaps. This often negatively impacts their ability to implement comprehensive emotional and behavioral support systems for students (Beames et al., 2022). There is a big push in the school professionals' accountability in student achievement. This push advocates for a shift from the traditional model where the student is viewed as the problem to a proactive inclusion that removes systemic barriers toward students, specifically those in disadvantaged economic circumstances (Hines et al., 2020). Some of those barriers include discrimination, racism, bias, and prejudice. For instance, low-income families, Hispanics, and families of color are more likely to be perceived as less involved with their students. These biases result in boundaries and mistrust due to a lack of cultural awareness and sensitivity from school staff who misunderstand how African American, Latino, immigrant and other minority families are involved in their children's education and well-being (Bryan et al., 2020). In this regard, Caplan and Baker (2017) concluded in a study with children of Latina mothers that supportive directive parenting helped kids promote positive regulatory development, while a lack of parent involvement resulted in children being dysregulated over time.

Often, Latino parents, new to the country, work different jobs and are absent for long hours. They then find it difficult to get involved with their children's education and emotional well-being due to time restrictions, lack of parenting skills, cultural beliefs, or dealing with their own traumas. Asfour et al. (2017) made a thought-provoking comparison among 959 Hispanic adolescents to evaluate a family-based preventive intervention. Their study centered on protective factors like parent-adolescent communication and parental involvement in school with three distinct socio-ecological risk subgroups (high, medium, and low risk). They discovered that those students in high socio-ecological risk groups lacking protective factors presented more mental, emotional, and behavioral problems across all outcomes compared to those in the low-

risk subgroups. Likewise, these children disconnect and seem to lose attachment to their parents and their original ethnicity as they grow up in a culture very different from their parents.

Teachers are concerned about how their students cannot communicate effectively with their parents as they learn English. They mainly speak, read, write, share with peers, watch television, listen to songs, etc, in English. The only contact with their native language is through their parents, who are usually absent due to their long work hours (McNerney, personal communication, February 10, 2018). The outside environment becomes the children's leading resource of relationships. Many of them struggle with substance abuse, gangs, and sexual risk behaviors by the time they are in high school.

Supporting the Emotional Demands of Teaching

Children depend on supportive adults and their coping skills to manage the adversity around them. Moreover, teachers are often the only people who help them restore the sense of hope they have lost. Unfortunately, students who have undergone several traumatic events suffer from a perception of abandonment and power struggles; they often become helpless (Greenfield & Quiroz, 2013). Regarding school, they believe they have no control over the learning process, engaging in non-productive thoughts about their abilities and behaviors that hinder their academic, social, and emotional growth (Robert & Gordon, 2006). Developmental trauma and biological responses may block the integrative brain's development early in life. Then, the child struggles with executive functioning; they perceive themselves in constant danger and are under continuous survivor mode; they cannot consistently monitor their thoughts, feelings, and actions, even more so when experiencing stress (Steele & Malchiodi, 2012). The teachers find themselves disjunctive in teaching the child, helping them regulate without falling into power battles or triggering unresolved parental issues for their students (Craig, 2008).

The teaching profession is highly emotional and demanding, making it one of the most stressful occupations in the world force (Kotowski et al., 2021). This emotional burden often takes a high toll, not only on their professional vocation but also on their personal lives. Unlike individual therapists who count on agencies to protect their emotional well-being because of their jobs, teachers do not have the same support from the school system. Moreover, teachers must deal with being resourceful in adapting to different manners of students' learning types and special needs, as well as their students' emotional and social needs, without enough psychological and professional support to help them in that endeavor. This undertaking becomes even more complicated when their students present high traumatic stress reactions and reenactments. As a result, teachers are more at risk of suffering burnout, compassion fatigue, loss of enthusiasm, and feelings of incompetence that make them question their ability to make positive changes in their students' lives.

The Coronavirus 2019 (COVID-19) Pandemic Extra-Stressors in Title I Schools

The COVID-19 pandemic reportedly exacerbated many mental health issues and became a traumatic event that profoundly changed the lives of many people and their working conditions with detrimental consequences. In addition, several conspiracy theories, false news, misinformation, and disinformation about this plague exacerbated the mental bearing of the public (Mukhtar, 2020). A main effect discovered after COVID-19 is that even though past disasters have significantly influenced the world, causing individuals repetitive symptoms of insomnia, numbness, anxiety, and depression, COVID-19 has had unprecedented reactions in all life domains. For instance, COVID-19 has been associated with accelerated post-traumatic symptoms and mental disorders not found in previous disasters, such as lengthy worldwide

insecurity and economic and social security at a traumatic cost that has checked the world's sense of balance (Finstand et al., 2021).

The school system was not alien to all the cumulative concerns that the pandemic brought in all settings. The COVID-19 pandemic took and continues to take a severe toll on students and teachers. The pandemic disrupted daily routines, leading to extraordinary societal measures as shelter-in-place mandates were implemented worldwide. Children and adolescents, especially those in low-income communities, were out of school with detrimental consequences for their mental health needs and for whom the schools provided significant resources (Lee, 2020). COVID-19 changed educators' lives personally and professionally, worsening compassion fatigue and burnout concerns in multiple ways (Newman & Antonelli, 2022). For instance, one of the most frequent challenges during school closures for teachers, school counselors, and school/district administrators was helping students connect online. Title 1 schools were the most affected by this phenomenon (Pavlovic 2021). In only a few months, teachers accustomed to in-classroom instruction had to change and adapt their curriculum to the virtual world, which was still unknown to many. Seasoned teachers who had taught for many years and were foreign to this still-youth teaching method struggled to adapt, feeling inadequate, isolated, and disempowered when trying to support students from home in this challenging space (Hart & Nash, 2020). Many retired after that (Pavlovic 2021).

McNerney (June 24, 2023), a principal at one elementary Title I school in Maryland, disclosed in a personal communication that her school community suffered a significant impact during COVID-19 time. She explained that parents and teachers lacked internet connectivity and the technology literacy to access online classes. School districts had to redesign how to teach, provide access to their students, and train their teachers for the new modality. In a matter of

weeks, schools started providing computers and internet access. Parents who had never accessed a computer got frustrated not knowing how to support their children. Parents also left their children unsupervised during classes, who as a result, often did not connect or engage in their classes. Teachers had to prompt students to focus as they could see them jumping or doing other activities during class. Also, several families lived in tiny apartments, making the learning space very hard for students who were often distracted by the noise and disturbances at home. McNerney concluded that students' lack of engagement and connection left teachers burned out, frustrated, and empty.

Indeed, teachers were impacted by uncertainty, isolation, and stress. According to Kotowski et al. (2022), teachers' physical and psychological health was adversely affected by the COVID-19 pandemic. This situation brought unprecedented challenges and stressors to this profession as teachers worried not only about their personal, physical, and mental health but also about their students, especially those at high risk. The abrupt and uncertain closure of schools, the switch from traditional face-to-face to online classes, and struggles in maintaining work-family balance increased the anxiety, depression, and stress in teachers. According to their research, Kotowski et al. (2022) declared that teachers' health and well-being still appear adversely affected by high pressure and burnout after COVID-19.

School routines that were an essential structure for students who have suffered trauma and whose mental health was impacted were without any support. Closures due to the COVID pandemic left them locked in their rooms for months, isolated without health care, therapy services, peer support, social face-to-face services, and lacking a feeling of belonging (Lee, 2020). Due to this, many students' mental health symptoms have relapsed. For those living in abusive homes, violence was exacerbated by the isolation and went unnoticed. Children with

special needs, such as those with autism, struggled with changing daily routines and the absence of services, increasing the anxiety generated by the uncertainty. School districts also encountered challenges providing the best approaches to delivering distance learning (Pavlovic et al., 2021).

The pandemic also exacerbated disparities in students' education, health, and leisure as school staff struggled to access students in a virtual environment. (Limberg et al., 2022). Parents with low literacy, computer skills, or language barriers were strained helping their children connect virtually and maintain routines. Often, parents, especially those undocumented, were concerned with providing for their homes as their immigration status prevented them from having stable paid jobs during the worldwide closures. Moreover, those parents who could still go to work or work virtually also struggled to support their students with their academics under the new circumstances. Students who relied on the free and reduced food provided by schools did not have access to that resource, pressing their worries and economic struggles even more.

Detrimental COVID-19 disparities remain and have worsened. After several months of isolation, students have returned with increased difficulty regulating their emotions, limited social connectedness, lower self-esteem, poorer academic performance, and behavioral and mental health problems (Limberg et al., 2022). Unfortunately, school staff have the risk of suffering lower self-efficacy, performance, and job satisfaction due to the imbalance between demands and insufficient mental health support, which seems to be exacerbated in Title I schools. All these reasons have inspired initiatives for educational reform that include plans to counteract trauma's effects and its devastating effects on students. However, any trauma-informed interventions in schools demand not only the willingness of the schools to help but also the students, families, staff, and the system to collaborate. It requires a proper understanding of students' trauma symptoms and strategies to support them, the families' willingness to help, the

preparation and time of the school staff to respond, and the educational system's requirements upon the students and the staff (Kozan, 2022).

Vicarious Trauma and the Risk in Title I Schools

There is an extensive debate about the symptoms of stress in mental health professionals and the interventions necessary to protect them from their exposure to their traumatized clients (Bernstein, 2016; Brockhouse, 2011; Deaton, 2020; Huggard et al., 2013; Sprang et al., 2019; Stamm, 2016). Also, there is confusion about the terms used in the effects that trauma can have on the helper. Thus, clinicians advocate for defined terms that help to understand the impacts and demands on the helping professions to make proper diagnoses when needed. Four terminologies arise regarding this topic: countertransference, compassion fatigue/secondary traumatic stress, burnout, and vicarious traumatization (Thomas & Wilson, 2004). According to Levers (2012), countertransference refers to the intense concern or insecurity the clinician may have in failing the client or one's professional competency. Secondary trauma is the stress and pain resulting from caring for or wanting to help the suffering person. Burnout is used to identify the syndrome of emotional exhaustion, detachment, lack of accomplishment, and effectiveness due to the emotional strain of working with others' problems. Compassion fatigue is typical among school professionals as they are exposed to students' and families' distress and crises, which often cause emotional pain and a lack of optimism when it becomes chronic (Levkovich & Ricon, 2020). Finally, vicarious trauma is associated with the clinician's harmful changes in their view of themselves, others, and the world due to their work.

Most literature has focused on how teachers can help children exposed to violence to restore hope and trust in others. Still, little literature has considered the impact that those students can have on their teachers (Yeo, 2021). Teachers, school counselors, administrators, and general

staff are likely to be the first line of intervention for children affected by poverty, physical and sexual abuse, neglect, family-school-community violence, and immigration challenges, among other adverse situations. They strive to support their learners and their challenging social and emotional problems. Students' specific conditions cause barriers to their attendance and on-time arrival, academic and social engagement, and general academic performance (Lawson et al., 2019). In this manner, these professionals can internalize their students' and families' trauma and symptoms with harmful changes in their view of themselves, others, and the world.

School staff may see their mental health, practice, and responses to students compromised when exposed to students' behaviors or traumatic stories, depending on their innate strengths, expectations, and protective factors. This challenge is even more significant after the COVID-19 pandemic. For instance, school counselors struggled to adapt their delivery of services to meet the needs of teachers, students, and parents during the pandemic, which, in addition to the barriers of high caseloads, working to close opportunity and achievement gaps, and being assigned inappropriate duties has made this endeavor more challenging (Limberg et al., 2022). Insufficient resources for these professionals to serve their students and mental health causes frustration, preoccupation, and insecurity about their professional competency (Newman, 2022).

Students' adverse experiences can trigger negative psychological consequences in school staff, including stress, worrying, numbing, avoidance, nightmares, and intrusive thoughts in teachers (Yeo, 2021). As the present literature has disclosed, students from the Northern Triangle are prone to ACE impact, which often results in chronic and complex trauma. Those students often reveal traumatic stories to a trusted teacher who may be shocked by their story. That teacher may suffer harmful stress and body and mental reactions that are frequently ignored,

which can lead to PTSD depending on the professional personal protective factors, support, and resources (Lanier, 2019). If the teachers or staff members are ill-equipped, they may suffer from high-stress levels, compassion fatigue, and burnout from hearing the unpleasant and adverse student experiences (Newman & Antonelli, 2022). This situation is especially true in Title I schools, where often students and families are survivors of complicated and repetitive trauma.

Educators may be able to identify the symptoms of secondary or vicarious trauma in themselves. Still, they often do not disclose those symptoms to colleagues or the system, afraid of being taken as a professional shortcoming or weakness (Newman & Antonelli, 2022). For this reason, there is a need for research that focuses on understanding the risk of vicarious trauma symptoms in school staff in Title I schools and its relationship with subthreshold Post-Traumatic Stress Disorder (PTSD). The absence of support that addresses undocumented students' mental and academic needs and the absence of educational programs adapted to their work's social and psychological demands often leave school staff hopeless and frustrated with government policies, family disengagement, and, in general, with society.

Similarly, school staff must be aware of the risk of triggering their unresolved trauma when involved in their students' trauma (Lawson et al., 2019). Newman and Antonelli (2022) recommend a series of strategies that include individual, schoolwide, and district levels to help them address mental health struggles due to their work. At the personal level, they recommend a strong understanding of secondary trauma and other related terms and strategies that help minimize the impact of stress. A paramount recommendation is to be aware of their feelings and stress levels and maintain behaviors consistent with the person they want to be, in addition to getting adequate rest, good nutrition, and exercise. At the setting level, Newman and Antonelli (2022) suggest that administrators bring schoolwide strategies that increase their staff resilience

and create a wellness and community care culture, encouraging self-care, counseling resources, and time for collaborative work. These efforts can make a massive difference in the mental health burden that school staff in Title I schools undergo to maximize their work and feel successful in supporting their students. Indeed, the students' well-being depends on adults' well-being, and vicarious trauma is a plague that hinders a thriving school community.

Trauma and Post-Traumatic Growth

Traumatic experiences can trigger adverse effects, as explained above, but individuals also can experience constructive changes, resilience, and positive coping reactions following negative experiences; these changes are known as Post-Traumatic Growth (PTG). Thus, PTG is the individual's ability to adapt and recover quickly from hostile situations and trauma (Finstand et al., 2021). Factors like personality traits, coping strategies, extroversion, optimism, and openness to experiences may be predictors of PTG (Mattson et al., 2018). PTG includes developing an appreciation for life, relationships, personal strength, and spiritual growth. It is imperative that school staff recognize and understand the devastating symptoms that high long-term stress levels can cause in their profession.

For this reason, teachers' and school staff's self-care is essential. They must establish healthy boundaries and balance life to avoid secondary and vicarious trauma (Levers, 2012). They must take care of their physical, emotional, cognitive, social, and spiritual well-being and have access to more training, debriefing, and peer consultation. It is essential to highlight that not everyone exposed to trauma develops mental health struggles. Greenberg et al. (2022) conducted two studies regarding childhood trauma and empathy. They found that adults who suffered from adversity and childhood trauma had more elevated empathy levels than those who did not experience traumatic events. In some circumstances, adversity can lead to post-traumatic growth,

compassion, and prosocial behavior, as trauma may render the individual's empathy for others' suffering (Stebnicki, 2016). Therefore, some individuals who have endured adverse traumatic childhood or adulthood events may develop psychological mechanisms that foster empathy and compassion.

Resilience is such a gift. It is an essential life skill that helps humans transform from adverse, stressful, traumatic experiences into survivors of life's meaning and purpose (Mattson et al., 2018). Resilience is cultivated and achieved through individuals and communities, which is vital in trauma preparation and long-term recovery (Stebnicki, 2016). Resilient individuals are optimistic, determined, hopeful, and happy regardless of adversity. People's mindsets may determine the evolution of PTSD or PTG, where resilience prevents people from devastating mental, spiritual, and physical consequences (Stebnicki, 2016). Thus, there is an excellent gain if the school community learns and understands how to cultivate resiliency by knowing all individuals can bounce back from adversity. Not all their students perpetuate the trauma they have come from, and their work as teachers is seeding the path to improve their lives when done with love and devotion. Educators' attitudes and beliefs can make a real difference in themselves and students' motivation to thrive in adverse conditions.

Victor Frankl (1963), a famous psychiatrist who chronicled his experiences as a prisoner in a Nazi concentration camp during World War II, was one of the first mental health practitioners to discuss coping and resilience besides adversity. He explained that pain and suffering also had to do with the perceptions of one's circumstances and the attitude toward them. Thus, positive thoughts, emotions, and feelings create opportunities for personal growth despite adverse situations. Combining coping resources, family-social support, and good mental, physical, emotional, and social wellness can lead to resilience and prevent vicarious trauma. In

conclusion, vital aspects of preventing vicarious and secondary trauma include caring for the body and mind, maintaining beneficial social relationships, positive thinking, eating healthy, and finding leisure and physical activity time.

Summary

Trauma is part of the human being, causing a significant impact on individuals' physical, cognitive, social-emotional, and spiritual well-being. According to the stress theory, trauma may cause harmful effects that adversely impact work, relationships, and the person's general life. However, how individuals react to trauma may differ from person to person as their judgment and the nature between them and their environment can cause different outcomes and stress reactions. One of the major influences on those reactions is related to their attachment during the first years of life. A healthy attachment will most likely result in successful development and critical skills to promote a healthy connection with others and the environment. Instead, a distressed parental relationship can cause disturbances in their social-emotional well-being and future relationships. Childhood adverse experiences may negatively influence an adult's physical, emotional, and social health.

