

From Perspective to Practice: Investigating Elementary Educators' Insights into Secondary
Traumatic Stress in the Classroom

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Department of Community Care and Counseling, Liberty University

A Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

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Abstract

The purpose of this phenomenological study was to understand the central phenomenon of elementary educators recognizing their lived experiences of secondary traumatic stress and investigate their self-care techniques. The theories guiding this study were secondary traumatic stress theory and the constructivist self-development theory. Research questions investigated in this study included how elementary educators make meaning of secondary traumatic stress (STS) caused by interactions involving students with traumatic lived experiences. How do educators experiencing secondary traumatic stress perceive the training available to them to mitigate the effects of STS? How do educators experience and interpret their use of self-care in managing encounters with students who have experienced trauma? The literature review examined vicarious trauma and compassion fatigue along with teacher burnout and the school system's role as a mental health facilitator. A phenomenological research design was utilized for this investigation. The goal of this type of approach was to identify the core of each participant's experiences and perceptions of an event and to provide meaning by identifying patterns and discrepancies between the examples (Glesne, 2016).

This study found nine themes from the data analysis that described classroom teachers' lived experiences of secondary trauma, their perceptions of professional development, and self-care techniques they employed to lessen the effects. The purpose of this study was to raise awareness about the impact of secondary trauma on classroom teachers and to share their experiences. Secondary trauma has the potential for negative consequences for both teachers and their students and is a topic that warrants further research.

Keywords: trauma, vicarious trauma, secondary traumatic stress, self-care

Dedication

This dissertation is dedicated to my family who supported me through the long hours of researching, reading, and writing. I am thankful for my husband, Steve Phillips, who encouraged me to continue my education and find my path. I wanted to provide the example to my son, Lincoln Bailey, that all things are possible with hard work and dedication and that he can follow his dreams wherever they may take him.

I also dedicated this study to all the classroom teachers who have spent countless hours loving, nurturing, and teaching all the students who are at times difficult to love, nurture and teach. They need you more than we know, and I am thankful for the work that you do every day.

Acknowledgments

I want to thank God for never leaving me and giving me the strength to overcome all the adversities that I have faced in my life and to be at this point in my life and career.

I would like to thank my work team (TAB team) that have supported me throughout this entire process and inspired the writing of this research.

Lastly, I would like to express my gratitude to those who dedicated extensive time to thoroughly reviewing my work and offered valuable feedback to refine this manuscript, Dr. Catherine Packer-Williams (Committee Chair) and Dr. Dwight Rice Ph.D. (Committee Member). I am grateful to my committee for their invaluable assistance, guidance, and support, without which I would have not been able to successfully complete this study.

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List of Abbreviations

CSDT - Constructivist Self-Development Theory

CF-Compassion Fatigue

CFR-Compassion Fatigue Resilience

CTD-Chronic Traumatic Stress Disorder

CTRT-Child-Teacher Relationship Training

EBS - Empathy-Based Stress

FPD- Foundational Professional Development

NCANDS- National Child Abuse and Neglect Data System

PTSD- Posttraumatic Stress Disorder

SMH-School Mental Health Systems

STS- Secondary Traumatic Stress

TAB-Trauma and Behavior

VT-Vicarious Trauma

Chapter One: Introduction

Overview

Secondary Traumatic Stress (STS) is defined as the behaviors and emotions resulting from knowledge about a traumatic event experienced by someone close (Middleton et al., 2022). This stress arises due to the desire or act of aiding that traumatized person. Charles Figley initially characterized this phenomenon in 1983, calling it "secondary catastrophic stress reactions" (Figley, 2013, p.1). It is viewed as an empathetic response caregivers and family members have when their loved one undergoes trauma, making them 'victims' too. While most research on STS has traditionally focused on helping professionals like social workers or psychologists, there is increasing recognition that educators in under-resourced communities who work with traumatized students may also be at risk of developing STS (Hydon et al., 2015; Kidger et al., 2016; Middleton et al., 2022). School staff, particularly teachers, often find themselves providing emotional support for students during crisis situations. This realization has prompted researchers and policymakers to consider the effect this can have on the mental health of said educators and their relationships with pupils (Hydon et al., 2015).

Traumatic stress is a state of loss of control over one's body, characterized by "intense anxiety, helplessness, and loss of control" (Renna et al., 2018, p. 1083). The severity of trauma depends on the extent of the effect, with the most significant factor being if the effect remains unresolved. There are various types of traumas, and those can affect individuals or groups, with groups impacted by acts of violence, natural disasters, or multiple passengers in an accident. A few instances of individual trauma can include domestic violence, abuse, rape, incest, and post-abortion trauma (Maynard et al., 2019). Trauma can develop from childhood experiences and can be transmitted from one generation to another. Without serious intervention, trauma can have

debilitating effects on an individual's well-being, altering habits and outlook on life (Brewin, 2019).

Emotional dysregulation is often a result of untreated childhood trauma, leading to intense emotions that individuals cannot manage effectively (Martins et al., 2019). Emotional dysregulation traits include sensitivity to emotional stimuli, strong feelings, and slow recovery from emotional arousal. Dealing with overwhelming emotions, struggling to manage impulsive actions, or experiencing explosive anger can present significant challenges. These powerful reactions may affect one's personal relationships and professional life, create obstacles in their academic endeavors, and stall routine activities. Research indicates that adverse conditions during one's early years could contribute to mental health difficulties for nearly 29% of individuals (Xie et al., 2018). Moreover, these harmful effects from childhood adversity may persist over a lifetime and affect the individuals' ability to maintain careers and to function as successful members of society.

Victims may develop new habits to maintain safety and security. Trauma can also impact family and interpersonal relationships, particularly those affected by domestic abuse, making it challenging to maintain good interactions with family members. Additionally, trauma can trigger physical symptoms and diseases (Maynard et al., 2019). This phenomenological study examined the lived experiences of trauma on classroom teachers who have encountered students who have endured trauma. The study also investigated the lived experiences of classroom teachers as they make meaning and record their perspectives on STS, interventions, self-care, and how interacting with traumatized children shapes their job as educators.

Background

According to Swathi and Reddy (2016), public service is a significant factor in teachers' decision to become teachers, and the desire to see their students succeed is gratifying. Teachers are responsible for ensuring that every child has access to education, regardless of their financial background, academic proficiency, or parental participation. However, the increasing number of students entering schools with trauma is a serious problem for teachers, as it presents a social and public health concern. Over 66% of young individuals have encountered a minimum of one distressing episode, such as addictions, domestic violence, divorce, physical, sexual, or emotional abuse, and parental separation by the age of 16 (Substance Abuse and Mental Health Services Administration [SAMHSA], 2023).

Childhood trauma has long-lasting adverse effects on the students' experiences in the classroom, including behavioral, cognitive, and emotional functioning (Chen et al., 2020). Adverse Childhood Experiences (ACEs), such as physical, sexual, or emotional abuse, neglect, family violence exposure, and other forms of trauma, can lead to delayed academic progression and affect the social, behavioral, and emotional development of students (Perfect et al., 2016). These adverse experiences may include living with an incarcerated caregiver or a parent who abuses substances; it could also entail experiencing parental separation or divorce. All these factors combined result in impaired functioning at school for children exposed to ACEs (Blodgett & Lanigan, 2018). Elementary-age students are more vulnerable to experiencing exposure to traumatic events than teens or adults. The resulting conditions manifest more negatively for this particular demographic compared with older students experiencing similar circumstances (De Young & Landolt, 2018).