Students from the Northern Triangle are at higher risk for chronic and complex adverse childhood events that leave deep scars and devastating consequences for their emotional, social, and academic development. Often, these children suffer multi-dimensional trauma that includes a perception of abandonment, hopelessness, and helplessness, hindering their educational, social, and emotional growth. Teachers and school counselors working with these students have realized that school shootings, abuse, addiction, suicide, the COVID-19 pandemic, and trauma-related behaviors have increased their professional and emotional demands that challenge their well-being at many levels. They are often the first line in listening to students' traumatic experiences,

which frequently impact them physically, emotionally, and spiritually. In addition, COVID-19 added extra challenges to Title I teachers who already had a complicated situation. The pandemic adversely affected their physical and psychological health as they worried about their personal, physical, and mental health and their students' well-being, especially those at high risk. However, there is also resilience; individuals can emerge from adversity and find personal growth when exposed to their personal or other people's hardships. Post-traumatic growth allows individuals to transform and gain a new depth of understanding about their and others' reality. School staff that work with traumatized students can also achieve personal, professional, and spiritual growth if they practice self-care, which must be supported by the system, looking for protective factors that help them deal with stress and exposition to their students' traumatic stories.

CHAPTER THREE: METHODS

Overview

The purpose of this chapter is to present the method of data collection and analysis of the present phenomenological study. This study aimed to describe the emotional and psychological struggles of teachers and school counselors who have worked or are currently working at elementary Title I schools in Maryland. To this end, it seemed to answer the question: What meaning do teachers and school counselors from elementary Title I schools in Maryland ascribed to their work with students from the North Triangle, and how prone were they to vicarious trauma? The main question was divided into sub-questions inquiring about feelings, support resources, and reactions to their work. The research design followed the transcendental phenomenological rooted in Edmund Husserl's (1973) to aid in answering these questions. Information about the participants, procedures, data gathering, research design, data analysis for the present study, and the researcher's role are included. An excerpt regarding the trustworthiness, validity, and credibility of the data collection, analysis, and ethical issues was addressed.

Design

Qualitative research helps to gain insight into the interpretative approach of the world in a holistic manner that includes the voices of research participants to transform that reality (Denzin & Lincoln, 2011). Moreover, transcendental phenomenology helps the researcher to get an understanding and a whole view of the world and themselves. There is a need for a qualitative narrative that helps explain if there are any extra demands or challenges that may impact Title I school counselors and teachers when working with students from the Northern Triangle. This need is comprised in the literature review that reveals the struggles many children from the Northern Triangle and their families endure before, during, and after migrating to the U.S. and

how such struggles impact their cognitive, emotional, and social development. This impact may not only affect students' performance and behaviors in school, but it may also bring extra stressors and secondary or vicarious trauma to the staff exposed to the students' traumatic narratives and symptoms.

Among qualitative studies, five approaches have appeared consistently: narrative, ethnographic, grounded theory, phenomenological, and case study (Creswell & Poth, 2018). This research followed the modern transcendental phenomenological theoretical frame rooted in Edmund Husserl (1973), considered phenomenology's fountainhead in the twentieth century (Fuster, 2019). Husserls' method aimed to philosophically explicate the researcher's access to the world to unfold a paradigm that guides people's worldviews to action (Groenewald, 2019) and explore the lived experience of a given phenomenon (Heotis, 2020). In addition to assisting in describing lived experiences, phenomenological research tells what participants have in common about the phenomenon being analyzed (Creswell & Poth, 2018) while capturing specific individuals' viewpoints and observations (Heppner et al., 2016). Husserl believed that modern science failed to understand the consciousness and awareness of structures of appearance and objects in their appearance as such (Moran, 2008); for instance, he formulated that "All acts are intentional in nature, and this means that their structure is such that they are necessarily related to an object (absent or present)" (Cobb-Stevens, 2023, p. 316). Husserl believed that researchers must rely upon intuition, imagination, and universal structures, not their prejudgments about the phenomenon, to appreciate better the participants' experiences (Fuster, 2019). For data analysis, Husserl's transcendental framework proposed phenomenological reduction, imagination variation, and essence (Moustakas, 1994), which is explained in the data analysis part.

Bracketing is essential to phenomenology and Husserl's transcendental framework's concepts (Creswell & Poth, 2018). Bracketing means the researchers' obligation to separate their judgment and person from what is being studied, principally during the data collection and analysis process (Heotis, 2020). Using Husserl's theoretical constructs about bracketing, this research will allow participants to make sense of their experiences, where the researcher will explicitly acknowledge her beliefs and values that could pre-empt judgment. The researcher is a school counselor working in an elementary Title I school. However, she will monitor her assumptions, biases, previous experiences, expectations, and past knowledge to focus on the participants' experiences and take a fresh perspective. The researcher will describe her personal experiences, beliefs, and values regarding the phenomenon in the sessions of the situation of self and the researcher's role. Still, she will maintain those views separately during the data collection and analysis, accurately describing a participant's lived experiences in Title I schools from their meaning and subjectivity while preserving the essence of their experiences and setting aside the researcher's prior experiences, theories, and suppositions.

Research Questions

Central Question

What meaning do teachers and school counselors from elementary Title I schools in Maryland ascribe to their work with students from the North Triangle, and how prone are they to vicarious trauma?

Sub questions

1. *How do teachers and school counselors working in elementary Title I schools with students from the Northern Triangle describe their lived experiences?*

2. *How do teachers and school counselors in elementary Title I schools describe their feelings when listening to the students' traumatizing experiences?*
3. *What support or resources are in place in their institution to support teachers and school counselors when working with these students?*
4. *What are the relational and professional practices that school counselors and teachers in elementary Title I schools feel must have to help students' social-emotional academic achievement?*

Setting

This research focused on Maryland state as a geographical setting because of its large immigrant community. Montgomery County and Prince George's County have the highest immigrant populations in this state, with 275,000 undocumented immigrants representing five percent of the total state population (American Immigration Council, 2020). In addition, this study focused on elementary Title I schools, and participants must have worked or be currently working in that setting. Title I schools have been chosen as the research setting because they serve economically disadvantaged areas and have the highest percentage of English Learners (ELs) among other schools that are not Title I (Kirby et al., 2003). As the literature review described, many ELs and their families from the Northern Triangle do not have legal status in the U.S., often affected by trauma in their homeland, crossing the border, and reunifying with family members. The researcher focused on the elementary school sites, allowing the collection of more extensive details about school counselors and teachers in that specific setting.

The settings considered for the interviews are the closest library to participants' work or home. Libraries in Maryland maintain designed quiet rooms for meetings away from distracting sounds, passing traffic, or interrupting backgrounds. These rooms can be reserved for meetings

by members of the public when reserved in advance. The researcher will use a professional voice recorder to ensure a sound-quality recording. The focus group will meet via Zoom hosted by the researcher upon agreement with the participants at a previous time.

Participants

A phenomenological study involves in-depth interviews with participants to elucidate well-saturated information about the phenomenon; the vital aspect is that the researcher uses judgment to select key participants who can purposefully inform and understand the research problem (Creswell & Poth, 2018). This phenomenological research sampled participants who have experienced the phenomenon, ensuring that they meet the following inclusion criteria: They were either school counselors or teachers who have worked for at least one year in an elementary Title I school in any county of Maryland with students from El Salvador, Guatemala, or Honduras and are willing to articulate their work experiences. Participants' names and work settings were maintained anonymously. An exclusion criterion the researcher considered for ethical reasons is not inviting participants working in the same school.

Sampling Strategies

A study of exploratory nature benefits from convenience sampling procedures when recruiting participants (Marshall, 1996). Convenience sampling helps to overcome limitations related to research, accessing participants typically from the same geographic area or referred by people known by the investigator (Taherdoost, 2016). As the researcher is a school counselor in Maryland, she purposefully selected participants who were not working with her in the same school setting to ensure transparency, confidentiality, and open conversations. The researcher used a chin-referral sampling with recommendations from the researcher's circle of professional acquaintances in the field, social media recruitment (Appendix A), and email/letters (Appendix

B) to educators and school counselors of Maryland as a sampling strategy. Once potential participants self-identified as volunteers were contacted via e-mail or phone. Those interested in participating were given a brief study information form (Appendix C) explaining the purpose of the study, confidentiality, research methods, and procedures. The information form also mentioned the voluntary option to participate in a focus group after the interviews.

Sample Size

Qualitative research collects extensive and specific details about the setting or individuals studied, not to generalize information (Creswell & Poth, 2018). Researchers consider 10 to 20 participants a solid number in phenomenology research, depending on when the researcher hits saturation in the study (Hays & McKibben, 2021). Therefore, this study interviewed twelve participants, a number the researcher considered to have hit saturation while capturing the themes' diversity and depth about the phenomenon while maintaining content validity.

Once all the face-to-face interviews were completed and meaning units from participants' data were grouped into themes, the researcher moderated a focus group with five participants who wanted and could join this group at the date and time agreed by the majority. Participation in the focus group was voluntary, and all participants had the same chance to participate. The expectation was to have as few as three participants and as many as the total of the interview participants.

Procedures

After the committee's approval, the researcher provided evidence to the Institutional Review Board (IRB) that the present study followed the guidelines for conducting ethical research. After the IRB approval (Appendix I), the researcher contacted prospects who had worked in Title I schools, experienced the phenomenon, and were willing to articulate their lived

experiences in semistructured interviews and further in the focus group. Participants were contacted via a referral process through social media and emails. There were two drawings of a $60 Amazon gift card, one at the end of the interviews and another at the end of the focus group, to compensate for participants' time.

The Researcher's Role

As a school counselor in a Title I school, one has witnessed firsthand the struggles that professionals in the school system face in dealing with their students' emotional, academic, and psychological gaps. School staff feel burned out, exhausted, and devastated as the emotional demands from their students have increased significantly after the COVID-19 times (Kotowski et al., 2022). There is a high likelihood that school counselors have direct contact with students who have experienced trauma, functioning as the first line for students in crisis and making them susceptible to vicarious trauma (Parker & Henfield, 2012). The role of the researcher in qualitative research is to attempt to access the participants' thoughts, perceptions, and feelings (Sutton & Austin, 2015) and the researcher's self-disclosure about their qualitative writing to make themselves part of their inquiry (Creswell & Poth, 2016). Thus, the present researcher is conceived by the author's life and interpretation of the cultural, social, gender, and personal experiences, as expressed in the following lines.

The researcher came to the U.S. from an economically deprived and conflict-rife community in Medellin, Colombia. Growing up in an unprecedented and painful period for the country, she was exposed to psychological stress and traumatic events that shaped her willingness to become a school counselor and support disadvantaged students. The 80s and 90s were turbulent years in Colombia characterized by armed conflicts among violent narcotics trafficking enterprises, partisan warfare, widespread public corruption, and paramilitary forces

that pushed dozens of people to flee from rural to urban areas, where they became systematically homeless. At the same time, Pablo Escobar, the most wanted criminal in the world at that time, recruited young people from deprived areas to become hitmen, leaving several neighborhoods without youth as they were hired to kill but ended up killing each other to maintain power among the gangs (Bowden, 2001). Bombs often exploded in the main cities, killing hundreds; planes were shot down while full of passengers, and teenagers were killed in groups while innocently standing in the streets because it was assumed they could be gang-related or for vendettas. Many of her classmates died in those raids.

In 1990, she was among the only 2,000 students accepted into the region's public college. Twenty-six thousand students applied, but only a few had the opportunity. She was also the only one from her high school to be able to enroll in a college that year and the first one from her family to attend higher education, as her parents did not receive academic formation beyond second grade. She received a bachelor's in social work and had the opportunity to work at the campus where she graduated from high school and support students who struggled as she did. During those five years, she felt compelled to continue her professional education to support her community better, but academic opportunities were scarce and expensive. She migrated to Spain to work and later finished a master's in family counseling, planning to return to Colombia and share what she had learned. However, after returning, she was trapped in the same cycle of unemployment that produced the Colombian massive brain drain and flight of intellectual capital from the beginning of the 2000 decade. She then migrated to the U.S. after getting married.

Currently, she works at a Title I school with 97.3 minority enrollment, where 79.5% are Latino, and 3.3% are Black or African American. Many Latinos are newcomers from El Salvador, Guatemala, and Honduras (U.S. News & World Report, 2023). She has witnessed how

students, mainly those growing up in the Northern Triangle, disclose susceptible traumatic events such as community and family violence, rape, bullying, and several types of abuse before, during, and after coming to the country. She has heard coworkers manifesting PTSD-related symptoms such as nightmares, lack of sleep, and mood swings that have impacted their work and personal and social lives. She noticed that although the community's situations affect her in several ways, coming from the background she has come from, being able to communicate in Spanish and having academic and work experience have helped her avoid adverse effects. With these needs and concerns in mind and being a participant observer of the phenomena, one wanted to pursue more understanding of the risk of suffering vicarious trauma or other Post Traumatic Stress Disorder (PTSD) symptoms among school staff as they work with elementary students from the Northern Triangle in Title I Schools due to the trauma these students may endure at different levels before, during and after immigrating to the U.S. The researcher was conscious of the ethical issues and challenges unique to qualitative research because of the study of human beings and the interpersonal relationships with the participants.

Data Collection

The researcher's role in qualitative research is to access the participants' thoughts and feelings about a phenomenon that may affect their behavior (Sutton & Austin, 2015). As this phenomenological research aimed to describe the lived experiences of school counselors and teachers working in Title I schools, the researcher engaged in extensive semi-structured interviews that were shared and complemented in the focus group. The interviews and focus group sought to explain how these staff members made sense of their experiences working with students from the Northern Triangle and how they managed to support them. Following Husserl's Hermeneutical phenomenological, purposeful data collection paired with an intentional analysis

(Heppner et al., 2016). It is also said that in qualitative research, a researcher is a tool himself – herself (Creswell & Poth, 2018). Considering these concepts, this study used interviews, focus groups, peer feedback, and the researcher's impressions to describe the phenomenon. Data collection included face-to-face interviews that, once finished, were followed by a focus group discussion about the results. This sequence was chosen because the individual interviews allowed more detailed responses, perceptions, and personal experiences, while the focus group facilitated participants' interactions, and discussion generated additional data.

The interviews and focus group were audio-recorded and transcribed using Otter software. This program allowed the researcher to record and obtain a verbatim facsimile of the interviews and the focus group data collection while observing and registering impressions, behaviors, and non-verbal cues during the sessions. All the information was placed in a secure long-term file storage place, as explained more in the ethical considerations.

Interviews

Interviews involve collecting verbal and non-verbal data through the interaction between the researcher and the study participants to elicit greater depth about the topic (Gall et al., 2010). They are a critical process to gain in-depth understanding and reach theoretical saturation through understanding the participants' lived experiences and the meaning they make of those experiences (Seidman, 2016). Human beings can symbolize their experiences, purposes, and interpretations through language, which makes the interview method an essential tool in qualitative inquiry. As Peter Reason (1981, as cited in Seidman, 2016) wrote, "The best stories are those which stir people's minds, hearts, and souls and by so doing give them new insights into themselves, their problems, and their human condition" (p. 50). Thus, the primary data collection for this research included one-on-one semi-structured interviews aligned with the

literature with participants who have worked at a Title I school in Maryland. The researcher followed up with probes as necessary for each question. Semi-structured interviews used general questions about participants' perceptions and experiences about the phenomena, leaving room for interviewees' thoughts and possible follow-up questions (de la Croix et al., 2018). This data method supports the researcher's belief that the participants' stories explained how they carry their experiences and make sense of their responses to the phenomena.

The interviews lasted approximately one hour, were face-to-face, were voice-recorded, and were transcribed verbatim using the Otter software for transcription. Having the interview as text instead of audio allowed the search for specific fragments or quotes and maintained the interviews organized when finding codes and themes. Participants received an informational sheet to review before participating. This document allowed the researcher to explain the general study's purpose, relevant information about the investigation, what the participant would be asked, the voice recording method, the option to participate in the focus group, the possible harm or risk of bringing up traumatic memories, the resources available for them in that case (Appendix F and G), and the potential benefits of the research.

Seidman (2006) recommended three parts of phenomenological interviewing: life history, experience details, and meaning reflection. These steps are reflected in the questions below and in Appendix D. The first part of the interviews focused on the participants' teaching life history, considering how they decided to work in the school system. Part two concentrated on the participants' lived experiences in Title I schools, their experiences with their students, and the stories they could share. The third part included the participants' reflections on the meaning of their experience to address the intellectual and emotional connections between them and their work and life.

Qualitative Open-Ended Semi-Structured Interview Questions

Interview Part One: Life History

1. Please introduce yourself to me as if we had just met one another.
2. Tell me about your background.
3. Briefly describe what it took you to become a teacher or school counselor at a Title I school.
4. What is or was your function when working at a Title I school?

Interview Part Two: Lived Experience in Title I Schools

5. Please describe what it is/was like to be in your role in a Title I school.
6. Describe any adverse and positive experiences that have impacted your work with the school community in elementary Title I school.
7. Describe interventions or skills you think you had to provide working with students from the Northern Triangle.

Interview Part Three: Participants' Reflections on The Meaning of Their Experience

8. After listening to students' stories, how would you describe your feelings and reactions?
9. How might students' traumatic stories and behaviors have contributed to feeling overwhelmed or experiencing stress with your work?
10. What systems are in place to support your emotional state if you are stressed about your students?
11. Any information you would like to add to this interview?

Focus Groups

According to Lambert and Loiselle (2008), a focus group provides data from the participants' interactions, perspectives, and experiences to unveil essential aspects of the

phenomenon. Its integration into interview collection data offers complementary and valuable information to the phenomenon in qualitative methods. Therefore, this study's data collection included a focus group with participants from the interviews. The main goal was to share significant discoveries, share additional perspectives, and gain a more nuanced understanding of the themes for data completeness. Once all the face-to-face interviews were completed and meaning units from participants' data were grouped into themes, the researcher sent an invitation letter to participate in the focus group (Appendix D) explaining that participation is voluntary, the goal, procedures, and confidentiality.

The focus group met via Zoom platform for approximately 60 minutes. Only audio was recorded using Otter software for verbatim and transcription purposes. Participants used pseudonyms; no interview details were shared, only the main themes to preserve anonymity and confidentiality. Confidentiality about what was shared was highly encouraged but could not be guaranteed for the participants.

Qualitative Open-Ended Semi-Structured Focus Group Questions

Primary Question

- Describe your thoughts about the main themes that have resulted from the interviews.

Probe Questions

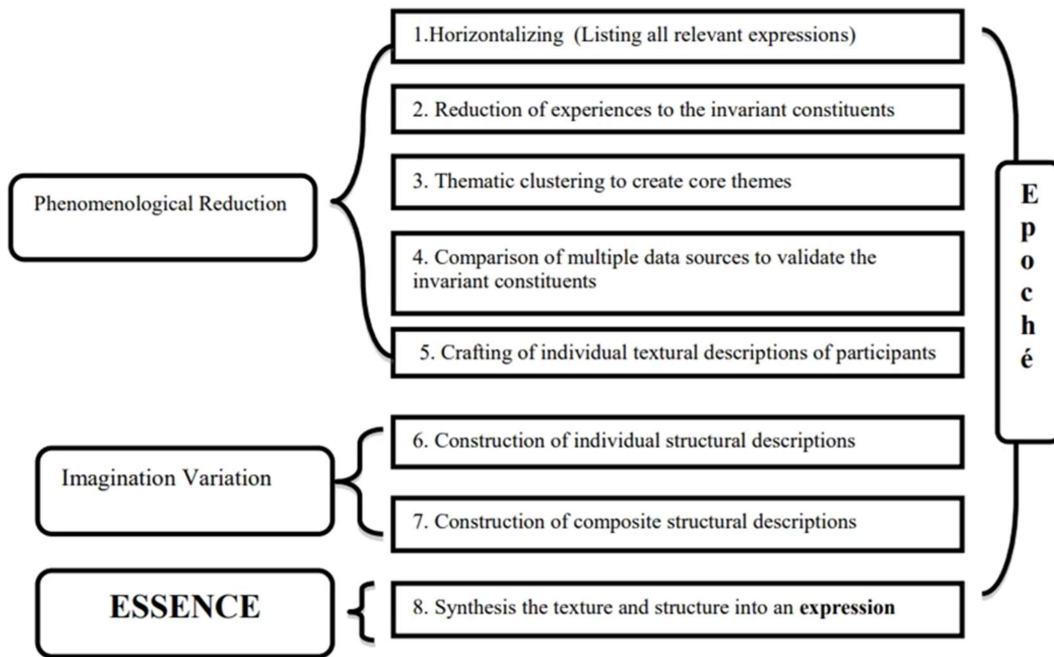
- Portray, what is the most important of all the things we discussed?
- What suggestions would you have to school counselors and teachers who may be involved in the phenomena described by this study?
- Have we missed anything? Or is there any other information you want included?

Data Analysis

Data analysis in qualitative research focuses on organizing data for analysis into themes and condensed codes (Creswell & Poth, 2018), attempting to understand the meaning that individuals ascribe to their lived experiences in the context of the present research. The data analytic procedure must be truthful to the participants' voices and perspectives as one of the most crucial parts of data analysis (Sutton & Austin, 2015). This research followed Husserl's data analysis, including hospitalization, synthesis of data, meaning units, clustered themes, blend of meanings, and essence of the experience (Moustakas, 1994). Therefore, the researcher described and made sense of the participants' experiences for an intentional analysis. Thus, the interviews were analyzed evenly, assuming all participants' experiential statements were equal. The resulting clustered themes had structural descriptions explaining what and how the phenomenon occurred to create core themes. Then, the core themes were compared and discussed with the focus group. The literature available was used to guarantee accuracy and a clear representation across all the data sources to create an essence of the problem. Figure 1 provides a visual of the general procedure and systematic steps in data analysis procedures suggested by Moustakas (1994).

Figure 1

Modification of Husserl's transcendental framework by Clark Moustakas (1994)



Memoing Emerging Ideas

Memoing allowed the researcher to capture thematic ideas, feel the whole database, make decisions about the text units that arise after the interviews, and immerse herself in the details of the interviews before breaking them into parts to start coding (Creswell & Poth, 2018). This process enabled the researcher to establish a creative audit trail to create the categories, look for multiple forms of evidence to support each type, and maintain an organized track of the main theme ideas while collecting data.

Coding Data

Coding is the core of qualitative research and refers to identifying issues, differences, and connections revealed during the data collection and interpretation by the researcher (Sutton & Austin, 2015). Coding allowed the researcher to create descriptions and thematic ideas, make sense of the data, and condense the main interview ideas into short descriptions. Creswell and Poth (2018) recommend combining 25 to 30 codes into five or seven themes for a textural

description of the participant's experiences with the phenomenon. This listing number was considered during the findings and discussion, resulting in 20 codes and four themes, each with sub-themes according to the data collection results. The researcher used hand coding through the Google Highlight tool to identify the text segments and group them by colors to form the themes.

Trustworthiness

Among the most complex concerns in research in the social and counseling fields is whether the information provided is truthful and credible (Schwandt et al., 2007). Therefore, every researcher should ensure rigor in accurately portraying the phenomenon (Shenton, 2004). Many perspectives have been discussed regarding validity and trustworthiness in qualitative research concerning whether the researcher's interpretation is subjective, but "interpretation is not simply an individual cognitive act but a social and political practice" (Schwandt et al., 2007, p. 12). This research aimed to interpret the risk of vicarious trauma for those school counselors and teachers in elementary Title I schools based on their social circumstances, beliefs, and practices. This method allowed high participation and attainment but also represented an ethical concern because participants may have desired to present themselves positively or be reluctant to disclose adverse information for fear of being judged (Thewes et al., 2018). To minimize this risk, the researcher did not include participants who work in the same setting as her. Equally, the researcher constantly reassured participants of her duty to maintain confidentiality and safeguard privacy mechanisms. The researcher also reminded them that there were no right or wrong responses, nor was the interview a test to keep participants from preconceived notions about the research or trying to respond to the questions in a certain way to please the researcher. The researcher was transparent to the participants that the research was not looking at pathology, so they did not feel restricted from participating for fear of being labeled.

Using Lincoln and Guba's (1985, as cited in Lincoln & Guba, 2007) techniques to establish credibility and transferability, the present research included the evaluation of credibility, authenticity, transferability, dependability, and confirmability to assure that the findings were transferable from the researcher and the research participants to the results. Considering this idea, the researcher used essential evaluative appraisal criteria to validate participants' stories and lived experiences. This appraisal included an intensive literature review, feedback from the focus group, and feedback from individuals different from the participants to determine if the results hold verisimilitude for these additional participants. The present research also counted on the auditory support of the Liberty University dissertation committee to ensure that the findings that emerged from the data were accurate to the Title I school staff's vivid experiences, not the predisposition of the researcher.

Credibility

Qualitative research is an intrinsically subjective process where the data collection is led by the researcher, who must practice reflexivity or bracketing to ensure that her biases do not influence the study outcome (Creswell & Poyh, 2018). Bracketing is prevalent in this study since the researcher is a school counselor and has experienced the phenomenon discussed. For this reason, she refrained from bringing her assumptions to the research, avoided biases, and monitored her beliefs and subjective interpretations to ensure that the participants' information was not distorted using the following strategies to maintain a constant reflecting process: She was transparent to participants and the research report about her background and relationship with the education community. She remained prepared to disclose any unexpected changes during the data collection and reflected on her decision to make any changes. She examined and refrained from personal judgments that may have affected the data collection and coding.

According to Gall et al. (2010), credibility and confidence in qualitative research are the truth of the findings and how confident the researcher feels about the results. Thus, the researcher used data triangulation between interviews, a focus group, and literature findings to avoid saliencies or any possible distortions to the results.

Dependability and Confirmability

This study attempted to produce conclusions that could be applied to similar situations about the phenomena based on themes and ideas that were well-grounded and well-supported in education and social research. Confirmability refers to the findings from the participants' information, not the researcher's bias about the researcher's particular experiences or perceptions in the field (Creswell & Poth, 2018). The researcher counted on external audits by people in the education field with whom she has worked and who are not connected to the study to examine the process and results and provide feedback to assess accuracy (Lincoln & Guba, 2007).

Transferability

Transferability refers to the extent to which a study can be transferred to similar situations or others who may wish to apply part of the findings elsewhere (Lincoln & Guba, 2007). The present study wanted to extend the results to the education and school counseling field to avoid vicarious trauma among their members. For instance, it responded to questions that apply to similar problems and phenomena in school counseling in working with traumatized students. The descriptive data obtained through the interviews, literature review, documents, notes, and focus group feedback enhanced the credibility and integrity of the research's findings.

Authenticity

It is essential to present the research richly and artfully while remaining grounded in the scientific process (Cope, 2014). Authenticity provides additional standards of validity that are

not relevant to every study but allow for flexibility and application to this investigation (Cope, 2014). In this manner, the researcher described the different interviews with vividness, honesty, and explicitness, and the stories creatively revealed a narrative that contained participants' perceptions and feelings about the problem being unveiled.

Ethical Considerations

Assessment of Risks and Benefits

There is a relative risk of harmful effects of participation in which the school staff may reexperience trauma symptoms when relating their experiences. The researcher protected the research participants by directly monitoring them for signs of distress or fatigue; she provided breaks or stopped the interview when it became stressful. The researcher was mindful, grounding participants, providing necessary relaxing techniques, and giving rapport and time. However, asking participants about experiences that may have been traumatic or unpleasant may trigger stressful reactions that may need interventions beyond the researcher's scope (Cozby, 2009). For this reason, the contact information of a licensed mental health provider was available (Appendix F & G - a copy of the licenses) in addition to local counseling centers' addresses and phone numbers in Central Maryland that participants could use as needed (Appendix H).

Deep-semi-structured interviews may represent an ethical concern because participants may desire to present themselves positively or be reluctant to disclose adverse information for fear of being judged (Thewes et al., 2018). Minimizing this risk included reassurance of confidentiality and explaining the mechanism for safeguarding confidentiality. Similarly, as a school counselor in Maryland, the researcher has an internal perspective of the problem, which made it prevailing that she practiced reflexivity, identifying her biases to minimize the effect that her interpretations could play in the data collection and analysis. The research’s benefits include

the reward that sharing their stories may have in participants' catharsis. Also, the potentially beneficial applications of the research findings, like the interventions and resources that help improve future educational practices. By examining how Title I schools' staff describe the emotional and psychological experiences in working with students from the Northern Triangle using qualitative approaches, the educational system can better support and plan interventions to prevent them from developing vicarious trauma or other mental health struggles due to their work.

Debriefing

Debriefing has an informative and ethical purpose that typically occurs at the end of the interviews or the research and complements informed consent (Cozby, 2009). The researcher's debriefing or doing a quick summary of the main points discussed during the interview at the end to check for accuracy with participants, gain immediate insight into the data content, and strengthen trustworthiness.

Protection of Data

Confidentiality and privacy are preponderant when participants disclose information of a personal or professional nature that may be harmful if disclosed in public (Heppner et al., 2016). Thus, anonymity was provided to the participants by replacing names with pseudonyms and avoiding identifiers that could link them with the data. The researcher also masked descriptive information similar to the accuracy to prevent their identification. Data remained private, keeping interviews and focus group verbatims and researcher's notes stored on a password-locked computer out of reach of anybody external to the research. After three years, all electronic records will be deleted, and all hardcopy records will be shredded.

All participants were willing to participate till the end of the research. If it were the case that a participant had chosen to withdraw from the study, the researcher would not have used the participant's recording for research purposes, and the information the participant provided would have been deleted. The researcher created pseudonyms instead of using the participants' names and masked descriptive details similar to the accuracy to prevent their identification. The research disclosed the county where the participants worked but refrained from using descriptive information about their schools.

Summary

The present chapter has provided an overview of the current qualitative research study's purpose, procedures, design, and analysis. Twelve participants were selected for semi-structured interviews, including questions grounded in the literature review, participants' life history, experience details, and meaningful reflections and probes to gather enough information about the phenomenon. The researcher stopped interviewing when the data hit saturation and captured significant and representative themes. In addition, the researcher shared her role in the research and how her personal experiences influenced her willingness to participate in the present investigation. Finally, it was disclosed that the information was analyzed using memoing, coding, and themes to provide an interpretation considering the participants' views and the perspectives in literature with the hope of being helpful in other educational and counseling settings. Trustworthiness and ethical concerns were addressed, ensuring methods to provide insight and validation into the research.

CHAPTER FOUR: FINDINGS

Overview

The purpose of this phenomenological study was to describe the experiences of school counselors and teachers working in Title I schools and the possible risks of vicarious trauma due to their work with students who may have suffered traumatic experiences in their homelands or during their immigration to the U.S. The theoretical framework guiding this research includes Husserl's transcendental framework concepts and Lazarus and Folkman's transactional theories of stress and coping (Lazarus,1966; Lazarus & Folkman, 1984). Lazarus and Folkman's frame has helped for several years to understand the emotional demands that mental health professionals exposed to others' trauma may endure. However, there has been a literature gap in explaining school staff's vicarious trauma risks when exposed to students' trauma stories or symptoms. The researcher maintained her obligation of bracketing, separating her judgment and person from the data collection and analysis process to allow participants to make sense of their experiences without suppositions on her part. The study helped participants elaborate and identify their feelings and experiences through individual interviews and a focus group meeting that was recorded, transcribed, and coded. The chapter will contain information on that process through participants' descriptions, data analysis, themes, and responses to research questions.

Participants

The researcher used a chin-referral sampling from the researcher's circle of acquaintances in the field and social media and sent emails to educators and school counselors working in Title I elementary schools in Maryland. Seven teachers and five school counselors from the county public school systems in Montgomery (MCPS), Prince George (PGCPS), Charles (CCPS), Frederick (FCPS), Wicomico (WCPS), Baltimore (BCPS), Charles (CCPS), and Anne Arundel

(AACPS) who met the requirements for the study consented to participate. Eight of the twelve participants were born in the U.S.; Three are Hispanic, and one is European. There were ten females and two males. Ten of them are still working in Title I schools, one is retired, and one is taking leave without pay.

Of the twelve participants, four, Lucia, Ray, Anney, and Dina, are immigrants and were ESOL students themselves. Two are males, and ten are females; Lucia, Anny, Karen, Rose, and Kay have worked only in one county during their entire teaching or school counseling careers, and Karen has been in only one school during her 24 years as a school counselor. Six participants have been working for between two and ten years with the school system, two for 24 years, and two participants have been working for 30 or more years.

Anne

Anne has worked in different roles in Title I schools in MCPS and FCPS for seven years. She wanted to be a middle school counselor but found a passion for elementary school, enjoying the ability to work with younger students. As a school counselor, she provides individual check-ins, small groups, and classroom lessons for pre-K through 2nd-grade students on emotional regulation, friendship, and bullying. She also does mental health referrals and supports the student as a whole. Anne has always known about her passion for psychology and working with kids; thus, the school counseling career allowed her to pair those aspirations. One of her significant wishes in the present is to communicate in Spanish because of the amount of Hispanic population she works with.

Karen

Karen has worked as a school counselor in the same Title I school at MCPS for over 24 years. She shared her passion for working with families in a Title One school, citing their drive,

determination, and stories of perseverance as inspiration. Initially, Karen did not plan to work in a Title I school, but it was her first opportunity to get into the field. Every day, she shows up at work to give back to the community and make a difference in students' lives. She assures that not doing it will make her feel disappointed in herself.

Jane

Jane has worked as a teacher in different Title I schools, grades, and counties, including Wicomico and Ann Arundel counties in the southeastern part of Maryland, for over seven years. Her first Title I school was by chance, and her subsequent schools were a deliberate choice due to the feeling of working with a more needy population. Jane described her experience as feeling like a home away from home because it has helped her sense of belonging.

Tina

Tina has worked for over 20 years as a teacher in different Title I schools across Maryland (CCPS, WCPS, and MCPS). She has prepared academically in literacy and reading to provide better interventions for her students. She feels passionate about her profession and the significant impact she can have on children's lives as a teacher. Tina recalls that she and her family were under homeless status on several occasions and how the school support made a difference when they got involved. In addition to her family hardship, Tina recalls a very traumatic story when in elementary school and how she wished her teacher had helped her at that moment when she felt she could not talk to anybody. Her mission is to support her students now as a grown-up herself.

Mike

Mike is an elementary school principal at a Title I school who has served in different roles for over 30 years in the PGCPS and MCPS school systems. He feels passionate about

working in Title I schools and describes himself as an advocate for the communities that these schools serve. Mike taught for a few years at a non-Title I school but soon discovered that his mission was to work with less privileged students. He has worked at the same school in different positions for over 20 years. As a principal, he has developed consistent programs and a solid positive relationship between the school and the community.

Anny

Anny became a counselor after discovering her passion for mentorship and leadership in community work. As an English Speaker of Other Languages (ESOL) student, she shares the struggles she and her family had to undergo. Then, her passion focused on becoming a bridge between immigrant and American cultures as she always noticed a division between both. Her passion as a school counselor was hindered by the misuse of her skills and over-duties in communicating with families because other resources to support Hispanic speakers were unavailable. She loves being part of something big through her job as a school counselor, helping this population, and being able to communicate and feel with them. However, she had to leave after only two years of work in Baltimore County because of the barriers she found with the school administration. She has decided to dedicate this time to her children.

Dina

Dina was born and raised in a Hispanic country. She came to the United States more than 20 years ago, where she finished Middle and High school. Twenty years later, Dina has been a first-grade teacher for four years. She worked in MCPS and is now in Frederick County and wants to support bilingual students, give back, and help them with their language. She recalled not being ashamed to speak Spanish, but English became her preferred language, which was also a barrier to her family at times. Despite her initial uncertainty about working in Title I schools in

a bilingual program, Dina intentionally chose to work there and does not see herself in any other type of school.

Ray

Ray is a newcomer support specialist who works with English Language Learners (ELL) in grades 2-5 at MCPS, assessing and helping students acquire literacy skills while connecting them to different resources and co-teaching a first-grade class. As a child, he migrated with his family from a chaotic Middle Eastern country and learned English in an ESOL program once he arrived. Ray remembers the barriers of being unable to communicate in school and his struggles with immigrant trauma and acculturation. He wanted to give back to the immigrant community as a teacher, helping families during transitional periods in a way he and his family were not when they arrived. Therefore, he has purposefully worked to become a fluent Spanish speaker since high school, studying in Hiapanic countries and constantly practicing the language with his students to be that bridge that helps them to communicate and belong.