Young children who experienced traumatic events including maltreatment or neglect can be susceptible to aggression and other behavioral issues. Chen et al. (2021) stated that aggression is a prevalent and severe issue among elementary-age students. Students who have endured or witnessed trauma are often on high alert in their classroom setting and unable to regulate their emotions. This can lead to emotional outbursts in the classroom and aggression towards their peers and classroom teachers (Perfect et al., 2016).

Executive functioning affects cognitive flexibility, including skills such as cognitive flexibility, memory, self-control, and attention (Rogerson et al., 2023). According to Blodgett and Lanigan (2018), experiences of trauma in young children may negatively impact their executive function (EF), lowering their EF score and thus lowering their cognitive abilities. Children who experience traumatic events show signs of decreased cognitive functioning.

Childhood trauma can have long-lasting effects. Substance Abuse and Mental Health Services Administration (2023) reported that elementary-age survivors of trauma may encounter various adversities that will affect their classroom performances. Students may struggle with learning results, have reduced grades, and have lower classroom achievements. Trauma victims may have an increase in suspensions and expulsions and become more involved with the juvenile justice and child welfare system. Chronic health issues resulting in more absences from school are also side effects for students who have endured traumas (Blodgett & Lanigan, 2018).

Teachers often receive minimal formal training or professional development on the effects of trauma on students and how to help traumatized students achieve better educational achievements (Oberg et al., 2023). This can lead to emotional discomfort and secondary traumatic stress disorder (STS). Elementary school teachers for children in kindergarten through

fifth grade spend much of their time with their students, and they may experience secondary traumatic stress if they learn of their students' frequent exposure to abuse, neglect, rejection, and violence in the community (Martins et al., 2019).

Educators tasked with helping others may eventually become overwhelmed by this field's psychological and physical strain (Oberg et al., 2023; Ryan et al., 2018). Teachers who work to educate students with complex or poor coping mechanisms as a consequence of trauma may experience irritation, tiredness, or burnout (Clark et al., 2020).

Historical

Each year, traumatic incidents are experienced by millions of children and teenagers across the United States (Greeson et al., 2014). While certain events, like natural catastrophes, only happen once, other events, like abuse and domestic violence, may happen more than once in a child's life. Even though the trauma may occur only once in the child's life, there can be long-lasting effects (Messman-Moore & Bhuptani, 2017; Ryan et al., 2018; Vachon et al., 2015).

According to the National Child Abuse and Neglect Data System, there has been an inflation of childhood trauma victims over the last five years (U.S. Department of Health and Human Services, 2016). In 2019, reports of alleged abuse or neglect involving an estimated 7,800,000 children were received by child protective services in the United States. Following an investigation, the child welfare system provided post-investigation services, such as in-home or foster care, to over 1,200,000 children (U.S. Department of Health and Human Services, 2021). There are significant costs to society and to individuals who are linked with child maltreatment; these costs can last into adulthood and include behavioral, social, mental, and physical effects (Messman-Moore & Bhuptani, 2017; Peterson et al., 2018; Ryan et al., 2018; Vachon et al., 2015).

According to Clark et al. (2020), youth with histories of complex trauma are more likely to experience difficulties within the classroom and an inability to make lasting connections with those around them. Wieck et al. (2022) studied pediatric trauma after the covid epidemic. The study revealed a decrease in physical and sexual abuse but an increase in emotional, psychological, and neglectful abuse among children. One effect of the pandemic lockdown was the removal of children from required abuse reporters, such as social workers, educators, and medical professionals. These statistics should be evaluated cautiously. Therefore, the actual rate of misuse during the pandemic may be underreported in contemporary reports (Wieck et al., 2022). Three years after the initial lockdowns, we still do not know much about how this era affects children's health. Physical abuse, emotional abuse, and neglect are not the only traumas affecting students and our young patients after the pandemic (Seitz et al., 2021; Wieck et al., 2022). Psychological distress created during the 2019 lockdown of the pandemic has created traumatic experiences for students that have not been seen during this generational period.

Social

Teacher stress and burnout are increasingly infiltrating today's academic systems. Teachers endure some of the highest intensities of pressure among working professionals (Jennings et al., 2017). The ushering in of COVID-19 has acted like gasoline on a flame, rampantly inflaming these pressures (Kelly, 2020; Rauvola et al., 2019). Burdens placed upon teachers are not the only system placing discomfort for our education system to bear; trauma exposure among students is rising, too. Notably, it extends its collateral into learning circles, affecting student mental health adversely (Steiner & Woo, 2021).

Teachers often form tight bonds with their pupils, therefore witnessing first-hand adversarial experiences from their mentees (Hydon et al., 2015). Educators encountering student

hardship and trauma could give rise to something known as empathy-based stress (EBS). EBS can be explained as a stressful process at work sourced from indirect or secondary exposure to trauma combined with empathetic responses (Nicholson et al., (2018). Such outcomes might include strains linked to occupational health, behavioral tendencies at work, emotional impact associated with the workplace situation, or thought processes emerging from it (Rauvola et al., 2019). This component further escalates teachers' heightened stress levels, intensifying potential burnout.

Theoretical

This research was based upon the Secondary Traumatic Stress Framework and Social Constructivist approach to explore educators' experiences while interacting with students affected by trauma. The aim was to attach significance and understanding to these encounters.

Systems theory uncovered the interaction and mutual effect of various processes over time that permit the existence of a larger entity (Eads, 2023). It was foundational in developing the Secondary Traumatic Stress Framework concept. Originated by Figley in 1982, the STS framework is a harmful consequence emerging from secondary victimization associated with indirect exposure to trauma through the vicarious traumatization process (Figley, 1982; Rauvola et al., 2019). STS is most frequently encountered by professionals dealing with traumatic experiences firsthand or through records (Burnette & Wahl, 2015). The stress level varies from person to person. It can be influenced by factors like direct contact, empathic responses, compartmentalization methods used for managing the induced stress reactions, and prolonged exposure timeframes at work (Kapoulitsas & Corcoran, 2015).

According to Ludick and Figley (2017), proposing a theory requires stipulating its scope, mechanism, and relationships among a predetermined number of variables. The authors offered

the following stipulations for the STS theoretical framework. Secondary Traumatic Stress (STS) is an intricate and often inevitable circumstance experienced while dealing with individuals who have undergone trauma or when studying their experiences (Eads, 2023; Rauvola et al., 2019). This can happen either directly, through discussion with the affected person, indirectly by watching video interviews of them, or even just by reviewing written materials about suffering without viewing any photographs related to it (Figley, 1982; Kapoulitsas & Corcoran, 2015; Ludick & Figley, 2017).