Lucia

Lucia immigrated with her family to Florida from a Hispanic island when she was eight, fleeing a dictatorial regimen. She started her career in school counseling in the early 1980s and remained in the field for 30 years, witnessing significant changes in the demographics of her students. As an English learner, Lucia remembers feeling unwanted in school and struggling to adapt to a new country and language. She moved to the Washington, DC, area when she heard they needed bilingual counselors in the PG county because there was a significant influx of immigrants, primarily from El Salvador. Though she applied to that job needing to support her family and start working, she immediately fell in love with the community and stayed for 30 years.

Chrystal

Chrystal has been a teacher for over 24 years, 13 in one of the largest public school systems in the U.S. and eleven in Montgomery County (MD). She has a bachelor's in elementary education, an English language development (ELD) certification, and a graduate degree in curriculum and instruction. She had wanted to be a teacher ever since she was little when she played with her sister to be her teacher. After graduating from university, she struggled to find a job; when she heard about the need for teachers in some Title I schools in a suburban area, she finally saw the opportunity to start her profession. She noticed that the neighborhood struggled with deep trauma, and administrators were happy to have at least someone in the classrooms with the students, as many teachers used to quit soon after they started because of the nature of the job. She disclosed how her students' stories made such a significant impact in her life, which, combined with the lack of support, limited resources, and consistent and effective programs for students and staff, made that experience traumatizing. She decided to quit her profession and move to Maryland. After therapy and some time, she tried to teach again, this time as an ESOL teacher in Title I in MCPS, as her passion is to work with disadvantaged communities.

Kay

Kay has worked in MCPS as a teacher and school counselor for over 13 years. She described herself as wanting to teach since she knew what a job was as a little girl. She would use her toys and sisters to play and practice as a teacher. Kay has certifications in special education and general education. She was a resource teacher for three years, then moved to a different school to teach first-grade students with (Individualized Educational Programs (IEPs) to keep involved with special education. She then transitioned from general education to school counseling, trying to find a new meaning for her mission in schools. She loves working in Title I

schools, considering they reflect society and diversity. At the same time, she believes most teachers have a deep passion for their work and the students and families they support.

Rose

Rose pursued a career in school counseling after being inspired by her mother, who worked as a teacher until she retired. She had two semesters of field experience in a Title I school in Prince George's County and transitioned to being a school counselor at MCPS. Title I experience was not her first choice, but Rose loved working with the families and students for three years. However, she felt emotionally, mentally, logistically, and academically unprepared for the highly intense experiences that took their toll on her mental health, leaving her broken down as she described. Then, she considered switching to a non-Title I school, but the clerical work and lack of time to do her job as a school counselor made her doubt the profession. She took a break and stayed home while caring for her family.

Results

The researcher conducted twelve extensive semi-structured interviews to collect participants' stories and explore how they make sense of their experiences working in Title I schools with students from the Northern Triangle. After reviewing the interview transcriptions, the researcher looked for codes to identify and summarize connections between emerging patterns. Then, they were grouped, laying the foundation for the themes discussed next. Those themes were shared and discussed with the focus group to complement the information.

Theme 1: Work as a Mission and Purpose in Life

Despite the setbacks, all participants disclosed feeling passionate about working in Title I schools, referring to their careers as the opportunity to have a passion, a mission, a chance to support those less privileged, a work that helps you feel satisfied and with a purpose in life.

Work as a Mission

Participants declared enjoying working with low-income families and the opportunity to make a difference in their lives. For instance, Mike said, "I felt given more purpose to my work in Title I schools than in my five years in a non-Title I school." Dina uttered, "I found my mission; once I was here at a Title One school, I have not seen myself in any other type of school." Lucy expressed, "I loved the kids and the connection with them; my work gave meaning to my life." Ray asserted, "As a teacher in Title One, I feel I am making a meaningful difference and providing opportunities daily."

Work as an Opportunity to Support Less Privileged

They referred to their work as needed to support those less privileged, helped build a sense of belonging, and offered a safe space for students and families. They have observed how, with all the struggles, students want to learn and enjoy being at school when feeling accepted. Kay said, "There is so much positive impact of working with a not privileged population, as it can make one's work feel more valid and meaningful… Your work really matters, and your efforts are making a difference." Krystal shared, "I feel blessed to have had a wonderful childhood and go to school in a wonderful place, and now I want to give back to my community by teaching in a school that needs teachers. Kay indicated, "I have so much compassion for students coming from the border, what they've gone through, and their journey to a new country and not knowing the language." Karen added, "Once you bond with those kids, you become like their guiding light, the person who can fix all their problems." Mike acknowledged that his work in Title One schools allows him to support those students who, as he said: "came to massive culture shock to America… even though I can get in trouble because sometimes you must go outside the rules because the system cares more about public relations and appearances." The

four participants who came to the country as young immigrants added their need to support students going through similar situations they went through being ESOL students.

Work as a Sense of Satisfaction

Participants stated how relationships with students, parents, and staff are the key to feeling part of a purpose in a Title I community. Participants considered Title I schools more reflective of society and its diversity and an example of students' resilience. A place where, as Kay and Anny respectively said, "teachers and school counselors become everything and the light for students that have suffered trauma" and "we feel valuated and part of something big." Mike claimed that in Title I schools, staff put up against any barriers, trying to break down those walls for students and create teamwork and camaraderie. He said, "It all comes down to relationships and a sense of purpose." One of the most positive memories Rose has from her Title I school experience is the staff and kids she worked with. She explained, "Kids are always great. I believe they are never the problem, but the lack of support, family involvement, and system demands." For Ray, the satisfaction of helping others comes with empathy:

> You will never make any gains with some kids. Regardless, they will see you trying, and that's the most important thing to them because they probably do not see that at home or other adults trying to make an effort. So it really depends on the student's resilience, what they have gone through… It is a kind of fishing; you toss a wide net out there and then pull it up and just hope to get as many as you can, but of course, some are going to fall through. Montgomery County is a prime location for working with at-risk youth, but success depends on individual resilience and adult empathy.

Theme 2: Northern Triangle Students' Barriers

Participants disclosed significant adverse experiences that affect students and their families in Title One schools, stories that, compared to most American students' stories, are like "two different worlds," according to Ray. The most recurring codes in this theme referred to students' trauma, students' behaviors, language and cultural barriers, and students' learning and academic gaps.

Students' Trauma In Title I Schools

Participants noticed how the traumatic events some Northern Triangle children have endured before, during, and after their transition to The U.S. affect their self-regulation, concentration capacity to learn, and ability to think about the effects before acting. Participants described disturbing stories heard from their students, some close to, as Ray recalled, "the lowest points of humanity." The participants observed how students and their families do not know how to unravel and deal with the effects of trauma in their lives. Some of those students deal with significant difficulties in class, which made participants think about trauma as one of the main reasons for their students' academic and behavioral struggles. Ray detailed how a lot of Central American students have faced trauma and barbaric situations, escaping a lot of different types of persecution, domestic and social violence, and reunification issues. Students who cannot even trust their family members because they have been victims of sorts of emotional and sexual abuse from the people they should trust the most. Several of them had traveled for months, being deported or abused by coyotes while getting across the border, escaping a lot of different kinds of persecution and abuse in their countries.

Mike emphasized how "those students do not even have relationships with their families because they have been separated for so long, and it is hard for them to learn amid such struggles." Anne expressed concern about Northern Triangle families because "they are very

open about everything that happens within the family. Some traumas or situations occur at home or to the extended family members, and our kids know everything." For instance, Jane sadly remembers two Hispanic students facing traumatic experiences that have stuck with her. One of her students witnessed how his father killed his mom, and the student had to call 911 and testify against his father afterward. Another student was found in the streets looking for food with her siblings after waiting several days for their mom to return home. Lucia recounted how she wanted to support a teacher, encouraging students to tell their stories for an academic project. Still, many students' stories were full of violence and sadness, which made them cry and consider a different approach.

Challenging Behaviors

The participants, who are teachers, explained that enormous classroom disruptions are due to students' behavioral issues distracting the other students and hindering a productive learning environment. For instance, Jane explained:

> The most challenging thing about being in Title I school is I just have to say the behaviors. My main concern is safety, as it causes a distraction to the other students… They are not able to be in a productive learning environment… We are just dealing with behaviors all day. I feel burned out after only seven years of work because the biggest challenge in these schools is being available to teach, be safe, and learn.

Chrystal also said, "They would elope a lot. So that was very scary for me because, you know, you don't know where they are. You don't know if they're safe." Karen is concerned that more highly impacted students stay in the general education setting with insufficient staff to keep them safe. Teachers struggle with inadequate resources and support for students with special needs, particularly in the face of changing systems and priorities.

Learning and Academic Gaps

Participants agreed that assessing students' learning is not always possible right away as they are getting through all traumatic experiences, and many come with deep academic gaps. Some are placed in upper elementary grades because of their age, but they have never been in a school. Tina is concerned that:

> Those students came to learn, making them even more nervous about acquiring the skills while learning the language. Imagine a teacher coming to you in those circumstances, giving you a piece of paper, and saying to write a fairy tale. That may trigger a lot of fear.

Participants advocated using those students' knowledge to help them learn new concepts and approaches in a culturally relevant manner because, as Mike said, "It is our duty as teachers to give them the attention and learning they lack at home."

Regarding how trauma may impact students' school performance, Tina remembered one of her newcomer students who experienced difficult travel conditions crossing the border. The student was with her family with limited access to food and water for about two weeks while in an enclosed place with 20 people and no bathroom, getting sick. It was hard for her to focus in school, and she was stealing food and eating as much as possible at the cafeteria. Tina could see how much that experience impacted that girl's behavior in school. In addition, Ray recalled the story of two students to illustrate how trauma may affect their learning and well-being. There was a boy during his first teaching year who seemed uninterested in learning, which frustrated Ray as a teacher until he learned the student's story. Ray recalled both stories,

> He [the boy] was homeless and without any family in the U.S. He was living in people's houses, borrowing clothes, and trying to survive as much as possible without being caught; that is why he was not available to learn; he was surviving!… [he paused and

> continued with the girl's story] there was a girl who a bunch of guys on a train attempted to rape during her immigration trajectory. Still, her mom offered the "coyotes" [people who smuggle immigrants across Mexico –U.S. borders] to take her instead. The girl witnessed the whole horror her mom had to go through to save her. She could not sit in her classroom and attend a class; she was distracted and defiant.

Participants were concerned about how, unfortunately, those stories repeat often, but in many cases, families and children normalize that trauma. They emphasized that teachers must understand their students' testimonies and experiences to measure their academic performance and behavior and give them time and empathy.

Family Constraints

There were concerns among the participants with students' family trauma, involvement, and connection with their children's school. They see how hard it is to support and teach students struggling with homework due to a lack of support at home. Kay recognized that Northern Triangle parents are not either capable or willing to try to support their children because of their own trauma. Anne completed that:

> Undocumented families do not often answer the phone, causing their kids to be dropped off from therapy and other resources for lack of response. Most undocumented families are afraid of responding to calls because of their legal status... They deal with shame and blaming.

Low-literacy families also hinder students' learning and mental and physical care. Concerning this, Dina acknowledged the challenges of balancing teaching with providing support. She recalled having to talk with school parents about things that she thought were common knowledge to a certain point, "We often have to talk to parents about teeth care,

vitamins, sickness care, but how will you pass that along to your children when you do not have it for yourself? [referring to parents]" She is concerned that some parents do not even enroll their kids in the health room because they cannot complete the paperwork or do not consider it essential, but instead of asking for help, they just do not do it. School counselors also mentioned challenges in reporting potential child abuse due to cultural differences and trust issues.

All participants agreed that lack of attendance is another considerable alarm as they notice how many parents seem not to give importance to their children's attendance at school. They noticed how often parents decide to keep their children at home caring for other children or not bring them to school because it is raining or hot or for any other reason. Participant Dina said, "They just seem not to see the importance of school." Anny is concerned that, in many instances, these families unconsciously receive the pity message; she advises speaking to these families with humility, understanding, and respect, recognizing that they are the experts in their lives because "there is a big difference between pity and genuine recognition." Instead, as professionals, she recommended being able to help them figure out how to do it because these parents have so many other needs and hierarchies to check off to help their children, which turns the school into a secondary worry.

Theme 3: Cultural and Educational System Barriers

Participants' diversity allowed the researcher to distinguish their experiences based on their backgrounds, the counties, and the administration for which they worked. Even though there are some specific resources in their counties, one more than in others, to support Title I schools, most participants agreed that interventions and support from administrators and the school system make a significant difference in how they feel about their work in these schools.

Participants also recognized that language, cultural, and adjusting barriers lead to poor academic performance and limited opportunities to support students' social and mental growth.

Language Barriers

Teachers who cannot communicate with Spanish speakers in their primary language declared that the language barrier hinders their ability to provide interventions and support their students' emotional and academic needs. Kay said,

> Language barriers sometimes made me feel guilty because I cannot sometimes get to the bottom of what they [students] need… Google technology has been great. It helps a lot, but I have not found the secret to being as effective with them as I am with kids who speak English.

Dina, who migrated when she was little, still recognizes how cultural and adaptation barriers are hard to understand:

> I cannot understand what my students went through. And I am not saying that every child I have ever taught from Central America has had a traumatic experience. I can relate to them as a Hispanic, but my circumstances were different and better than any of the stories I hear every day.

Karen considered that "The language barrier is a challenge but may not completely hinder helping families. This work needs just passion and care. I can always get somebody who speaks Spanish, but caring skills depend on you." Tina added, "As a white person, trying to relate to children from lower socio-economic backgrounds may be a big challenge in building relationships with students from different backgrounds." For Anny, instead, being able to speak Spanish becomes a great asset; she recanted how newcomers get excited when "they hear me

speak Spanish and I look like them. I mean, you would just see their face light up. And that's where our roles as helpers are so important."

Lack of Administration and System Support

Participants expressed that staff members want to work in a school where the administration supports their efforts and feel they can make a practical difference in students' lives. They also recognized how the support of the administration and the system played a significant role in their positive or negative experiences working in Title I schools. The most mentioned concerns referred to the excess of duties out of their professional responsibilities, lack of mental health support for staff and students, lack of clear consequences and interventions for challenging students' behaviors, deficiency of supportive leadership, having to work at home with grades and preparing classes because of lack of enough time at school. Tina mentioned how a difference in administration greatly impacted her stress and happiness at work concerning discordance or alignment with the principal and school culture:

> My actual principal knows the importance of giving the love of literacy and learning to the children, being number one in the relationships, and building relationships. However, in the school I was before, the admin was terrible… I was miserable. There was no warmth in the school. It felt like I was going to jail every day… Like kids did not want to be there either.

Anny also mentioned how the administration's lack of support and understanding for diverse students and the staff led her to leave the school even when she felt very connected with the community, "Our principal believed teachers needed to be the superintendent's pet. She wanted to change the school but put all responsibility on us." Lucia added that there is a lack of support for teachers' emotional well-being, clear boundaries, and resources that delve into stress

and guilt-tripping, "The way that teachers are not supported ends up hurting the kids." Participants also mentioned frustration with colleagues who do not do their work and understand the community they work for, mainly when supporting students with special needs or circumstances. "Everything starts to fall apart when people don't do what they have to do In Title I schools," Karen said, referring to co-workers who seem not to care about their jobs.

Three teachers brought up that even though counselors provide self-care resources, it is not enough for their mental needs. They also emphasized that it is a lack of time to take care of their mental health during the school day. Mike was concerned with the hiring's flawed practices. "Many professionals are not ready to work in Title I schools, and the system and administration must be more mindful in hiring people who care and are willing to do whatever it takes to support these kids;" it is a concern also mentioned for other participants. Regarding the mental health topic from the school counselors' perspective, Karen added: "The county never asks questions like this, about what we go through or how difficult it is or what it is like being the only one in the building dealing with all kinds of traumatic stories and challenging behaviors." Finally, as a Baltimore's bilingual counselor, Anny struggled to be "the person that everybody went to ask for information, to translate and make all kind of calls mainly because we did not have a supportive leadership." In contrast, Ray felt that MCPS provides significant resources as at the Title I school he works has "a lot of staff that speak Spanish and a huge amount of resources and services to provide to the community, but what is more frustrating is being unable to serve the students and their families when my time has been used for other things."

"I feel frustration not so much towards the kids or their stories, but the lack of administration," Jane said, referring to the deficiency of control or opinion in what is done with discipline and resources in the school. She has witnessed students' physical altercations that do

not have any admin documentation or follow-through. She recalled how her former principal made the school climate inviting, while the present one made her feel drained, considering changing her role as a teacher.

Differences Among County From The Participants' Perception

Participants recognized profound differences among the counties where they have worked, especially regarding resources; also, there are differences regarding immigrants' access to resources and legal protection when there is a sanctuary city and when it is not. For instance, Anny is concerned with the lack of resources, roadblocks, limited resources for ESOL students, and support for parents and caregivers in Baltimore County. Ray, instead, considered that MCPS has a vast number of resources and services for the community compared to those offered in PG County and Baltimore County, where he used to work. Jane also is concerned with the lack of resources in Anne Arundel County, where, for instance, the community liaison is a fifth-grade teacher at the same time.

Career Education and Professional Development Support

Another barrier participants were concerned about when working in Title I schools is the lack of mental and academic preparation to deal with behaviors, academic gaps, and other barriers in their training as teachers and school counselors. They noticed discrepancies in what was taught in their careers versus reality in schools, primarily Title I, because "What we see is beyond poverty, but family separation and trauma," says Jane. Rose referred to her experience in a Title I school for three years, "There is often a discrepancy between learning and the real world, but in this situation, I think it was just the most extreme discrepancy you can imagine." Chrystal alleged,

> I felt unprepared and untrained. I even considered becoming a counselor to be able to help them [students]. I needed to know how to do these things for my students because I just did not know. I remember Googling everything under the sun because I was not trained to do certain things and wanted to help them badly.

As a school counselor, Anny felt like wearing so many different hats. "I feel more like a social worker, like a school community liaison; I feel more like I am the person who is meeting those basic needs, and I have not been trained for it." Four participants mentioned insufficient education in cultural competency. Also, they complained about how the educational system tends to put everyone in the same box instead of being more culturally aware. Finally, even though nobody was trained or even imagined COVID-19, this was a concern mentioned not only as a barrier but as a gap in education; participants felt unprepared to deal with children's social and emotional development gap after COVID-19, they noticed a considerable increase in students' behaviors, attention and academic struggles and lack of social and communication skills. Participants have seen their students no longer have an attention span since the pandemic.

Testing and Iniquity

Finally, teachers felt stressed and defeated "due to pressure to meet sham data standards," overwhelmed by data meetings, and the emphasis on test scores. Dina often repeats to herself, "Stop because the test will not teach your kids... you still have to teach them." According to participants, the school system [referring to their own counties] lacks students' understanding, and Title I schools are often measured against test scores. They feel that there is an unfair, arbitrary benchmark for kids who are making significant progress in different areas. Kay avowed, "It is like these students and their teachers have done something wrong, and then they start feeling the same way." Dina said, "I decide to focus on students' strengths and potential

rather than solely on their deficits and weaknesses." Ann added, "Counselors and teachers have a role in being trustworthy, non-judgmental workers in Title I schools." Ultimately, Karen mentioned how so many things are changing [referring to students' and counties' needs, especially relating to immigration], and the system does not keep up." She is concerned that the county [referring to MCPS] does not care about the employees in Title I schools, as staff cannot say no to many things asked while ignoring their particular needs, making them feel powerless.

Theme 4: Holding Emotional, Physical, and Social Struggles Because of Work

Seven of the twelve participants disclosed having to look for therapy at some point in their careers precisely because of the symptoms they were undergoing when working in Title I schools. They wished to learn more about supporting their students but declared being too exhausted at the end of the day to try to learn other techniques. They felt defeated because they did not have enough time to plan and offer different learning opportunities to their students.

Teachers and School Counselors as First Responders for Traumatized Students

Participants declared that on many occasions, they were the first to respond to their students' painful stories. Karen said, "Kids with trauma come to me first before even having any other help somewhere." Participants affirmed that teachers struggle to support those students who display challenging behaviors and often have been involved with Child Protective Services or have recently arrived in the country. They added that teachers try to find common ground while managing their students' struggles. Several participants expressed how they are trying to provide care for their students' basic needs and managing behaviors instead of offering academic content. Dina said, "When my students struggle emotionally, I offer a time in the mindful corner with a stuffed animal and hug them, but there are so many. What else could I do (Dina tears)?... I

am also often afraid to become a trigger for their trauma." Concerning listening to students' stories, Tina evoked why she wanted to become a teacher:

> When I was younger, I was sexually abused, and I did not have anyone to talk to. My teachers did not know, and I did not have anybody in the school, right? That is why we teachers always have to look at everything through a trauma lens to help kids because you do not know what is happening in their world. My experience encouraged me to be there for my students and listen to them.

Kay revealed, "You know you are their world, and you are there. You are their safe place, and you know that as a teacher and counselor." However, connecting with some students is challenging due to their guarded and transient nature. They have seen how students who need help the most are the least likely to trust others, open up, or even be willing to participate with those who want to support them. Lucia was concerned that "Some students become self-destructive, self-harming, and have suicidal ideation, especially newcomers, as they don't know that schools are safe havens.

Being Emotionally Compromised

Ray was concerned that "Some stories are at humanity's lowest points, though providing a safe space for students to share their experiences is important" and how there is an emotional impact of hearing students' traumatic stories. Mike disclosed regarding this concern,

> As a former teacher and now as Title One school principal, I feel emotionally drained due to staff and student needs. I can do this job physically and intellectually for a long time, but I'm not sure emotionally… In my case, I had to learn how to compartmentalize those feelings so that they were not weighing me down.

Dina felt powerless to provide support, "I feel overwhelmed by their stories of trauma and struggles.” She acknowledged that students form a bond with their teachers, and teachers with them "so much that you hope you can help more… you cannot cry before them, but you do it afterward. Even thinking about that now makes me want to cry." Participants recognized that they are not trained in supporting some of the things their students have endured, putting them at risk of burnout, vicarious trauma, and compassion fatigue. "It is heartbreaking," Tina says, "It is hard not to worry. I think about them a lot. It is like your heart just breaks into a million pieces."

School Counselors' as First Emotional Responders

The participants who are school counselors declared feeling overwhelmed with multiple roles and responsibilities and the emotional toll that listening to students' traumatic stories repeatedly took on them. They declared feeling stressed due to the emotional nature of their work, often staying up late and feeling exhausted. According to them, their work has had a significant emotional impact, making it harder to separate work and personal life. Though they declared deep empathy and understanding after listening to students' stories, they have realized how their students' stories have been a massive component of their stress; Karen, for instance, explained how she is the only person in the building supporting students' emotional and social struggles. She felt like a first responder at her school; she has seen even the interpreters having difficulty hearing the students' stories while translating. "It is traumatizing, and I have cried with families so many times; my job is never boring; it is overwhelming."

Participants also shared, "I feel like collapsing every day" (Kay), "You want to go on a corner and like cry, but you can't because you are the support for others to be okay" (Anne), "I cried a lot at home and felt like, oh my god, how am I going to go tomorrow and face those stories and do a good job?” (Lucia); "I am devastated going home after hearing story after story

after story. Inside, I am always emotionally and physically exhausted" (Kay). In addition, they felt overwhelmed responding to students who needed intense support due to challenging behaviors that could take up their whole day. Dina expressed concern,

> I feel guilty because while helping with those basic needs or students' behaviors, I neglect to check on a kid who lost his grandma, the one who is feeling sad because he has a problem with a friend, or those with other "regular" counseling needs… We are caught in responding to all needs in the school.

Rose said that talking about her experience in Title I gives her chills. She described her experience as a school counselor in a Title One school as "intense" and "harrowing," with a heavy workload and focusing on basic needs like safety and food. Rose revealed how her job as a school counselor affected her personal life significantly,

> That case consumed me, and I was personally going through a lot at that time, which I think exacerbated my difficulty. I felt very broken down by just the volume of abuse cases, suicide, suicidal ideation, poverty, and hunger… I have had the privilege of not having firsthand experience and had minimal exposure to these things [trauma stories] I heard during my work … complex stories related to immigration, things that I only heard on the news. I had students sitting in front of me telling me stories you would only hear about on the news and seeing people in, you know, flesh and blood telling you these things… that burned me… You are shocked at what you are experiencing [referring to her symptoms]. You are angry and sad all the time. I can recall coming home and collapsing to the floor at my front door, crying because of just everything that I had gone through. I did not feel like doing my job. I wanted to avoid staff, kids, phone calls, and emails. I could tell my personality was changing. It was affected by my then-ongoing divorce

> issue. I just did not have it in me anymore. Then, I felt numb. I will say there was a point where the excellent administration I had could no longer make up for my struggle. I did not have as much compassion as I should have and was not as patient as I had been. I did not feel like doing my job. On top of all, I did not have time to intentionally discuss their feelings and challenges with colleagues due to the job's demands.

Title I Work and the Impact on Participants' Physical Health

Among the emotional impact, four of the twelve participants mentioned dealing with physical symptoms due to anxiety and stress. Anny dealt with difficulties during pregnancy, including a growing fibroid due to stress, according to her doctor; Lucia had to leave in the middle of the school year because she got cancer. She and her doctors still wonder if her sickness was due to the excess of stress she endured during her 30-year career at Title I schools, "I did not really have people that I could talk to about work/emotional overload. I felt alone…" She declared being constantly contrite because no matter how empathetic or how much she listened to those students, they would return to that environment where they were neglected or abused. Chrystal remembered, "I was almost consumed with work to a point where it was just not healthy..." She recalled how she had to look for mental health support. She was having problems sleeping, anxiety attacks, and was worrying all the time about students. At that point, she decided not to teach anymore; "I was so burnt out."

Tina declared that she has a kidney disease that worsens every time she gets stressed, but then she feels guilty about being sick and out of work. Kay declared feeling numb and detached from her family, which affected her relationships: "I turn off the feeling part of my brain till the numbness wore off; it was a whole body reaction." Jane declared,

> I felt unsafe and unaware of what the next day would bring. I just go to work, then home, and start over. I am too exhausted for anything else… work is repetitive and exhausting, with little time for personal life or self-care.

Jane remembered how she used to do fun activities with students when she started working, as she used to have a high energy level, but not anymore. She also feels the kids do not appreciate it either.

Impact on Family and Life and Ways They Cope

All participants complained in some manner about giving a great deal of themselves to their work in Title I schools and not as much to their families. Some accepted going to their rooms for hours after work and wanting to be alone. Tina reflected, "Why am I putting other people's children above mine? Why am I so tired? Why am I working till midnight? Why do I always have my computer, even at the park with my kids?" Kay said how, "Experiencing trauma without a break has caused a lack of energy and emotional availability, which has caused strain on relationships and contributed to depression, leading to feelings of guilt and isolation. Rose added that a student's horrific sexual abuse details she had to report to CPS, and for which she was supine, were so graphic that she carried those memories into her marital life, deterring her sexual life with her husband.

All participants disclosed having their own approach to coping with stress at work. Still, one standard recommendation is looking for therapy as a resource for managing a sense of overwhelming stress. However, they recognized finding time during the workday may be difficult. They also acknowledged the importance of taking a minute for themselves in a demanding job, expressing gratitude for small acts of kindness and empathy, and trying not to bring work home. Anny said:

> One of the routines that I would have is going down our driveway [referring to her home]. I would take everything that was feeling heavy with me from that day, leave it on the trees, and visualize it… I am just going to leave that story on the tree... Like, I will hang that [stress from the day] there until Monday and so just visually, and I would go down very slowly and visualize and leave everything there… Every time I was like stressed or had anxiety or was trying to manage all these things in the job, I knew my body was going to tell me I could not do this job as I developed a stomach fibroid from stress.

Focus Group Responses

All twelve interview participants were invited to a focus group to share the significant discoveries from the interviews to gain additional perspectives and a more nuanced understanding of the themes. After a survey for the best time to meet, only five participants could attend at the date and time accorded. Contributors shared their thoughts about the themes and which ones were the most pressing for them. They also had the opportunity to share suggestions and additional information for data completeness.

Primary Question

Describe your thoughts about the main themes that have resulted from the interviews.

Participants expressed gratitude that someone was listening and trying to unveil their struggles, experiences, and stories in Title I schools. Similarly, they manifested feeling validated, uplifted, and less alone, listening to the fact that they were not the only ones feeling that way; "I hate to say this, but it is like exciting because that means it is not just me… maybe I am not the problem," Karen said. They disclosed not being surprised by the resulting themes and wondered what they could do for things to change because they do not feel their job is sustainable in the

way it is. For this reason, for Kay and Karen, the third theme, addressing "Cultural and Educational System Barriers," is critical for any change as it will help resolve the other concerns found during the research. For instance, Karen disclosed, "We are burning out, and we do not have the mental and academic preparation to deal with this… they [the system and schools] never train us to deal with what we are getting… those who teach and decide are never in our Title I buildings, right?" Lucia considered that theme three is the "backbone" of the problem. The system and administration must create a culture where they care for their teachers and staff with reasonable expectations and reality checks, supporting and not being against them. Karen considered that the lack of incentives does not help the gap of educators wanting to work in Title I schools. She compared some government and private jobs where employees get bonuses, but school staff is not effectively recognized at all levels. In addition, they felt the system encourages staff to decompress and improve mental health but does not provide the means to be possible.

Chrystal felt she started solidly in her career, feeling her work was a mission. Still, the students and system barriers took an enormous toll on her to the point she did not feel like the same person. She was burned out, numb, and did not want to teach anymore. Lucia added that throughout her 30-year career, her mission was clear; it was not her issue, but the barriers were overwhelming, and she often felt unable to continue. Theme four impacted Kay the most, recalling how she was surprised there was a word for her job struggles. Vicarious and secondary trauma were terms that felt like a reality away from her and happening to people in very extreme situations. Still, she was impacted when she recognized all the symptoms described as her own.

Probe Questions

Portray what to you is the most important of all the things we discussed

The group agreed that mental health and support from the system and administration are substantial for the mental health and well-being of the staff in Title I schools, as well as self-care and preparation for the exceptional work that Title I schools request.

What suggestions would you have to school counselors and teachers who may be involved in the phenomena described by this study?

Chrystal said, "Do not be afraid to get mental help when needed or talk about what you are going through… Because it is a real thing." Kay added,

> I do not think anyone can process a lot of this trauma without professional help… We need counselor preparation programs and incentives… mandatory expectations like having a therapist coming to the school and having the gift of time to talk with someone… because if therapists need therapy, why are we not getting it if we are exposed to secondary trauma?... having extra time to decompress.

Karen inserted, "We must be open and vocal and speak our truth about what is happening because we continue to be ignored and pushed out by the system and those who do not know our schools."

Have we missed anything? Or is there any other information that you would like to be included?

The group felt the themes condensed all the main concerns about their job in Title I schools and opened the doors to meaningful conversations that sought interventions to support the staff and students in Title I schools.

Research Question Responses

One central research question and four sub-questions were used throughout the study as a basis for all interviews and writing protocol. Questions were intentionally developed that

would support understanding the phenomenon being studied. The lived and shared participants' experiences revealed the four prominent themes that are intertwined with the research questions as follows:

Central Research Question

What meaning do teachers and school counselors from elementary Title I schools in Maryland ascribe to their work with students from the North Triangle, and how prone are they to vicarious trauma?

First, participants discussed seeing their work in Title I schools as a mission, a purpose to support those less privileged with a high emotional and physical cost to their lives. They enjoyed their work with the Northern Triangle students and families, besides their harrowing experiences as staff supporting the students. They recognized that these students go through significant adverse experiences before, during, and after migrating to the U.S. but are also resilient. Those adverse experiences substantially impact students' behaviors and academic performance. Students may believe that the world is dangerous and may "act" to protect themselves constantly from signs of danger (Balaustein & Kinniburgh, 2019). Those signs of danger can be confused with any actions or events in the classroom (triggers) that teachers are often unaware of. Students then react with aggressive, defiant, or disengaged behaviors that frequently challenge Title I staff. Subsequently, as manifested by the participants, the school professionals become the first responders to students' basic needs, challenging behaviors, and emotional struggles. In general, participants felt emotionally compromised, exhausted, overwhelmed, and stressed hearing students' traumatic stories and witnessing their struggles. Several of them had looked for mental health support and had developed psychosomatic symptoms that have affected their family, social, and personal lives.

Sub-Question One

How do teachers and school counselors working in elementary Title I schools with students from the Northern Triangle describe their lived experiences?

Even though participants enhanced their passion for working in Title I schools, they generally describe their experiences in Title I schools as overwhelming and mentally draining because of their students' struggles and barriers with administration, lack of training, and resources. As mentioned, the frequent classroom disruptions due to students' behavioral issues hinder a productive learning environment and school performance. School counselors deal with connecting with some students and families due to their guarded nature. Language barriers are also part of their daily struggles as they depend on interpreters or ways to communicate with some students and their families. Still, they also felt guilty not being able to connect with their students as they could if language communication was not a concern. Their experiences also concerned frustration with a lack of administration and system support, referring to excessive duties, lack of follow-ups with students' disruptive behaviors, feeling safe at school, and lack of family engagement.

Sub-Question Two

How do school counselors and teachers from elementary Title I schools describe their feelings when listening to the students' traumatizing experiences?

This question was more challenging for participants to answer as most got emotional recalling some of their students' stories of trauma and their own reactions. They used expressions such as "I feel like collapsing every day," "I feel very broken down," and "I was almost consumed with work to a point where it was just not healthy..." "I turn off the feeling part of my brain till the numbness wore off," "I felt unsafe and unaware of what the next day would bring,"

and "Experiencing trauma without a break." They also felt guilty because they must often focus on those students who struggle the most, "neglecting" to teach or support other students. Their lived experiences at school frequently relate to students' challenging behaviors, resolving their basic needs, family disengagement, lack of attendance, and academic gaps, among other struggles.

Sub-Question Three

What support or resources are in place in their institution to support teachers and school counselors when working with these students?

Overall, they felt the resources available for the students, families, and staff were insufficient, even in those counties where the resources are more abundant, like MCPS and FCPS. Self-care resources are not available, clearly offered, or enough for the staff's mental health needs, paired with the lack of time. They sensed the system never asked the right questions about their needs and promoted training or interventions that did not correspond to the Title I schools' specific needs. Almost all participants mentioned feeling powerless and without control over what happens in the schools. Testing was another barrier that hindered their ability to teach their students. They argued that so much time is invested in assessing the students, which impedes the quality of time to learn and build relationships. It is also an equity issue as teachers in Title I schools do not have the opportunity to show their students growth compared to other schools whose students' conditions are very different from those in Title I schools.

Sub-Question Four

What are the relational and professional practices that school counselors and teachers in elementary Title I schools feel must have to help students' social-emotional academic achievement?

Relational and professional practices that stood out from all the participants included having access to self-care, family and social support, self-awareness, a sense of community, compassion, patience, and passion. In the professional area, a supportive school team, a consistent trauma response, understanding in addressing generational trauma in Latino communities, resources that support the student's academic and emotional needs, cultural identity, and, last but not least, administrative support.

Summary

Chapter Four presented the findings regarding the experiences of five school counselors and seven teachers working in Title I schools with students from the Northern Triangle. Participants from across the state of Maryland were interviewed and had the opportunity to share their experiences about their work in Title I schools. Four main themes were common after transcribing and coding all individual and focus group interviews. The first theme referred to the participants' sense of satisfaction, mission, and work purpose in Title I schools. The second theme advised about the barriers that the Northern Triangle students' traumatic experiences may have in their behavioral, social, and learning experiences. Then, theme three denounced the cultural and educational barriers that hinder the opportunity to help those students. Finally, chapter four delved into the participants' emotional, physical, and social struggles due to their work in Title I schools. Research questions were answered in detail using the participants' interview answers. Throughout the data collection, it was clear that the participants' lived experiences added meaningful information to the phenomenon being studied.