STS occurrence varies for each individual depending on the intensity of exposure to reality, demonstrating distressful states, which may also be called dosage (Burnette & Wahl, 2015; Ludick & Figley, 2017). The framework goes on to stipulate that Secondary Traumatic Stress (STS) increases in situations where workers are required to demonstrate empathy, compartmentalize stressful reactions related to their work exposure, have continuous encounters with evocative materials, or recall past traumatic events (Burnette & Wahl, 2015; Ludick & Figley, 2017.) However, STS decreases when employees experience compassion stress satisfaction that enhances self-worth and purposefulness and receives support from colleagues and the overall institution. Notably, STS levels relate directly to an individual's resilience towards compassion fatigue resilience (CFR) while also being influenced by demands outside of work (Ludick & Figley, 2017).

The theory of social constructivism, which argues that knowledge emerges from our interactions with others and in distinct environments, was also employed as an additional theoretical lens for this investigation (Zhang, 2018). Social constructivism, common in qualitative studies, emphasizes participants' perceptions and interpretations surrounding their circumstances or an under-investigation phenomenon (Creswell & Creswell, 2018).

The social constructivist view focuses on individuals deciphering concepts according to personal meaning interpretation (Andrews et al., 2020). Through semi-structured interviews, conducted patterns within participant reflections shed light upon possible educator engagements when dealing with secondary-trauma situations. Ultimately, continued evidence-based research will enhance the quality of life of students, especially those engaged in teaching adversely affected students (Branson, 2019; Freire & Branco, 2019).

Edwards and Miller (2019) suggested that real-life experiences, including trauma, can shape how people perceive themselves and the world. They develop their understanding through automatic processes influenced by their individual views formed in social interactions at work (Edwards & Miller, 2019; Freire & Branco, 2019). With time, a person's ability to make sense of psychological changes and personal development evolves through events due to societal practices. In essence, one can use experience to acquire new knowledge, which is fundamental for achieving success over the hardships one may face throughout one's journey (Andrews et al., 2020; Branson, 2019).

Situation to Self

I have over 16 years of experience in the public-school educational setting. During this time, I have served in multiple roles, including general education teacher and English language learner teacher. I currently serve as a district-wide behavior support interventionist.

Serving teachers and students in grades K-12, I work for a program entitled Project TAB (trauma and behavior). Project TAB was created by my school district in 2022 to address the behavioral needs of students who have endured trauma. The first student with our TAB program was a nine-year-old girl referred to us by her principal because she could not safely maintain her 2nd grade classroom due to explosive unpredictable behaviors. She was moved to our TAB

classroom with a specially trained teacher and assistant, along with the support of other behavioral specialists and me. Daily, her behaviors continued to become severe, and often, she became a danger to herself and others. As she continued in our TAB classroom, we discovered she was enduring a tremendous amount of abuse and trauma. This child was taken into the custody of the state, and we never saw her again. The journey with this little girl will forever be a part of the entire TAB team. After she left us, our whole team shared how we were affected by the trauma she endured as well as the severity of her behaviors, and we discussed self-care techniques and needed professional development to handle traumatic situations better. This led me to explore how other teachers who work with students regularly make meaning of STS, what training is available for them, what self-care techniques they utilize, and how STS shapes them as classroom educators. According to Steiner and Woo (2021), the prevalence of trauma has continued to rise and creates substantial barriers for classroom teachers with little training to meet the needs of the students.

The goal of this research is to determine whether classroom instructors have ever experienced STS and to learn about the strategies they used to build resilience. I set out to investigate teachers' lived experiences. Gathering classroom instructors' viewpoints and life experiences might develop better solutions for upcoming teachers.

This study comes with various philosophical foundations attached. It rests on the ontological belief that reality is a subjective experience, varying based on each individual's encounters (Creswell & Poth, 2018). The epistemological presumption suggests that knowledge has a degree of subjectivity and demands that researchers establish close ties with participants so they can voice out or share their experiences in their language. Meanwhile, the axiological premise asserts inherent bias brought by values (Creswell & Poth, 2018). As a researcher, I

identified my personal beliefs and put them aside to attentively listen to the individual's accounts of their own experiences. The fundamental framework for this study was positioned within social constructivism. This principle aims at understanding the reality in which these individuals operate and live (Eads, 2023). Research emphasis was placed on how participants perceived their realities based on experience. Social constructivism acknowledged that awareness is derived from an individual's historical background, social contexts, and interactions with others (Branson, 2019; Zhang, 2018). Through this approach, classroom teachers were empowered to narrate experiences through their perspective, including relationships made over time. Additionally, a socially constructive approach provided insight towards forming conclusions from gained knowledge and past interaction (Andrews et al., 2020; Freire & Branco, 2019).

Problem Statement

There is ongoing uncertainty among researchers and school educators about the concept of secondary traumatic stress and intervention strategies like self-care (Arens & Morin, 2016). The challenge of this analysis revolved around the lack of qualitative investigation into what it is like for classroom teachers navigating secondary traumatic stress (STS).

Seeking to unravel the intricate threads of secondary trauma, this investigation zoomed in on how educators make meaning of secondary traumatic stress and how they perceive the training that is provided to them. It also examined their direct experiences and chronicled how they navigated such emotional distress through aid strategies like self-care and how this phenomenon shaped them as educators.

Educational systems worldwide are realizing how important it is for teachers to be knowledgeable about and skilled in handling the demands of traumatized students (Berger & Martin, 2020). Although a growing body of research supports trauma-informed care, the

academic literature based on these educators' perspectives is lacking. Since there is little research on teachers' perspectives on childhood trauma, it is essential to discuss how public-school teachers have dealt with students' trauma-related issues and the effects of STS (secondary traumatic stress) on educators (Blodgett & Lanigan, 2018).

Numerous studies have shown that childhood trauma harms and hinders a child's development in all spheres (Evans & Graves, 2018; Hagan et al., 2018). The understanding of the effects of childhood trauma on students' academic achievement has influenced the growing discussion in schools about teaching methods, disciplinary measures, and teacher professional development in trauma-informed care (Hascher & Waber, 2021). Schools are starting to understand that teachers must possess the knowledge and abilities required to assess and address the needs of traumatized pupils (Satorius et al., 2020). Given the paucity of research on teachers' views on childhood trauma, it is essential to consider how public school educators interact with kids who have trauma-related needs (Harding et al., 2019). By evaluating their levels of secondary traumatic stress and burnout and their attitudes toward trauma-informed treatment, this research will help us better understand the consequences on public school teachers who deal with traumatized children. The public school system can gain a better understanding of how to support teachers who work with traumatized students daily by taking an in-depth look at teachers' levels of STS and burnout as well as their attitudes toward trauma-informed care (Alisic, 2012; Berger et al., 2020).

Purpose Statement

The purpose of this phenomenological study was to understand the central phenomenon of elementary educators recognizing their lived experiences of secondary traumatic stress and investigated their self-care techniques. This research looked at the lived experiences of educators

within the southeastern Tennessee region. For this study, secondary traumatic stress (STS) referred to the transfer of trauma symptoms from individuals who have experienced trauma to others who are close to emotionally scarred individuals (Castro et al., 2022). The theory guiding this study was social constructivism. According to Vygotsky's social constructivism theory, learning is a continuous co-constructing process made possible by the dialectical exchanges between the learners and the more knowledgeable individuals (particularly instructors) in a relational zone (Wei et al., 2015; Wei et al., 2020; Vygotsky, 1978).