Chapter Five: Results

Overview

This phenomenological study aimed to describe the possible emotional and psychological struggles of teachers and school counselors who have worked or are currently working at elementary Title I schools in Maryland. The study looked at their experiences to help explain if there are any extra demands or challenges that may impact their mental health, job, and well-being. The problem that prompted this study is a need for a qualitative narrative that helps explain the possible extra demands or challenges that school counselors and teachers may overcome when working with students from the Northern Triangle in these schools. These students may endure struggles before, during, and after migrating to the U.S., impacting their cognitive, emotional, and social development. This impact may not only affect students' performance and behaviors in school, but it may also bring extra stressors and secondary or vicarious trauma to the staff exposed to the students' traumatic narratives and symptoms. While there are many studies concerning trauma and its effects on children, vicarious and secondary trauma in first responders, there is a literature gap about teachers' and school counselors' stories in Title I schools and the potentially harmful effects of their continued expositions on students' trauma narratives.

This chapter unveiled the discoveries the interviews allowed based on the participants' experiences. It will consist of five discussion points: (a) a summary of the findings through themes that helped to answer each research question, (b) a discussion of findings in light of the relevant literature and theory concerning the stress and transactional theories of stress and coping, (c) delimitations and limitations, and (e) recommendations for future research.

Interpretation of Findings

Analysis of data obtained from interviewing twelve participants from the state of Maryland who have worked in Title I elementary schools resulted in four themes to answer the central research question: "What meaning do teachers and school counselors from elementary Title I schools in Maryland ascribe to their work with students from the Northern Triangle, and how prone are they to vicarious trauma?" and then that question was broken down in four sub-questions:

1. *How do teachers and school counselors working in elementary Title I schools with students from the Northern Triangle describe their lived experiences?*
2. *How do school counselors and teachers from elementary Title I schools describe their feelings when listening to the students' traumatizing experiences?*
3. *What support or resources are in place in their institution to support teachers and school counselors when working with these students?*
4. *What are the relational and professional practices that school counselors and teachers in elementary Title I schools feel must have to help students' social-emotional academic achievement?*

Theme One

The first theme, *"Work as a Mission and Purpose in Life,"* blends mixed emotions about how participants describe their professional experiences. According to the goal theory of motivation (Locke & Latham, 1990, as cited in Locke & Latham, 2013), people are more motivated if their performance results in essential outcomes. First, participants see their work in Title I schools as a prosocial mission, a purpose to support those less privileged, and a work that helps them feel satisfied while working in an environment more reflective of society and diversity, characteristic of Title I schools. They also admired the resilience many Northern

Triangle families demonstrate despite adversity. Every participant spoke about the meaning that working in those schools has brought to their lives and the meaningful connections with their students. Goal commitment refers to the person's determination to reach their goal, which is positively linked to the performance in the endeavor (Locke & Latham, 2013). Participants feel they must advocate for their students and their families; they are committed to their work and continue to do it because they believe their efforts make that goal attainable, which becomes challenging as it has considerable stress implications for those professionals.

Theme Two

Theme two: "*Northern Triangle Students' Barriers in Title I Schools*" unveiled the struggles and difficulties these professionals encounter supporting those students. Participants disclosed how their students' traumatic stories have hindered their learning and behaviors. Those stories include traumatic narratives before, during, and after coming to the U.S. In their countries of origin, those students have surpassed events with domestic, political, and social violence, poverty, lack of schooling, and resources (Perreira & Ornelas, 2013); then, crossing the border, many have witnessed or endured sexual and physical abuse, hunger, and other challenging conditions (Thompson et al., 2019). Once those students are in the U.S., other challenges, like the absence of legal status and belonging, problems with family reunification, and lack of family involvement (Patel et al., 2016).

In the classroom, those students lack self-regulation, concentration, and impulsivity, which disrupts their and other students' learning. Teachers and school counselors felt they often respond to those challenging behaviors more than they can teach. Several students came with special needs that the staff struggled to support due to lengthy processes, language barriers, family involvement, and inadequate resources. Teachers and school counselors are also

concerned about students' safety and their own because of the behaviors exhibited, as some students become destructive to property, themselves, and others.

The lack of family involvement is another concern that adds extra stressors to these professionals. Families struggle to bring their children to school and move between schools often; many are impacted by a lack of literacy that reduces their access to the resources available to support their children's schooling. They usually need support with the most basic needs to provide for their children. Trauma is frequently normalized as families suffer from intergenerational trauma that becomes a norm, often resulting in the same experiences over and over (Delgado et al., 2021). Staff recognizes that there is usually a disconnect between school and home, having to act as the first responders to students and their painful stories and needs.

Theme Three

Theme three responded to the first and third questions concerning "*Cultural and Educational System Barriers*" that *impact participants' lived experiences and sense of resources to support them*. In general, they feel there are two sides of the same coin in explaining how they assess their experiences working in Title I schools: those with administrative support and those without. They feel that when the administration is supportive, they can align their mission more successfully with positive outcomes, including trauma-informed interventions, teamwork, building relationships, and connection with the school community to make a practical difference in students' lives. Those who lack administrative support feel burned out, frustrated, disengaged, and exhausted due to excess duties, lack of disciplinary and clear trauma-informed consequences for students' extreme behaviors, and discordance with the school culture. This concern extends to the system barriers and lack of understanding about Title I schools' particular needs, especially from county to county.

Participants mentioned Montgomery and Frederick counties as the counties with more resources available for Title I schools, especially in sanctuary cities. Instead, ESOL students' resources are more limited in Prince George, Wicomico, Baltimore, Charles, and Anne Arundel Counties. Also, teachers feel stressed and defeated due to pressure to meet false data standards, overwhelmed by data meetings, and the emphasis on test scores, which are arbitrary and unfair to students who are making significant progress in different areas but still struggle because of academic and personal barriers. Finally, this theme revealed the alarms about the discrepancies in what was taught in their careers versus reality in schools and the need for better mental and academic preparation to deal with the specific challenges they observe in Title I schools, especially after COVID-19 when students' behaviors, attention and academic struggles and lack of social and communication skills have increased ostensibly.

Theme Four

Theme four, *"Holding emotional, physical, and social struggles because of work,"* responds to questions two and four: "*How do school counselors and teachers from elementary Title I schools describe their feelings when listening to the students' traumatizing experiences?*" and "*What are the relational and professional practices that school counselors and teachers in elementary Title I schools feel must have to help students' social-emotional academic achievement*? In this regard, participants were very vocal about the mental and physical struggles their profession in Title I schools has caused. They overall feel exhausted, overwhelmed, stressed, and emotionally compromised trying to provide a safe space for their students who have suffered trauma. All participants disclosed suffering in some manner from physical and emotional symptoms due to anxiety and stress that impacted not only their work but also their relationships and families. They consider that the intensity of their work requires a great deal of

themselves to the point of feeling numb, disconnected, isolated, angry, sad, overly involved emotionally, and having difficulty maintaining professional boundaries. For this reason, participants recommend relational and professional practices that teachers and school counselors must embrace to be influential professionals in Title I schools without affecting their mental, social, and emotional health. They advise self-care and self-awareness, family and social support, teamwork, and being prepared to have trauma-informed instructional interventions and responses while understanding generational trauma in Latino communities and resources related to supply for students' academic and emotional needs.

Discussion

The assumption was that these professionals may undergo struggles and professional demands that may put them at risk of vicarious trauma due to the trauma those students and their families have endured. The theory guiding this study was the Transactional Theory of Stress and Coping (Lazarus,1966; Lazarus & Folkman, 1984) and the stress theory (Cohen et al., 1997), which converge the bidirectional nature between individuals and their environment and how the individual's stress reactions depend on their social, psychological, and biological responses to that environment. The study findings in relationship to the empirical and theoretical literature reviewed in Chapter Two corroborate previous research and bring novel contributions to the field, as explained next.

Relationship of Findings to Theoretical Literature

Folkman and Lazarus (1980) posited that how people perceive threats evokes responses to the problem. They distinguished stress into primary and secondary appraisals, where stress is moved from the solely physiological analysis of stimulus and response to a rational conciliation of cognitive and somatic responses (Biggs et al., 2017). However, suppose the stressor is

something beyond the person's control. In that case, the individual tends to indulge in what Folkman and Lazarus (1980) called emotion-focused coping, an ego-defense mechanism to prevent emotional response to a stressor, and where the individuals react with avoidance, denial, distraction, procrastination, or distancing. In a secondary appraisal, the individual places blame where or on whom is responsible for the threat and an outcome issue. Furthermore, stress because of the environmental and internal psychological processes in working with trauma may impact the professionals' view of the world and human nature and undermine their sense of safety (Figley, 1995). Based on a review of the literature, there was a need for a qualitative narrative that helped to explain how teachers and school counselors perceive their work in Title I schools, their reactions to stress, copy mechanisms, and views of their work in Title I schools.

Findings in Relationship with Vicarious Trauma

The literature review shows that any person or professional who hears, sees, or learns about the charge that trauma has on a victim can display PTSD-like symptoms (Jakonski, 2012). Also, stress emotions are a determining factor in adaptive functioning, which may affect the person’s problem-solving, social competence, and bodily health illness, triggering transactions between the person and the environment (Cohen, 1977). Furthermore, vicarious trauma occurs when the helper exposed to traumatic stories suffers from personal distress and extreme feelings that impair their professional judgment and performance (McCann & Pearlman, 1990). The helper may become involved in ill advice, need to rescue, or be worried about the other’s suffering (Friedman, 2012).

The present research has focused on conveying participants' points of view, thoughts, and feelings to understand the emotional impact of listening, seeing, or responding to their students' painful stories and how working under high-stress situations has affected them. The researcher's

ontological assumption has been that each Title I staff member interprets and lives their experience in the school system in particular manners that frame their performance and solve their reality at work and in life. Thus, not all professionals react to stress and others' traumatic stories in the same manner, develop vicarious trauma symptoms, or see their job as stressful as others. However, regarding the question of how Title I staff interpret those situations, this research defends the premise that repetitive exposure may significantly affect teachers and school counselors' well-being in the long run, making them prone to vicarious trauma. Using the stress theory (Cohen, 1977) and applying it to the information obtained from the interviews, one can say that though participants have reacted differently to the stressors working in Title I schools, they have, each in their particular manner, developed adverse social-emotional and physical reactions that have affected their well-being. Several have also developed psychological growth and resiliency depending on their innate strengths, expectations, and supportive connections like family, peers, and work (Buck, 2012).

Research has documented that chronic stress can harm professionals' well-being, making them prone to burnout, compassion fatigue, vicarious trauma, secondary traumatic stress, and disturbance (Figley, 1995). Listening to others' trauma history frequently may cause the helpers to become overwhelmed and have intrusive recollections, negative cognitions, moods, nightmares, and guilt that hinder their well-being and notion of self. McCann and Pearlman (1990) explained that when exposed to the survivors' painful materials, the helper's unique cognitive schemes or beliefs, expectations, and assumptions of self and others can be affected, causing reactions like PTSD symptoms. As the stories in chapter four revealed, participants, on several occasions, have become over-involved and overwhelmed with their students' pain, undergoing chronic stress and intrusive recollections about the material they have heard. They

have felt numb, disconnected, isolated, angry, sad, overly involved emotionally, and having difficulty maintaining professional boundaries. For instance, they shared, “It is heartbreaking for me as a woman to hear those stories so often,” I have burnout only with seven years of work,” “The weight is heavier [referring to work in Title I school],” “It breaks my heart… I know that there are a lot of people who don't understand…” “ I feel broken.” They also mentioned feeling disengaged from work and daily life activities, numb, having problems sleeping, anxiety attacks, excess worrying, detached from family, isolation, lack of energy, emotionally drained, detached from their feelings, and powerless. Comparing what the literature review makes known about PTSD symptoms and vicarious trauma with the participants’ revealed symptoms. One could conclude that professionals in Title I schools are at high risk of suffering vicarious trauma.

According to the literature review, individuals working with trauma victims may feel vulnerable because they may absorb the victims' suffering (Figley, 1995). The participants in this research have faced challenges in supporting students from complicated social and emotional situations that are "at humanity's lowest points," as Ray, one of the interviewees, disclosed. For instance, Kay declared feeling like collapsing daily and emotionally and physically exhausted. Rose also disclosed how hearing a student's traumatic sexual abuse details affected her personal life to the point she was reviving those details when she was having intimacy with her husband. She was avoiding others and felt numb, having to look for mental health support and taking an extended break from her job. Anny and Lucia developed physical symptoms that their practitioners explained may have been due to anxiety and stress.

According to the American Psychiatric Association’s (2022) *Diagnostic and Statistical Manual of Mental Disorders* (*DSM-5-TR*), people at risk of PTSD have been exposed to a traumatic or stressful event and persistently exhibit one or more symptoms for at least a month

after the exposure. Those symptoms are contained into four clusters: (A) reexperiencing the traumatic event, (B) persistent avoidance, (C) numbing, negative cognition and mood, and (D) alteration in arousal and reactivity. Cluster A includes criterion A4, which lectures how first responders or other professionals with repeated extreme exposure to the details of traumatic events such as child physical and sexual abuse, domestic violence, and other traumatic stories can be considered to be potentially trauma-exposed (Friedman, 2012). The DSM-5-TR (APA, 2022) also explains dissociation is associated with overwhelming experiences that disrupt the standard integration of consciousness, memory, identity, perceptions, and body representation. In this regard, one of the participants affirmed that they would "turn off the feeling part of my brain till the numbness wore off." And a few more declared detaching from their feelings and compartmentalizing emotions to avoid the pain.

As confirmed by the participants, Title I schools serve prevalent poverty areas with challenging situations and high-stress environments (Brown, 2017). The interviewees were from elementary Title I schools with a prominent school population from the Northern Triangle. According to the literature, students from the Northern Triangle are often prone to trauma (Perreira & Ornelas, 2013). Statistics from Physicians for Human Rights [PHR] (2019) have shown that some of these children suffer multi-dimensional trauma and are subject to multiple adverse traumatic events that include fleeing death threats, gang recruitment, domestic violence, poverty, extortion, abandonment, sexual abuse, rape, seeing a family member or others being killed, drowning in the river when trying to cross the border between Mexico and the U.S. or being locked up without food for long days in inhumane situations, among other forms of targeted violence.

Though only one of the participants was diagnosed with PTSD and two with secondary trauma, it is concerning that, analyzing the participants' stories, all of them have experienced at least two symptoms of those included in these clusters. For instance, participants have experienced repeated exposure to aversive details of the students' and families' traumatic events (criteria A); they have observed avoidance of others and work "I feel like collapsing every day, and I do not feel like going to work anymore;" "I felt like going to jail every day" (criteria C), persistent and negative beliefs about themselves for not being able to do enough for their students, insistent negative emotional states that include anger, guilt, fear, feeling detachment of estrangement from others, diminished interest in other activities that used to be significant for them (criteria D); irritable and angry behaviors, problems with concentration, sleep disturbance (Criteria E); Feeling detached from their feelings, compartmentalizing emotions (Depersonalization); all those are symptoms not present for just a day, but on several occasions.

Though the present research does not look for any diagnosis or label those experiences, she wants to raise the concern about the risk of the staff's harmful changes in the view of themselves, others, and the world due to secondary exposure to their students' trauma may have in their mental health. McCann and Pearlman (1990) developed vicarious trauma to present the therapist's long-term and unique strains when processing their clients' graphic and painful traumatic experiences. Teachers and school counselors are not therapists, but as they strive to address the needs of students who have suffered trauma, it was confirmed through the interviews that they are often the first line in supporting those students. Teachers and school counselors see their work, responses, and self-mental health compromised due to the risk of internalizing students' emotions associated with traumatic events. This situation is aggravated by the extra stressors that lack of support from the system and administration add to their job.

Countertransference, secondary traumatic stress, and burnout, the three main concepts that have been used to explain the phenomenological effect and cost of empathy and the ability to project oneself into the experience of others, have been insufficient when trying to explain the impact of trauma in those that work in the helping professions (McCann & Pearlman, 1990). The researcher believes that they are also not enough to understand the particular toll these experiences have on the staff working in Title I schools.

Relationships of Findings to Empirical Literature

The last topic focused on the findings on the relationship between vicarious trauma for teachers and school counselors in Title I schools working with students from the Northern Triangle. However, other topics were unveiled in this research and expressed in themes one to three.

Fulfillment

Theme one showed how teachers and school counselors want to be advocates and enact change through their jobs in Title I schools. Participants discussed how their work has become a mission that delivers a sense of satisfaction through enhancing undocumented students' educational access while standing against social discrimination and prejudice barriers. They said, “A choice to be in Title I as a feeling to be at home away from home,” “My students are my kids forever. When they are in my classroom, one day, 20 days, 100 days, they are mine forever,” “ I feel a passion for bridging immigrant and American cultures,” I am giving back as a visa teacher, helping families during transitional periods," “I can help these families during this transitional period in a way that me and my family, we really didn't get that help,” “I want to give back to my community by teaching in a school that needs teachers.” They feel their job allows them to make a difference to those children. However, this has not been an easy endeavor as it has considerable

empathy and stress implications for them. An extra concern is that though educational programs focus on training these professionals in the skills of teaching, listening, and responding to their students' academic and emotional needs (in the case of the school counselors), they do not prepare them for the impact that listening to their students' possible trauma may have on them and the importance of caring for themselves (Jankoski, 2012).

Need for Strategies in Dealing with Students' Behaviors

Still, the literature also suggests that exposure to violence changes how children learn and perceive themselves and others (Craig, 2008). Moreover, immigrating as a child has been linked with increased anxiety, depression, and emotional and behavioral problems (Patel et al., 2016); undocumented students may have a higher risk for mental health problems and lower service utilization than other populations (Cha et al., 2019), and parents may not perceive adverse events as traumatic for their children, negating necessary treatment and understanding of their behaviors when struggling in school and their new lives in the U.S. (Cohen et al., 2012). These children must live with those adverse experiences and be good at school. Still, they often cannot, as the data has demonstrated when finding a high relationship between ACEs and the risk of poor school attendance, behavioral issues, and failure to meet grade-level standards in mathematics, reading, or writing at the elementary level (Craig, 2008). Participants related how those students struggle to learn, concentrate, behave, and connect in school. For instance, participants disclosed, “It makes you feel unsafe and unknowing what the next day will bring [referring to behaviors in the classroom],” “I used to do fun activities with students when I started working, I used to have a high energy level. Not anymore,” “I feel like the kids don't appreciate it and therefore they don't deserve it. Though, I know it is not their fault. It's just me being beat down over time.” They have had to adapt to different manners of students' learning types, gaps,

emotional, social, and special needs without enough psychological and professional support to help them in that endeavor.

Still, this undertaking becomes even more complicated when their students present high traumatic stress reactions and reenactment. As the literature review explains, developmental trauma and biological responses are interconnected and may block the integrative brain and the executive functioning where the individuals perceive themselves in constant danger and are under continuous survivor mode where they cannot consistently monitor their thoughts, feelings, actions, and behaviors (Steele & Malchiodi, 2012). Participants revealed that the students' challenging behaviors caused classroom disruptions that hindered their and others' productive learning environment. Regarding how trauma may impact students' school performance, participants discussed how, more often, they see a growing immigrant population of students with impressive academic and social-emotional gaps and significant vulnerability due to past trauma. Still, they struggle to deal with the continuous complex trauma cases they see due to a lack of academic preparation, sufficient trauma-informed training, and resources.

An Additional Stressor: COVID-19

An additional stressor that has affected children, causing profound stressful effects, was the COVID-19 pandemic. As research has examined, the pandemic has exacerbated the stress levels of individuals and families. Children and adolescents' mental health levels of anxiety, depression, loneliness, stress, and feelings of loneliness have been the most observed symptoms, some with deep marks of child abuse and neglect (Theberath et al., 2022). In this regard and aligning with what Limberg et al. (2022) acknowledged, participants have observed how, after several months of isolation, students have returned with increased difficulty regulating their emotions, limited social connectedness, lower self-esteem, poorer academic performance, and

behavioral and mental health problems; “Since the pandemic, kids do not have an attention span any longer,” “Not only have to be a teacher but a community advocator [referring to parents leaving the children’ education to electronic devices,” “I feel more like a social worker. I feel more like a school community liaison. I feel more like I am the person who meets those basic needs.” “I feel all the time educating the parents when educating their children.”

Implications

The barriers and challenges described by the participants working in elementary Title I schools with majority school populations from the Northern Triangle bring a novel contribution to the field about the short- and long-term effects that vicarious trauma can cause on school counselors and teachers. Little research has focused on their struggles, and vicarious trauma has not been discussed enough for these professionals. Vicarious trauma causes detrimental damage to one's soul. Teachers and school counselors are responsible for acting as their students' and families' significant support, but who supports them? Vicarious trauma is a reality, and this guild must become aware of the hazards of helping others; school staff must be mindful of the importance of airline passenger safety golden rule, "securing their own mask first before assisting others;" self-care is imperative since there is potential to harm students when teachers are overwhelmed, stressed, or emotionally exhausted. A school professional who feels burned-out, overwhelmed, and emotionally exhausted can not serve their students as they deserve and need; instead, they can cause more damage than help. Indeed, the students' well-being depends on adults' well-being, and vicarious trauma is a plague that hinders a thriving school community. Thus, teachers' and school staff's self-care is essential.

All participants presented with one or another manner of personal distress and several symptoms aligned with PTSD and vicarious trauma. This concern hinders these professionals'

capacity to provide effective trauma-informed interventions in the classroom and jeopardizes their mental and physical health. It is crucial for the well-being of these professionals and students that they, the school system, and society generally know this is occurring and look for help and prevention. Also, school staff affected by vicarious trauma can report low morale or manifest in the form of absenteeism, negative attitudes, irritable behavior, and medical disturbances that can affect not only themselves and their lives but also the education field. Research shows that students are most likely to trust and forge relationships with counselors and teachers that positively impact their lives (Hiskey et al., 2018). Thus, often, students seek help from their teachers and counselors about painful situations in their lives, but how can they respond if they are burnt out or desensitized? No response or an adverse reaction from the professional could cause more harm to those students.

Empirical Implications

In addition to the emotional and physical impact that vicarious trauma has on the school staff, there are other significant implications for the education system. One is the failure to find professionals wanting to join or continue working in education. Schools nationwide report a shortage of teachers, special educators, and school counselors, with a nine percent decline at the onset of the pandemic, and have remained below pre-pandemic levels more than two years later (Bleiberg & Kraft, 2023). Thus, the U.S. education system is fighting to recruit and retain K -12 employees. Suppose teachers and school counselors do not feel supported and feel their mental health is detrimental. In that case, finding more professionals for the education field will continue to be a crisis.

One of the themes that participants were firm about was the need for more support from the school administration and the system. They considered that administrators and supervisors

must focus on protecting them so their job continues to be a mission and a source of satisfaction, not a place where they feel at risk. This also aligns with the need to hire more trauma-informed prepared people to work in these schools; thus, they are not as much at risk for ignoring symptoms of trauma and how to deal with it. In this regard, Mike recommended hiring teachers who are invested in supporting students regardless of their challenges and building solid work teams that support Title I schools' needs.

This research has unveiled the need for intentional and comprehensive prevention and interventions that are systematic and accumulative, not just day coaching. Training must be mindful, and strategies must align with each school's needs. Administrators in Title I schools must understand trauma-informed interventions and develop programs that align with that mindset in their schools. It was evident throughout the study with participants that educators and school counselors must have more specific support in Title I schools than the one provided in none-Title I schools because of the particularities of their work with the school community. At the personal level, they must establish healthy boundaries and balance life to avoid secondary and vicarious trauma (Levers, 2012). Furthermore, repeated stress and exposure over time to traumatic material can become overwhelming, hindering professionals' sense of power and hope (Sanderson, 2013). They must care for their physical, emotional, cognitive, social, and spiritual well-being, as compassion fatigue is typical among these school professionals, causing emotional pain and a lack of optimism when it becomes chronic (Levkovich & Ricon, 2020). These professionals strive to support their learners and their challenging social and emotional problems, barriers with attendance and on-time arrival, academic and social engagement, and general academic performance. This striving can come with a risk of misinterpreting statements of not feeling equipped for the job and blaming themselves for not doing enough. Many teachers may

change schools or not work more in the school system because of negative beliefs and perceptions.

The support teachers in Title I schools feel from the system influences how teachers feel under their occupational stressors. Participants agree with research that explains how these professionals often struggle with deficient leadership support, extra duties, and high demands in their work, which are interrelated with their feelings about their jobs and students (Solomon, 2017). The school staff must feel encouraged to ask for help and receive support that responds to those needs. Participants also disclosed concerns about how COVID-19 has been a game changer in their stress and frustration with the students and system responses in education. There is a need for school programs with a trauma-informed framework that addresses students' unmet mental health and behavioral needs, especially after COVID-19, which has disproportionately affected the educational attainment of immigrants and racial minorities (Delgado et al., 2021).

Though participants described all the mental health struggles that they have endured through their jobs in Title I schools, only one of them expressed the idea of leaving the school system. They mentioned mental health as something that they are just noticing may be happening to them, as this is a topic that is not mentioned in schools. These statements align with the belief that vicarious trauma goes unnoticed by school staff. Their recommendations, for instance, focused on advocating for a sense of community, compassion, patience, passion, and the need to support the less privileged, a supportive school team, consistent trauma responses, understanding in addressing generational trauma in Latino communities, and administrative support. These resources support the student's academic and emotional needs and cultural identity. Still, their mental health does not seem to be their most pressing priority regarding the phenomena, but feeling unprepared to serve the students as needed.

Christian Worldview Implications

The work in education is an art, a mission, and a calling vocation that is insufficiently compensated economically. However, it gives the most rewarding satisfaction when it achieves the goal designed for its purpose, and the teacher can see the results in their students. Society rarely recognizes enough of all the hard work in place to put the miracle of learning on the scene. In this manner, the researcher believes that the art of teaching and school counseling must come from the heart to transform and give the real sense of helping others comprehend concepts and gain new knowledge. Following what the Apostle Paul taught, "…But set an example for the believers in speech, in conduct, in love, in faith and in purity" (*New American Standard Version Bible,* 1971/1995, Timothy 4:12), the researcher chains the participants' worldview regarding how their work in Title I schools is a mission and an opportunity to support the less privileged.

Staff in the school system certainly carry significant responsibilities as professionals and spiritual human beings in integrating their vocations with their Christian worldviews for those following the Lord's mandates. Individuals' vocations are the perfect opportunity to use their God-giving talents and gifts. As the Bible teaches, "I will raise up shepherds over them, and they will shepherd them. My flock[a] will no longer be afraid or terrified, and none will be missing, declares the Lord." (*New American Standard Version Bible,* 1971/1995, Jeremiah 23:4). We are shepherds that guide God's herds towards a better, meaningful and vocational life, humanizing learning to make it fast, easy, and more effective.

Most teachers and school counselors will encounter during their practice at least one student who has experienced traumatic events that have been, at times, severe and prolonged. They are often in a critical position to identify and support children who require mental health services because of the array of behavioral and academic problems that traumatized students may

display. Following what God sees in caring for His children and understanding their suffering, the school staff's mission is to help those children heal, providing empathy and safety, helping them feel connected and loved, while as professionals, being physically and emotionally available.

However, it also includes believing that caring for oneself matters. Luke 10:27 proclaims, "Love your neighbor as yourself" (*New American Standard Version Bible,* 1971/1995), implying care for oneself. Schools must build on the foundational principle that their staff already cares for themselves and that the system supports them. Helping others heal implies recognizing the potentially harmful reactions and responses that the work of help may cause in the person (Thomas & Sosin, 2011); school professionals as helpers must love themselves with the abundance they love their students, recognize their weaknesses, take ownership of their lives and problems, and create balance while monitoring themselves.

Delimitations and Limitations

Several limitations and delimitations are relevant to the present research in its attempt to show the phenomenal significance of the experience of teachers and school counselors and their work with students from the Northern Triangle in Title I schools. Limitations would refer to the factors that were out of the researcher's control and may have affected the results' validity. Delimitations will refer to the intentional choices that the researcher made to limit the study's boundaries and focus on the scope of the research questions.

Delimitations

The purpose of this study was to describe the experiences of teachers and school counselors in elementary schools and not other grade levels because elementary school staff typically stay with the same group of students during the day and the school year in contrast with

middle and high school teachers who meet different students transitioning during the day. This may mean a more profound relationship with those students. However, all Title I schools at all levels have their own demands, and there is a need for more research that focuses on their experiences.

One delimitation is that phenomenology was used versus quantitative research as it wanted to focus on individuals' viewpoints and observations to better comprehend the phenomenon (Heppner et al., 2016), as well as participants' worldviews and actions. Phenomenology research allowed the researcher to explain the professional demands that elementary Title I staff members have endured in working with students from the Northern Triangle due to the trauma that these students may undergo. This choice was appropriate because each participant's experience and story counts and makes sense to show the impact of vicarious trauma on Title I staff. One believes that a quantitative study would provide numeric information but not the enrichment that the narratives offered to understand the extent of vicarious trauma in our schools.

Another boundary was that professionals must have worked in elementary Title I schools in Maryland as a geographical setting because of its large immigrant community and because it is the state where the research resides and works. There was no need to request that participants be 18 or older, as it was implied due to the level of education required to be a teacher or school counselor.

Finally, The present research focused mainly on students from the Northern Triangle in Title I schools because of their specific circumstances, recent immigration in the United States, particularly in some Maryland counties, and the gap the researcher noticed in the literature as research has been dedicated to children and immigrants from Central America, but primarily to

Mexican students (Todd et al., 2018). Bracketing was prevalent for the researcher since she is a school counselor and has experienced the phenomenon discussed, so she constantly monitored any biases because of her own beliefs. In addition, the researcher did not include participants who work in the same setting as hers.

Limitations

The participants felt thankful for someone to hear their struggles and pay attention to the phenomena that have passed unheard by the system and society for a long time. "I feel like I am not alone in feeling validated and uplifted after hearing others share their experiences." They pointed out that the emerging themes reflected what they thought was perfect. However, there have always been limitations to generalization in qualitative research. Transferability refers to the extent to which a study can be transferred to similar situations or others who may wish to apply part of the findings elsewhere (Lincoln & Guba, 2007). The present study wanted to extend the results to the education and school counseling field to avoid vicarious trauma among their members and respond to questions that apply to similar problems and phenomena in the education field. Still, she recognizes generalizability is not a goal of phenomenological inquiry. While the sample size was demographically adequate for this study, there are hundreds of school staff in the state of Maryland whose stories have not been heard.

Recommendations for Future Interventions and Research

Considering the study findings, limitations, and delimitations, the following recommendations and directions for future research hope to expand awareness and knowledge about the risk of vicarious trauma in Title I schools and the education field.

Through the interviews, it was evident the need to advocate for trauma literacy as school staff feels lost in supporting students who have suffered trauma. Staff in Title I schools must

have access to more training in self-efficacy, debriefing, peer consultation, extra time, or pay incentives that align with the particularities of the setting in which they work. The focus group expressed frustration with the lack of incentives and recognition for Title I employees, who often work long hours without adequate support or resources. Then, they suggested extra incentives (money, time or training, etc.) to keep these staff willing to work in these schools as it appears not equitable with the responsibilities and demands in other none-Title I schools. The focus group believes it should be a time for them to decompress. For instance, they could have a half hour during the day to focus on their mental health, not on grades or planning for the next day, but on supporting each other, creating intentional bonding, and working on their well-being. Yoga classes or meditation as part of the workday to help them would be a significant incentive to make a difference with other non-Title I schools. These suggestions uphold the strategies that Newman and Antonelli (2022) recommended to help school staff address mental health struggles due to their work. In sum, they suggest a strong understanding of secondary trauma to minimize the impact of stress and the need for administrators that bring schoolwide strategies to increase staff resilience, create a wellness and community care culture, encourage counseling resources and self-care, and make time and space for collaborative work.

Mental Health Support for students and professionals

There was a sense of urgency to take action and make the teaching and school counseling professions more sustainable, particularly in light of the emotional toll it can take on those professionals in Title I schools. There is a need for the school districts to provide more support for mental health to students and their staff. There is abundant research about mental health care for first responders, therapists, and other professionals who work directly with clients who have suffered trauma. Still, they seem not to be enforced and applied to Title I schools' staff and their

specific needs. Research is needed to determine adequate professional development and training that targets the particular demands of elementary and secondary Title I schools, as the generic training does not seem to comprehend the dynamics of Title I schools compared to non-Title I schools.

Administration and System Support

All participants mentioned that their experiences with the administration made a big difference in how they feel about their work in Title I schools and their ability to provide adequate support to students. Even though they felt overwhelmed by the students' traumatic stories and needs, they recognized that the way the administration understood the community and managed trauma-informed interventions in their school made it more accessible or more difficult to manage the challenges for the staff. It is recommended that further tools be developed to evaluate administrators' educational and trauma-informed leadership skills and the availability to build trusting relationships specific to the demands of Title I schools.

However, one of the trauma symptoms is looking for who to blame (Briere & Scott, 2015). There is the risk of cognitive distortions about how the administration should respond in Title I schools to behaviors, resources, and support for the staff. Each individual has assumptions, beliefs, and perceptions that may affect their appraisal of what one could reasonably have done as a response to events or behaviors. Some teachers expect that the administration can extinguish students' behaviors immediately, not knowing how trauma acts and the process that it takes to see changes in the individual. They may also expect that the administration has a right-away answer for all disciplinary events in the school when administrators may also be dealing with their own vicarious trauma. For this reason, there is a need for research that hears administrators', school systems', and policymakers' perspectives to

develop a coherent response narrative about vicarious trauma phenomena in Title I schools and possible solutions.

Skills and Trauma-informed Preparation Support

Educators and school counselors reported various responses regarding the escalating students' behaviors, the lack of skills in helping those students, and the impact on instruction. These findings are supported by Blodgett and Lanigan (2018), who noted that it is substantial that school personnel train, understand, and respond to students' ACE profiles as an essential strategy for improving at-risk children's academic and behavioral trajectory. Therefore, Title I settings should provide communicated support, such as counseling staff or offering peer teachers, who can help even the most experienced professionals when confronted with disruptive behaviors where they need support (Adame, 2016). This recommendation would help educators feel they have a valued opinion and decision-making power instead of depending solely on the main office to address challenging behaviors.

Preventing Vicarious Trauma

Listening to the voices of twelve participants was valuable in understanding the complexities of mental health struggles and the risk of vicarious trauma in Title I schools. However, additional qualitative studies that include administrators' and other staff members' mental health experiences would greatly benefit understanding the phenomenon. As noticed during the research, teachers and school counselors are often the first line of intervention for children affected by poverty, physical and sexual abuse, neglect, family-school-community violence, and immigration challenges when they do not have any other support outside the school. However, other school staff members may also be a first line of support for students who have survived traumatic events, such as administrators, paraeducators, Parent Community

Coordinators (PCCs), and Pupil Personal Workers (PPWs); they may also be at risk of vicarious trauma. For this reason, more research focusing on all staff members' stories would be significant for an inclusive and more comprehensive appraisal of the phenomena in Tite I schools. There is also a need to know how Northern Triangle students and families in Title I schools perceive trauma and how they see Title I schools' roles in supporting them. The researcher believes it would help better understand the disconnect between school and home. This type of research would help to develop more specific Title I school mental-health interventions directed to increase school staff awareness of the vicarious trauma symptoms, which go beyond burnout and compassion fatigue to harmful changes in the view of themselves, others, and the world due to their work.

Summary

The purpose of this phenomenological study was to describe the experiences of school counselors and teachers working in Title I schools and the possible risks of vicarious trauma due to their work with students who may have suffered traumatic experiences in their homelands or during their immigration to the U.S. Numerous studies have been done in regard of the effect of vicarious trauma, burnout, compassion fatigue, and secondary trauma in first responders and other helping professions. However, to the researcher's knowledge, no research had directly focused on the risk that those emotional challenges may have on teachers and the staff working in Title I schools with the Northern Triangle students.