Exploring the relationship between STS and teachers while utilizing social constructivism theory enables the process to be written using interviews, observations, and text analysis. Providing opportunities for educators to share their experiences opened the door to a broader perspective. The opinions and experiences of STS and public education teachers dealing with traumatized children was examined through qualitative research (Berger & Martin, 2020). A qualitative approach was appropriate for this study as it enabled a thorough investigation of STS on teachers and their interactions with traumatized students (Creswell & Poth, 2018).

Significance of the Study

The importance of this study was to understand better the viewpoints and firsthand knowledge of educators in public schools who work with traumatized children and their capacity to identify and meet their needs. Numerous studies show how childhood trauma has a detrimental impact on development and presents problems in all areas of a child's life (Messman & Bhuptani, 2017; Rogerson et al., 2023; Sprang & Garcia, 2022). Traumatized children are more likely to struggle socially, emotionally, behaviorally, and academically (Alvarez, 2020). To support instructors who engage with these students regularly, having a more profound knowledge of how teachers see traumatized students can be helpful. It was possible to investigate

and use new coping mechanisms by investigating the effects of STS (secondhand trauma) on teachers.

Research Questions

1. How do elementary educators make meaning of secondary traumatic stress (STS) caused by interactions with students with traumatic lived experiences?

Secondary traumatic stress (STS) is a form of stress that mirrors post-traumatic stress disorder (PTSD), which was initially only recognized for individuals directly exposed to trauma (Figley, 2013). It is a result of indirect exposure to trauma and represents the emotional distress experienced by those who help trauma victims. Teachers suffering from STS are more likely to be absent from work and experience a survival mode, which significantly impacts the quality of services they provide and the performance of their students (Garwood et al., 2020).

2. How do educators experiencing secondary traumatic stress perceive the training available to them to mitigate the effects of STS?

High numbers of children experience trauma or adversity, yet teachers often lack the appropriate training to support these students. This can greatly intensify a teacher's stress levels. Students who have been through traumatic experiences might display disordered behavior in school due to an impairment in their self-regulation and attachment capacities (Kim et al., 2021). Teachers without sufficient knowledge could overlook that disruptive behaviors are reactions to distress rather than bad behavior (Van Droogenbroeck et al., 2022). Providing the adequate professional development for teachers can address the needs of secondary traumatic stress and take the necessary actions to lessen its impacts.

3. How do educators experience and interpret their use of self-care in managing encounters with students who have experienced trauma?

Simon et al., 2022 research indicates that teacher well-being significantly affects their job performance, especially in fostering productive student-teacher relationships. Despite limited studies on the impact of Secondary Traumatic Stress (STS) on teachers, prior investigations have shown a substantial link between teachers' emotional health and effective execution of their roles. This concept has been supported by previous findings from McCormack and Adams (2016) who detailed how educators' own sentiments can profoundly influence essential facets of their work when teachers fail to manage their own self-care and understand their encounters the student-teacher relationship may be affected.

Definitions

1. *Burnout* – Primarily thought to be a phenomenon connected to one's employment and brought on by ongoing stress in the workplace (Van Droogenbroeck et al., 2021).
2. *Compassion fatigue* - Reduced empathic capacity or client interest manifested through behavioral and emotional reactions from exposure to traumatizing experiences of others (Burnette & Wahl, 2015).
3. *Empathy* - Coping skills and self-care: Reduction in the disruptive effect of vicarious trauma among trauma therapists, including the belief in using coping skills and the time spent engaged in self-care practices (Goroshit & Hen, 2016).
4. *Secondary Traumatic Stress* - The stress that comes with working with traumatized people for social professionals, psychologists, doctors, first responders, some administrative organizations, and other similar professions (Ludick & Fidgley, 2017).

5. *Trauma* - A direct personal experience that poses a risk of death or severe harm, seeing an event including such actions, or finding out that a family member is experiencing such an event (Anderson et al., 2021).
6. *Vicarious trauma* - Exposure to trauma victims, violent situations, and witnessing personal abuse causing mental strain, impacting one's daily life (Howard, 2021).

Summary

Teachers play a crucial role in nurturing students and molding them into successful members of society (Foreman, 2018; Hascher & Waber, 2021). Understanding the lived experiences of teachers gave insight into the occurrence of secondary trauma they encountered via empathetic interactions with traumatized individuals. By educating teachers about this phenomenon known as STS, we can empower them to take preventative action rather than reacting when it becomes overwhelming.

Specific research questions in this study directly encouraged educators to reflect on potential instances of STS that might have altered their outlooks significantly while inspiring progress toward understanding coping strategies such as self-care practice.

Acknowledging how ongoing interaction with distressed people could affect perceptions about oneself is an essential step for classroom teachers dealing with areas involving traumatic stress (Jennings et al., 2017; Perfect et al., 2016). This precognition helps one seek timely solutions, resulting in efficacious healing measures. Awareness about how therapeutic exposure can influence perception leads toward more proactive coping strategies rather than reacting when things become unmanageable. Further fostering awareness through research regarding secondary trauma strengthened professional wellness for school educators (Sanchez et al., 2018; Taylor, 2021).

This study aimed to understand educators' lived experiences regarding secondary trauma, interventions employed, self-care practices, and how STS shaped them as educators. By understanding trauma, educators stand to gain significantly from initiatives such as training sessions, guided oversight, collaborative assistance and personal well-being strategies. These methods help mitigate the effects of exposure and foster good health through heightened self-perception.

Chapter Two: Literature Review

Overview

This chapter provided an overview of the theoretical framework and related literature. The theoretical framework for the study was the social constructivism and secondary trauma theory. The literature discussed included the definition of secondary traumatic stress and compassion fatigue. This chapter also examined teacher burnout, as well as the adverse effects of trauma on the classroom teacher. Additional works of literature that this chapter highlights included the significance of connections and intervention techniques, including professional development and self-care techniques. Educational systems worldwide recognize the importance of teachers' knowledge and skills in handling traumatized students. However, there is a lack of research on teachers' perspectives on childhood trauma, highlighting the need for further discussion. This chapter is divided into four main parts: overview, theoretical framework, related literature, and summary.

Theoretical Framework

Constructivist self-development theory (CSDT) is a valuable framework to characterize vicarious trauma experienced by educators. CSDT aims to understand the psychological aspects of trauma treatment for clients, particularly those who have experienced vicarious trauma (Foreman, 2018; McCann & Pearlman, 1990). It focuses on understanding the fundamental self, belief system, and schemas that form perceptions.

CSDT offered a concept that described how traumatic life events may affect psychological needs in social and sociocultural situations through either direct or indirect methods (McCann & Pearlman, 1990; Vides et al., 2022). CSDT is a "comprehensive theory on how traumatic stressors affect individuals" (Edwards & Miller, 2019, p. 17). Therefore, the

aspects of a person's self-development most susceptible to trauma's impacts and those that support adjustment to a traumatic event and its aftermath are deeply ingrained in their unique personality, history, society, environment, and culture (Middletown et al., 2022). School educators' work with traumatized adolescents can alter their perceptions of others, the world, and themselves (Anderson et al., 2021). CSDT offers a framework for understanding how a person views and responds to potentially stressful future occurrences that may be influenced by past and present experiences of empathic engagement with trauma survivors (Evans & Graves, 2018).