The research was delimited to the Northern Triangle students because these populations suffer unique forms of trauma before, during, and after their migration journey, making their adaptation to the U.S. school system harder. Research also showed that these students mainly concentrate in Title I schools. In addition, the present study focused on elementary schools in the

state of Maryland as data has shown considerable confluence of immigrant children to Maryland's counties, especially those in sanctuary cities. Those students who have suffered trauma may have more challenging behavior in the classroom and academic gaps, which, aggregated to language barriers and low family involvement, make school counselors' and teachers' work in Title I schools more challenging than in non-Title I schools. Through the literature review, the researcher's experience as a school counselor in Title I, interviews with five counselors and seven teachers, and a focus group, the researcher illustrated these staff's challenges and experiences and how prone they were to vicarious trauma according to shared experiences.

Teachers and school counselors become the first responders to students' and family trauma and basic needs when no other resources are available, creating additional and detrimental stressors in comparison with staff in non-Title I schools. These challenges have passed unnoticed by the system but also by the staff who have "learned to manage" their struggles without proper recognition of the effects that continued stress may have on their physical and mental health.

The present study looked for the immediate need to create awareness about the vicarious trauma in schools phenomenon. The interviews with staff members from eight different Maryland counties revealed four themes that condensed the significant experiences of the participants. Theme one referred to participants' recognition of their work as a mission and a purpose in life to help the most disadvantaged. Theme two focused on the most pressing barriers to Northern Triangle students they have noticed in their work. The third theme emphasized the cultural and educational barriers that add extra stressors in Title I schools. Lastly, theme four unveiled the emotional, physical, and social struggles the participants have gone through because

of their work and the number of barriers disclosed in themes one to three. The focus group participants confirmed and agreed with the themes and provided recommendations for the field included in the recommendations for future practice of this document. This research has been a beautiful journey for the researcher, who is not a stranger to the phenomena as a school counselor in a Title I school for more than ten years. She has witnessed and experienced with concern how the phenomena keep going unnoticed, impacting the education field significantly.

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Appendix A

Social Media Recruitment

ATTENTION FACEBOOK FRIENDS: I am conducting research as part of the requirements for a Doctor of Education degree at Liberty University. My study aims to describe the physical, emotional, and psychological strains of school counselors and teachers working in elementary Title I schools. To participate, you must have a bachelor's or master's degree and be either a school counselor or a teacher who has worked for at least one year in an elementary Title I school in any county of Maryland with students from El Salvador, Guatemala, or Nicaragua and be willing to articulate your work experiences. Participants will be asked to participate in a one-on-one, in-person, audio-recorded, semi-structured interview, which should take about one hour to complete. Participants may also be asked to participate in an audio-recorded focus group via Zoom that will take approximately 90 minutes.

If you want to participate and meet the study criteria, please direct message me or email me at [redacted] for more information. Those interested in participating will be given an information sheet explaining the purpose of the study, confidentiality, research methods, and procedures. The information sheet will also mention the voluntary option to participate in a focus group once the interviews are done. The same information will be provided at the time of the interview. There will be two drawings to receive a $60 Amazon gift card at the end of the interviews and an additional drawing at the end of the focus group to compensate for participants' time.

Appendix B

Recruitment Letter/Email

Dear Potential Participant,

As a doctoral candidate at the School of Behavioral Sciences at Liberty University, I am conducting research as part of the requirements for a doctoral degree. The purpose of my study is to describe the physical, emotional, and psychological experiences of school counselors and teachers working in elementary Title I schools. I am writing to invite you to join my study.

Participants must meet the following inclusion criteria: They must have a bachelor's or master's degree and be either school counselors or teachers who have worked for at least one year in an elementary Title I school in any county of Maryland with students from El Salvador, Guatemala, or Honduras and are willing to articulate their work experiences. Participants will be asked to participate in a one-on-one, in-person, audio-recorded semistructured interview. It should take approximately one hour to complete the procedure listed. Participants may also be asked to participate in an audio-recorded focus group via Zoom that will take approximately 90 minutes. Names and other identifying information will be requested for this study, but the information will remain confidential.

To participate, please get in touch with me at 305-439-8307 or at Jsantiesteba@liberty.edu to schedule an interview. If you meet my participant criteria, I will contact you to schedule an interview at a convenient time.

An information sheet explaining the purpose of the study, confidentiality, research methods, and procedures will be provided during the interview.

After you have read the consent form, please complete and return it. Doing so will indicate that you have read the consent information and would like to participate in the study.

Once all the interviews are done, participants will be entered into two raffles at the end of the interviews and an additional drawing at the end of the focus group to receive a $60 Amazon gift card to compensate for their time.

Sincerely,

Janeth Santiesteban
School Counselor and Doctoral Candidate
Phone number ██████, email address: ██████████

Appendix C

Study Information

Title of the Project: A phenomenology study- Vicarious trauma among school counselors and teachers working with students from the Northern Triangle in elementary Title I schools
Principal Investigator: Janeth Santiesteban, Doctor candidate, School of Behavioral Sciences, Liberty University

Invitation to be part of a Research Study

You are invited to participate in a research study. To participate, you must have a bachelor's or master's degree and have worked as a school counselor or teacher for at least one year in an elementary Title I school in any county of Maryland with students from El Salvador, Guatemala, or Honduras and be willing to describe your work experiences. Taking part in this research project is voluntary. Please read this entire form and ask questions before deciding whether to participate in this research.

What is the study about, and why is it being done?

This study aims to describe the experiences of school counselors and teachers working in elementary Title I schools and the possible risks of vicarious trauma due to their work with students who may have suffered traumatic experiences in their homelands or during their immigration to the U.S.

What will happen if you take part in this study?

If you agree to be in this study, I will ask you to do the following:
1. Participate in an in-person audio-recorded interview that will take no more than 1 hour.
2. After the interview, you will receive an invitation with the option to participate in an audio-recorded focus group via Zoom that will meet once for approximately 90 minutes. However, this participation is optional.

How could you or others benefit from this study?

Participants should not expect to receive direct benefits from participating in this study.

Benefits to society include potentially beneficial applications of the research findings, like increased public knowledge on the topic, interventions, and resources that help improve future educational practices. Students will benefit from teachers who are better prepared to support their academic, emotional, and social needs.

What risks might you experience from being in this study?

The expected risks from participating in this study are minimal, which means they are equal to the risks you would encounter in everyday life. The risks involved in this study include the

possibility of psychological stress from being asked to recall and discuss prior trauma. To reduce risk, I will monitor participants, discontinue the interview if needed, provide relaxing techniques, and provide referral information for counseling services.
I am a mandatory reporter. During this study, if I receive information about child abuse, child neglect, elder abuse, or intent to harm the self or others, I must report it to the appropriate authorities.

How will personal information be protected?

- The records of this study will be kept private. Published reports will not include any information that will make it possible to identify a subject. Research records will be stored securely, and only the researcher will have access to the records.
- Confidentiality will be provided by replacing names with pseudonyms.
- Interviews will be conducted in a location where others will not easily overhear the conversation.
- Confidentiality cannot be guaranteed in focus group settings. While discouraged, other focus group members may share what was discussed with people outside the group.
- Data will remain private, with interviews, focus group verbatims, and researcher's notes password-locked. Hard copies will be stored with limited access. After three years, all electronic records and hard copies will be deleted.
- Recordings will be stored on a password-locked computer for three years until participants have reviewed and confirmed the accuracy of the transcripts and then deleted. The researcher and members of her doctoral committee will have access to these recordings. Only audio will be recorded using Otter software for verbatim and transcription purposes.

How will you be compensated for being part of the study?

After the interviews, participants will participate in two $60 Amazon gift card drawings to compensate for their time. There will be an extra drawing of a $60 Amazon card for those who volunteered to participate in the focus group. Each participant will have the chance to win up to one gift card after the interviews and one gift card after the focus group.

Is study participation voluntary?

Participation in this study is voluntary. Your participation will not affect your current or future relations with Liberty University. If you decide to participate, you are free not to answer any questions or withdraw at any time without affecting those relationships.

What should you do if you decide to withdraw from the study?

If you choose to withdraw from the study, don't hesitate to contact the researcher using the email address/phone number in the next paragraph. Should you decide to withdraw, data collected from you apart from focus group data will be destroyed immediately and will not be included in this study. Focus group data will not be destroyed, but your contributions to the focus group will not be included in the study if you choose to withdraw.

Whom do you contact if you have questions or concerns about the study?

The researcher conducting this study is Janeth Santiesteban. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact her at [redacted] or email me at [redacted]. You may also contact the researcher's faculty sponsor, Dr. Weuste, at [redacted]

Whom do you contact if you have questions about your rights as a research participant?

You are encouraged to contact the IRB if you have any questions or concerns regarding this study and want to talk to someone other than the researcher. Liberty University's IRB physical address is Institutional Review Board, 1971 University Blvd., Green Hall Ste. 2845, Lynchburg, VA, 24515; phone number is 434-592-5530, and email address is irb@liberty.edu.

Disclaimer: The Institutional Review Board (IRB) ensures that human subjects research will be conducted ethically as defined and required by federal regulations. The topics covered, and viewpoints expressed or alluded to by student and faculty researchers are those of the researchers and do not necessarily reflect the official policies or positions of Liberty University.

Appendix D

Invitation to a Focus Group for Interview Participants

Thanks for being willing to participate in this research through an interview; your participation is significant in supporting future educational practices.

Once all the face-to-face interviews are completed and meaning units from participants' data are grouped into themes, the researcher will moderate a focus group with participants who want to join this group. The purpose of this group is to share the significant discoveries and gain a more nuanced understanding of the themes resulting from the interviews and additional perspectives participants may suggest for data completeness.

The focus group will meet via Zoom platform for approximately 90 minutes. Only audio will be recorded using Otter software for verbatim and transcription purposes. Participants will use pseudonyms; no interview details will be shared, only the main themes to preserve anonymity and confidentiality. Confidentiality about what is shared in the group will be highly encouraged but cannot be guaranteed. At the end of the focus group, participants will participate in a $60 Amazon gift card drawing to compensate for their time.

If you would like to participate in this group, please send me a confirmation email to ____ by (date) ________. After this date, the researcher will email you the date and link for the group meeting.

Appendix E

Qualitative Open-Ended Semi-Structured Interview Questions

Interview Part One: Life History

1. Please introduce yourself to me as if we had just met one another.
2. Tell me about your background.
3. Briefly describe what it took you to become a teacher or school counselor at a Title I school.
4. What is or was your function when working in an elementary Title I school?

Interview Part Two: Lived Experience in Title I Schools

5. Please describe what it is/was like to be in your role in a Title I school.
6. Describe any adverse and positive experiences that have impacted your work with the school community in elementary Title I school.
7. Describe interventions or skills you think you had to provide working with students from the Northern Triangle.

Interview Part Three: Participants' Reflections on The Meaning of Their Experience

8. After listening to students ' stories, how would you describe your feelings and reactions?
9. How might students' traumatic stories and behaviors have contributed to feeling overwhelmed or experiencing stress with your work?
10. What systems are in place to support your emotional state if you are stressed about your students?

Appendix F

Mental Health Provider License Information

Removed to comply with copyright.

Appendix G

Mental Health Provider Trauma-Focused Cognitive Behavioral Therapy Certification

Removed to comply with copyright.

Appendix H

Mental Health Resources in Maryland

The mental health resources on this list are neither sponsored nor endorsed by the Board of Education of Montgomery County, the superintendent, or this school. This list has been compiled as a service to families to provide names of available mental health resources.

Flourish Counseling and Wellness and Center
913 Olney Sandy Spring Road
Sandy Spring, MD 20860
(301) 570-4050
https://flourishcounselingandwellness.com/

Quince Orchard Psychotherapy
60 Market Street | Suite 213 | Gaithersburg, MD 20878
Tel: 240-750-6467 | Fax: 240-702-0262
https://quinceorchardpsychotherapy.com/

Rebecca Resnik and Associates Psychological Care
11510 Old Georgetown Road, Unit F, Rockville, Maryland 20852
6125 Executive Blvd, North Bethesda, Maryland 20852
P: 301.581.1120 x 116
https://www.resnikpsychology.com/

Advanced Behavioral Health
16220 Frederick Road, Suite 310
Gaithersburg, MD 20877
(240) 621-0836
https://www.abhmaryland.com/our-services.html#counseling

Lauren K. Lambie, M.S., L.C.P.C.
Pegasus Therapy L.L.C.
Services: Individual, group, and family therapy; divorce and family mediation.
(301)740-8332
Gaithersburg, MD
www.pegasuspsychotherapy.com

Dr. F. Andre Leyva
921 Russell Ave. Gaithersburg, Md. 20879
Gaithersburg, MD 301-943-1027
http://www.drleyvaphd.com/
Stephanie Natter – Intake Coordinator
Expressive Therapy Center of Montgomery County
Rockville, MD, (301) 869-1017
www.expressivetherapycenter.com

Betsy Carmichael, LCSW-C
Alvord Baker & Associates
Rockville, MD 20852
Phone: 301.593.6554
http://www.alvordbaker.com

Jewish Social Service Agency. Services: Individual, couple, group, and family therapy; educational, psychological, and psychiatric testing; workshops; support groups; social skills groups; and ADHD Clinic.
Gaithersburg, (301) 990-6880; Rockville, (301) 881-3700
www.jssa.org

Francine Urgensen
Family Services Agency
Gaithersburg, (301) 840-3200
www.familyservicesagency.org

GUIDE Youth Services
(240) 683-6580
Gaithersburg

Behavioral Health Partners of Frederick, Inc.
219 W. Patrick Street, Suite A
Frederick, MD 21701
(301) 662-3223
Accepts Medicaid

Sheppard Pratt Outpatient:
Phone: 301-840-3200
https://www.sheppardpratt.org/locations-directions/details/outpatient-mental-health-center-gaithersburg/

Aspire Counseling at Sheppard Pratt
Phone: 301-978-9750
https://www.sheppardpratt.org/care-finder/aspire-counseling-at-sheppard-pratt/
Loriann Oberlin, MS, LCPC
Services: Counseling services for children, adolescents, adults, family, and couples; Separation and divorce support and mediation; Support groups for children, family, and parents – social skills, anger management, family change, etc.
352 Main Street, Suite 200 – Kentlands – Gaithersburg, MD
(301) 461-8528
www.loriannoberlin.com

Behavioral Diagnostics
Alorin Harris, LCSW-C
Services: Assessment, treatment planning, and referrals, including written evaluation.
18502 Office Park Drive – Montgomery Village – Gaithersburg, MD
(301) 417-9782
www.behavioraldiagnostics.com

William Stixrud & Associates
8720 Georgia Avenue, Suite 300, Silver Spring, MD 20910, Phone: (301) 565-0534, ext. 264
Services: Diagnostic Testing, Neuropsychological Evaluation, Academic Training, Child & Family Therapy.

Kathleen Nadeau, Ph.D.
Director, Chesapeake Psychological Services of Maryland
1001 Spring Street, Suite 206, Silver Spring, MD, Phone: (301) 562-8448
Services: Psycho-Educational Testing, ADD/LD Counseling & Psychotherapy, Career oriented counseling for ADD/LD

Ruth Spodak, Ph.D. Spodak & Associates
6155 Executive Boulevard, Rockville, MD 20852
Phone: (301) 770-7507, Fax: (301) 770-3576
Services: Diagnostic Testing, Neuropsychological Evaluations

Dr. Myra Burgee, Ph.D.
932 Hungerford Drive, Suite 5B, Rockville, MD 20850, Phone: (301) 933-2374
Services: Full psychoeducational evaluations, Study Skills, Counseling, Career Planning, and Assessment

Dr. Paula Elitov, Ph.D.
6262 Montrose Road, Rockville, MD 20852, Phone (301) 738-7990
Services: Full psychoeducational evaluations for children ages 3-18

Appendix I

IRB Approval

LIBERTY UNIVERSITY
INSTITUTIONAL REVIEW BOARD

November 7, 2023

Janeth Santiesteban
Michael Weuste

Re: IRB Exemption - IRB-FY23-24-300 A PHENOMENOLOGY STUDY- VICARIOUS TRAUMA AMONG SCHOOL COUNSELORS AND TEACHERS WORKING WITH STUDENTS FROM THE NORTHERN TRIANGLE IN ELEMENTARY TITLE I SCHOOLS

Dear Janeth Santiesteban, Michael Weuste,

The Liberty University Institutional Review Board (IRB) has reviewed your application in accordance with the Office for Human Research Protections (OHRP) and Food and Drug Administration (FDA) regulations and finds your study to be exempt from further IRB review. This means you may begin your research with the data safeguarding methods mentioned in your approved application, and no further IRB oversight is required.

Your study falls under the following exemption category, which identifies specific situations in which human participants research is exempt from the policy set forth in 45 CFR 46:104(d):

Category 2.(iii). Research that only includes interactions involving educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior (including visual or auditory recording) if at least one of the following criteria is met:
The information obtained is recorded by the investigator in such a manner that the identity of the human subjects can readily be ascertained, directly or through identifiers linked to the subjects, and an IRB conducts a limited IRB review to make the determination required by §46.111(a)(7).

For a PDF of your exemption letter, click on your study number in the My Studies card on your Cayuse dashboard. Next, click the Submissions bar beside the Study Details bar on the Study details page. Finally, click Initial under Submission Type and choose the Letters tab toward the bottom of the Submission Details page. Your information sheet and final versions of your study documents can also be found on the same page under the Attachments tab.

Please note that this exemption only applies to your current research application, and any modifications to your protocol must be reported to the Liberty University IRB for verification of continued exemption status. You may report these changes by completing a modification submission through your Cayuse IRB account.

If you have any questions about this exemption or need assistance in determining whether possible modifications to your protocol would change your exemption status, please email us at irb@liberty.edu.

Sincerely,
G. Michele Baker, PhD, CIP
Administrative Chair
Research Ethics Office