McNellie and Rose (2021) stated that trauma incidents may seriously interfere with psychological norms. Psychological needs are internal factors influencing how people behave and interact with others. In the context of the CSDT, five psychological needs —control, safety, intimacy, dependence, esteem,— have been highlighted as potentially disrupted by traumatic events (Roberts et al., 2022).

The five domains of CSDT include “self-capabilities, ego resources, frame of reference, psychological requirements and cognitive schemas, memory, and perception” (McCann & Pearlman, 1990, p. 136). Ego resources are the capacity to watch and assess oneself while using social and cognitive abilities to form bonds with others (Evans & Graves, 2018; Middletown et al., 2022). Disruptions to the frame of reference can lead to a loss in cognitive processing and information coding, potentially damaging the therapeutic alliance (Roberts et al., 2022; Saakvitne et al., 1998). “Changes in identity, worldview, interpersonal connections, and sense of self” are fundamental aspects of vicarious trauma (Vides et al., 2022, p. 1062). Self-capacity safeguards individuals from aberrations in their belief system and allows them to maintain their sense of self (McNeillie & Rose, 2021).

School personnel who struggle to distance themselves from their profession and the pain

experienced by their students are more likely to become victims of vicarious trauma and other interpersonal problems (Anderson et al., 2021).

Secondary Traumatic Stress Theory

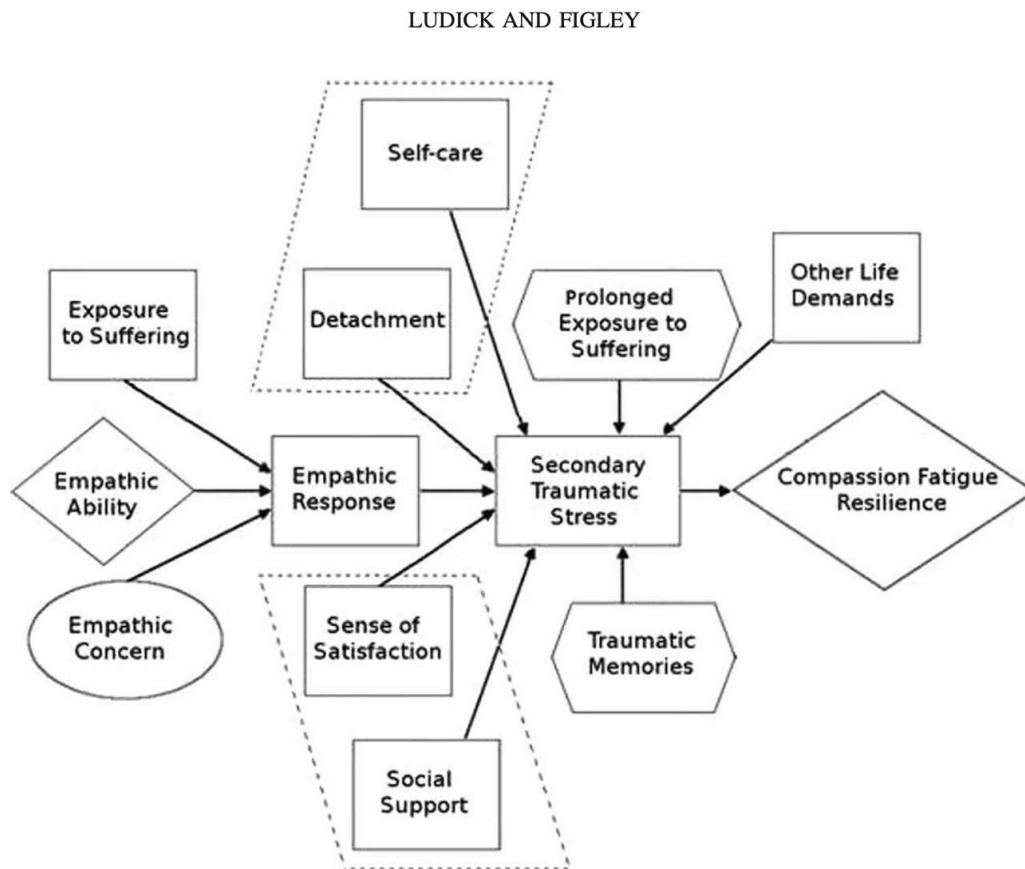
Systems theory illustrates how different processes interact and affect each other over time to allow the persistence of a broader entity (Eads, 2023). Systems theory gave rise to Secondary Traumatic Stress (STS) (Ludick & Figley, 2017). STS is a concept resulting from secondary victimization and is a detrimental effect of indirect trauma exposure linked to the vicarious traumatization process. It refers to the challenges of dealing with traumatized individuals, either directly or indirectly, and can range from self-reports to psychometric assessments (Burnette & Wahl, 2015; Ludick & Figley, 2017). Initially thought exclusive to trauma-related work, STS and CF show similar reactions to client trauma, similar to post-traumatic stress disorder (PTSD) (Kapolitsas & Corcoran, 2018). To fully understand the benefits and drawbacks of building resilience during stressful times, it is essential to reimagine the concept of STS and include all impacted communities (Ludick & Figley, 2017).

The theory of stress and trauma (STS) is crucial in understanding the complex and often inevitable encounters faced by those dealing with traumatized individuals or those researching them (Aberdroth & Figley, 2014). The most common cause of STS among workers is exposure to evocative reality, which can vary depending on the individual. Professionals who elicit essential empathy to understand and assist the traumatized experience increase STS (Kapolitsas & Corcoran, 2015). Separating stress responses from evocative reality, such as direct contact or phone calls, also increases STS. STS is higher when workers are exposed to evocative materials for extended periods. Remembering painful past experiences also increases STS. Finally, when a worker experiences compassion stress fulfillment, which heightens their feeling of value and

purpose, STS decreases (Airganes et al., 2014).

Figure 1

Compassion Fatigue Resilience



Note. Figure 1, Reprinted with permission and adopted from Ludick and Figley (2017) displays the Model of Secondary Traumatic Stress (STS) and Compassion Fatigue Resilience (CFR).

Figure 1 demonstrates acceptable CFR levels and identifies those at risk for excessive STS. The 12 factors work together to estimate the CFR level. To make the most of the model's application and reap the most rewards for research and resilience building, it is crucial to consider the model

in terms of sectors. The three sectors are the empathetic stance/response, secondary traumatic stress, and compassion fatigue resilience.

Empathetic Stance

The concept of empathetic response in the healthcare sector is influenced by factors such as exposure to pain, empathic concern, and empathic competence (Lamonthe et al., 2014).

Employees in this sector often encounter suffering, which can lead to adverse consequences. Secondary trauma can result from hearing about or learning about a traumatic occurrence, and employees may be particularly susceptible when they have limited access to therapy or other types of support, training, or expert supervision or assistance (Cameron et al., 2019; Kelly, 2020).

Empathy is a universally significant intrinsic inclination in human relationships, and its presence or absence is directly correlated with a higher risk of psychopathy (Airganes et al., 2014; Cameron et al., 2019). Empathy is essential for the practical support of those who have experienced trauma, as it is essential for communication skills and the efficacy of psychotherapy. A negative correlation between burnout and empathy is consistent with the empathy paradox (Abendroth & Figley, 2014; Kelly, 2020).

The capacity for empathy refers to an individual's capacity and inclination to identify pain in other people (Figley, 1982; Johander et al., 2022). Service providers must be able to take on and comprehend the perspectives, feelings, needs, and suffering of others. When empathizing, employees establish an emotional connection with hurting customers and respond to them with empathy. However, this emotional connection can put the worker in danger (Burnette & Wahl, 2015; Johander et al., 2022).

Empathy is always required when creating a customer report, and it seems to be the most significant predictor for excellent service, customer happiness, and loyalty in various service delivery scenarios (Ludick & Figley, 2017). In clinical settings, empathy encourages treatment adherence and positive clinical results. It is essential to the doctor-patient interaction for improved health outcomes and a key instrument in the "art of human interaction" (Lamonthe et al., 2014, p. 15).

Secondary Traumatic Stress Sector

Exposure to pain, empathic concern, and empathy competence are all crucial factors contributing to developing STS in healthcare professionals (Burnette & Wall, 2015; Rauvola et al., 2019). By addressing these issues, healthcare professionals can better support their clients and improve the overall quality of care they provide. Secondary traumatization resulting from trauma exposure may be seen in the accounts of mental health professionals. A person constantly exposed to negative energy and has a natural tendency toward negativity may easily experience negative emotional anguish and get mired in negativity (Clayborne et al., 2019; Sanchez et al., 2018.). Remaining compassion stress often shows up as increased dread, which is a sign that complex client trauma cannot be effectively resolved. When talking about their jobs in general, claims workers exhibit worry seven times more often compared to their trauma counselor colleagues. Additionally, they demonstrate an inability to process unpleasant situations, as shown by the fifth person who reported a profound feeling of despair in humanity—a mindset known as overaccommodation (Hallinan et al., 2019).

Constructivist self-development theory affirms that traumatic experiences may adversely and permanently alter mental schemas, or frameworks, including beliefs, presumptions, expectations about ourselves and others, causation, and the veracity of sensory data (Rauvola et

al., 2019). Student therapists believe that too high exposure levels pose a risk to their excellent, limited internal objects and resources, reducing or even destroying them. Symptoms of posttraumatic stress disorder may be both psychologically and physiologically transforming, and they can intensify interpersonal issues. The reality that STS is a single aspect of many quantifiable effects of exposure to trauma highlights how crucial the CFR model is (Vides et al., 2022). Emotional, cognitive, behavioral, and interpersonal functioning are often hampered, and depression, anxiety, irritability, and physical or somatic problems become widespread. Exposure to trauma may have deleterious repercussions, one of which is a large culture of silence in Canadian media. In addition to STS, several individuals also dealt with drug misuse, despair, and health issues (Pow & Cashwell, 2017; Zabek et al., 2022).

Compared to study participants, civil servants exhibited a considerably higher prevalence of negative cognitive schemata, which often resulted in ill health and an increase in sick leave from work-related stress (Pow & Cashwell, 2017). An overall loss in health and well-being was noted by them, accompanied by symptoms such as persistent weariness, low energy, restlessness, exhaustion, sleeplessness, and even an unsuccessful pregnancy. There is a substantial correlation between psychological trauma and unhealthy behaviors. Severe, acute, and chronic sickness risks and occurrences are connected to ongoing exposure to traumatic stress. Insomnia, disturbed sleep, heightened startle reactions, breathing problems, sweating, and a beating heart are some symptoms (Hallinan et al., 2019; Sanchez et al., 2018; Zabek et al., 2022). Civil servant professionals also exhibit high absenteeism rates, with over half of them admitting to using sick leave as a coping mechanism. The CFR model provides a road map that directs employees toward Chronic Traumatic Stress Disorder (CTD) and away from secondary trauma. Not only will engineered enhancements strengthen CTD and eliminate secondary trauma, but

they will also alleviate the majority of other adverse outcomes linked to exposure to occupational trauma. The following factors provide new paths for secondary traumatic injuries that may increase strain and aid in developing STS (Zabek et al., 2022). Traumatic memories—both those gathered from client interactions and those relating to the individual's trauma history—can cause or worsen post-traumatic stress disorder (STS). Secondary traumatization has been significantly correlated with traumatic memories, particularly in those with unresolved experiences. More anguish is caused by client experiences that closely resemble the worker's painful recollections than by unrelated traumas (Sanchez et al., 2018).

Functioning may be momentarily disrupted by other life demands, such as handling demanding obligations and unforeseen schedules or routine adjustments (Lamonthe et al., 2014). These consist of sickness, alterations in social standing, and financial hardships. Nonetheless, a few life experiences combined with the elements the CFR model expresses might cause STS (Pow & Cashwell, 2017; Rauvola et al., 2019). When someone's resources and coping mechanisms are surpassed, it puts their productivity, health, and well-being at risk and increases the chance of developing STS, causing distress.

Compassion Fatigue Resilience Sector

The Compassion Fatigue Resilience Sector (CFR) model emphasizes the importance of emotional resilience in trauma-exposed individuals (Kelly, 2020; McCool et al., 2022). It focuses on developing compassion, which produces empathy that nourishes and shields individuals from stress-related stress (STS). Four essential components of resilience building — encouraging health and self-care, social support, and acknowledging that resilience development is a dynamic process within its systemic context—resonate closely with the CFR model (Pehlivan & Guner, 2019). Detachment, developed through training, experience, and continued self-care, is crucial

for releasing oneself from a client's pain. Employees who can step back and let go of their clients' traumas show the least negative impacts (Burnette & Wahl, 2015). Satisfaction with customer service can also counteract STS, as it can reduce the impact of CF on child protection personnel. Compassion satisfaction is a highly ameliorative factor in trauma responders (McCool et al., 2022). Social support in trauma work has the potential to prevent, ameliorate, and create resilience. Studies have shown that social support impacts psychological adjustment among international aid workers and improves one's capacity to handle exposure to trauma (Kelly, 2020; Paiva-Salisbury & Schwanz, 2022). Insufficient social support has been linked to poor psychological health and increased absenteeism in diverse workforces. Therapists and social professionals are protected by interpersonal relationships, and maintaining healthy, positive cognitive schemata are particularly dependent on interactions with kind and encouraging others (Berthold & Ruch, 2014). Measuring the model variables is necessary to accept and appreciate the roles of each CFR model component and the resilience-building process as a whole (Burnette & Wahl, 2015; McCool et al., 2022; Pehlivan & Guner, 2019).

Related Literature

This section offered a synthesis of literature on secondary trauma and the classroom implications as well as compassion fatigue and burnout. The literature also explored teachers' self-care and secondary traumatic stress. There is an abundance of literature on secondary trauma focusing largely on the experiences of other professionals but there's a significant lack in studies specifically related to classroom teachers

Trauma and the Classroom

Detrimental health and well-being effects stemming from harsh childhood events or trauma have been widely validated in research (Centers for Disease Control and Prevention,

2016; Foreman, 2018; Howard, 2021). Convincing evidence suggests that children exposed to severe interpersonal traumatic instances might find it challenging to fulfill certain growth stages. For example, learning emotional control or forming secure bonds is harder when facing these adverse conditions (Blodgett & Lanigan, 2018; Chen et al., 2021). This is mainly due to how this exposure affects neurobiological system development, which is responsible for regulating arousal levels, emotional processing, reactions toward stressors, and assimilation of rewards. These formative psychobiological functionalities underpin potential long-lasting post-traumatic distress issues, which often morph into complex PTSD (Karatzias et al., 2020 Messman-Moore & Bhuptani, 2017).

Adverse childhood experiences (ACEs)

Empirical research shows that Adverse Childhood Experiences (ACEs) are associated with negative health effects and various mental health issues across a person's lifespan (Bethell et al., 2017; Fellitti et al., 1998; Pataky et al., 2019). ACEs can adversely influence the development of biological regulatory systems, causing increased physiological responses to stressors from early in one's life. These experiences often result in students needing help to develop emotional intelligence for processing their traumas, as well as skills necessary for tackling challenges or triggers related to childhood trauma (Messman-Moore & Bhuptani, 2017; Pittman & Karle, 2015). There is a common observation among neurobiologists indicating chronic exposure to severe trauma negatively impacts brain functions, leading many individuals experiencing such adversities to difficulty accessing higher-order cognitive processes essential for learning and emotional regulation (Chen et al., 2021; Chitiyo & Pietrantoni, 2019).

With a considerable number of students who have experienced trauma present in current classrooms, most teachers feel unprepared to provide the requisite support. In a study led by

Cavanaugh (2016), findings revealed that although 75% of educators believed schools should play an active role in attending to the mental well-being of their students, only about one-third felt equipped with the necessary skills for such tasks. The quest to maintain high-level educators involves equipping them with the required proficiency, tools, and resources for accurately recognizing and managing trauma-related student needs (Hagan et al., 2018; Jennings, 2019).

According to the CDC (2019), the primary forms of trauma faced by students in schools include namely physical or sexual abuse, emotional and physical neglect, as well as witnessing/experiencing domestic violence. Physical abuse is reportedly the most common version (28.3%). Prevalence rates for other types are 20.7% for sexual abuse, 14.8% for emotional neglect, 9.9% for physical neglect, and 12.7% have witnessed/experienced domestic violence, according to Cavanaugh's (2016) study. Child maltreatment, including children not receiving needed care (abuse and neglect), has been classified among one nation's grave problems (Chitiyo & Pietrantonio, 2019).

Students often suffer trauma due to acts typically committed by parents, primary caregivers, or close family members (Kessler, 2020). This ongoing emotional abuse is challenging for them as they lack the necessary social and emotional support needed to recover from such experiences (Chitiyo & Pietrantonio, 2019). Lesser-known traumatic events include the sudden unexpected loss of a loved one, natural disasters like hurricanes or earthquakes, man-made disturbances such as war or terrorism on both domestic and international fronts along with the recent global COVID-19 pandemic (Cavanaugh, 2016; Thomas-Skaf & Jenny, 2021).

Exposure to aversive events can cause trauma, but the level of impact depends on an individual's perspective. Not every adverse event is considered traumatic by those experiencing it. Sciaraffa et al. (2018) found that for any incident to be deemed as a traumatic experience, it

must be perceived as distressing, frightening, or sudden and could potentially jeopardize one's safety or personal integrity; in other words, the perception varies based on each person's viewpoint. Consequently, this implies that teachers cannot assume students will react similarly toward all experiences (Spence et al., 2021).

Around 30% of U.S. students with emotional and behavioral disorders have suffered trauma or show symptoms of PTSD, leading to social difficulties, emotional and cognitive problems, and high-risk behavior (Cavanaugh, 2016). Students with intellectual and developmental disabilities are notably more vulnerable - 4.3 times as likely compared to those without disabilities - experiencing maltreatment - linked trauma at a higher rate, including potential vulnerabilities like physical sexual abuse along with other types of mistreatments (Keesler, 2020; Thomas-Skaf & Jenney, 2021).

Several factors contribute to the high trauma statistics among students with intellectual and developmental disabilities (IDD), including challenges in language skills that hinder them from adequately expressing their experiences and emotional states (Thomas-Skaf & Jenney, 2021). Specific neurobiological variances, especially common in autistic individuals, can intensify stress responses during traumatic events. Additionally, these differences may result in increased vulnerability or victimization due to societal stigmas viewing them as more gullible or overly trusting. Students with disabilities face an elevated risk of abuse-related trauma by caregivers, amplified by caregiver strain since caring for disabled students requires increased effort than non-disabled ones; this added responsibility can potentially escalate stress levels, leading to abusive behaviors (Kessler, 2020).

Types of Traumas

Trauma can manifest in various forms, including “acute, chronic, complex, secondary

developmental, and collective” (Bland & Gershwin, 2023, p. 143). Acute trauma is a short-term incident caused by unexpected situations like car accidents or sudden loss of loved ones, which could equally occur within school premises, such as a student's restraint due to violence/shootings or the death of another student (Brown et al., 2020). On the other hand, chronic trauma involves prolonged exposure to traumatic events such as repetitive domestic abuse, neglect amounting to homelessness, and even starvation happening over several years (Deutsch et al., 2020).

Complex traumas are also triggered by repeated experiences consisting of varied types of distressful scenarios (Deutsch et al., 2020). Bland and Gershwin (2023) further identify that these episodes could include repeated physical, sexual, domestic violence or neglect, emotional abuse, and exposure to community violence through a sustained period. Additionally, the spectrum of complex trauma also covers long-term medical traumas (Deutsch et al., 2020).

Developmental trauma, which can be acute, complex, or chronic, significantly affects a child's development. The impact extends to various areas, such as peer relationships, social skills, and school success, with potential consequences for the individual's self-perception. Further effects of continuous traumatic stress during childhood include disruptions in attachment processes alongside compromised emotional and behavioral regulation, which also negatively influence cognition and learning abilities (Brown et al., 2020; Deutsch et al., 2020).

Secondary or vicarious trauma refers to the traumatic stress experienced by an individual who has indirectly faced a crisis (Bland & Gershwin, 2023). This can occur through witnessing a traumatic event, encountering extreme emotions displayed due to past traumas, and assisting victims during times of distress, resulting in similar responses as that of direct sufferers. Educators are particularly prone to secondary trauma given their frequent interaction with

students who have undergone untreated traumas themselves; this tendency rises during moments when educators must respond directly by handling emotional breakdowns or hearing about these events from students first-hand. Secondary trauma among teachers consequently makes them vulnerable to increasing levels of anxiety, mental burden, and stress (Christian-Brandt et al., 2020).

Collective trauma refers to situations in which a group, regardless of its size, simultaneously goes through shocking events (Bland & Gershwin, 2023). The traumatic event doesn't require the victims' physical proximity and could occur via experiences like school shootings or natural disasters such as hurricanes or earthquakes. Other instances might involve terrorist attacks and violent crimes. The COVID-19 pandemic has undeniably catalyzed one form of collective trauma by causing substantial emotional unrest and financial strain for numerous households throughout our nation (Phelps & Sperry, 2020). An evident surge in Google search terms clearly showed this stress increase; phrases like "My mom beat me" and "My dad hit me" became more frequent along with the active searches on ways to pinpoint child abuse and report it (Bryant et al., 2020, p. 144). Such shared distress can profoundly affect students, teachers, and families alike and may span several coming years, potentially influencing countless lives beyond what we currently comprehend.

Trauma and the Brain

The body's Autonomic Nervous System (ANS), particularly the Sympathetic Nervous System (SNS), responds to stress scenarios. It discharges certain chemicals that enable people to withstand stressful situations by initiating reactions (Souers & Hall, 2016). They discuss the perception of a threat or how reexperiencing a trauma can trigger specific responses in the brain. These responses can lead to chemical releases in the body, facilitating 'fight or flight' stress

responses (Bland & Gershwin, 2023, p. 145). However, when these chemicals are continually released heavily over time due to prolonged exposure to such triggers, they become toxic to human bodies - causing impairment that is especially dangerous for children's development (Harris, 2021).

The amygdala activates the Social Networking System (SNS) into a "fight or flight" reaction when faced with stress, which can result in enhanced alertness, increased heart rate, and other physical responses (Bland & Gershwin, 2023, p. 145). Some individuals may experience disassociation, which leads to immobility due to emotional overload. The inability of the amygdala to distinguish genuine threats from false ones could be attributed to miscommunication between the limbic brain processing emotions and feelings and the neocortex used for rational thinking (Pittman & Karle, 2015). Herein lies the importance of medial prefrontal cortex processing data from both these regions, effectively enabling proper interpretation of how one should act upon encountering trauma triggers (Jennings, 2019). Students bearing past traumas often struggle with interpreting such stimuli and regular social engagements due to deficits in their emotional regulation capacities.

Students who have been subjected to trauma typically display long-term deficits in processing skills and emotional regulation (Pittman & Karle, 2015). These setbacks affect their ability to understand the triggers of the traumatic experience, manage intense emotions, concentrate on learning and problem-solving tasks, and control impulses that might obstruct optimal learning processes. Critical thinking becomes a challenge when experiencing an emergency response triggered by the amygdala because it takes longer for more rational parts of the brain, like the neocortex, to react or maybe even become diminished due to its age, capability level, or previous trauma exposure (Harris, 2021).

Moreover, students with a history of traumatic experiences are often found overstressed, which indicates they constantly operate under exaggerated sympathetic nervous system conditions - this can cause misinterpretation, triggering harmful reactions reminiscent of past traumas instead of forming new associations (Souer & Hall, 2016). Further detrimental effects include poor impulse management abilities alongside trouble acknowledging signals given off emotionally by both classmates and teachers; these pupils may also feel insecure trusting authority figures and peers alike, causing hindered perceptions, making external internal realities skewed, and leading to potential withdrawal from societal activities resulting in inner chaos (Harris, 2021; Pittman & Karle, 2015; Van der Kolk, 2014).

Student Performance

Trauma can significantly negatively impact a student's emotional regulation and executive functioning, resulting in behavioral issues such as aggression, poor attendance, struggle with relationships and self-regulation (Sciaraffa et al., 2018). These challenges often contribute to academic difficulties or school dropout rates among adolescents from low-resource areas with high crime levels. Students experiencing stressful home situations are more prone to avoidance behaviors rather than adopting problem-focused coping strategies; they may also have difficulty identifying emotions, leading them to problematic reactions when facing disappointment failures (Bethell et al., 2017; Patakye et al., 2019; Sheffler et al., 2019).

Students who have experienced complex trauma often display behaviors indicative of hyperarousal or hypervigilance, which includes an overreaction to stimuli that are typically ignored by others (Spence et al., 2021). This heightened response is due to their amygdala continuously sending warning signals to the brain, activating the sympathetic nervous system (SNS) (Harris, 2021). The symptoms can include sleep issues and irritability. Still, they can also

extend into conditions inconsistent with their initial trauma, such as fear, panic, and uncontrolled anger in the absence of known triggers. These reactions may sometimes be mistaken for attention-deficit/hyperactivity disorder (ADHD) (Spence et al., 2021).

Vicarious Trauma

Trauma is defined as the feeling of extreme physical or psychological stress as a result of one or more negative events or circumstances in life (SAMHSA, 2015).

The American Psychiatric Association (2013) defines trauma as:

... direct personal experience of an event that involves actual or threatened death or serious injury; threat to one's physical integrity, witnessing an event that involves the above experience, learning about unexpected or violent death, serious harm, or danger of death, or injury experienced by a family member or close associate (p. 271).

McCann and Pearlman (1990) coined the term vicarious trauma (VT) to describe the alterations in civil servants' ability to reason and manage emotions. Vicarious trauma, as defined by Kanno and Giddings (2017), is the term used to describe the traumatic stress that support professionals encounter because of dealing with traumatized people.

Vicarious trauma, sometimes referred to as indirect trauma, differs from direct trauma in that the victim's life is not immediately in jeopardy (Foreman, 2018; McCann & Pearlman, 1990; Pryce et al., 2021). The constructivist self-development theory (CSDT) is the foundation for VT, focusing on how trauma affects self-development. It posits that people create and interpret their realities, and when disrupted, helpers may question their safety, self-efficacy, and worldview (McNellie & Rose, 2021). This theory highlights the importance of understanding how trauma impacts a person's self-development and how it impacts their lives. Traumatic stress can have varying effects on individuals, with some experiencing temporary health issues and others

developing chronic mental health issues. The DSM-5's (text rev.) introduction of PTSD highlights the psychological impact of a single traumatic event, highlighting the potential for trauma to alter a person's entire life (American Psychiatric Association, 2022). Trauma stress symptoms, such as nightmares, flashbacks, and bothersome thoughts, in addition to anxiety, impulsivity, and hyperarousal, as well as avoidance behaviors like numbing, withdrawal, and dissociation, can cause unpleasant disruptions in response to trauma (American Psychiatric Association, 2022). Reactions to direct trauma seem to proceed similarly to those to vicarious trauma (Hallinan et al., 2019).

While exposure to VT may be an unavoidable occupational risk associated with their profession, vicarious traumatization or other unfavorable outcomes are not always guaranteed (Hallinan et al., 2019). Being vigilant concerning vicarious traumatization may help organizations reduce its risk.

Compassion Fatigue

Figley (1982) proposed the term "compassion fatigue" as a replacement for "secondary traumatic stress." This was partly caused by past studies on secondary trauma, which revealed that nurses thought the word was less dismissive. According to Figley (1982), "feeling the stress and even fatigue of compassion in the line of duty better describes the causes and manifestations of the duty-related experiences" (p. 15). "A state of exhaustion and dysfunction — biologically, psychologically, and socially — as a result of prolonged exposure to compassion stress and all that it evokes" is how Figley (1995) described compassion fatigue (p. 253). Civil servants are vulnerable to the cost of care, and educators are expected to be compassionate to their students' needs. However, this can lead to compassion exhaustion, a typical result of compassion stress.

Compassion fatigue can cause the "helper" to stop being involved, potentially harming both the helper and the individuals they assist.

Kelly (2020) coined compassion fatigue as an emotional side effect of coping with secondary trauma. Empathy, the capacity to comprehend, respect, and acknowledge other people's feelings, is essential for associative learning in international relations, healthcare, and social justice (Maguire & Byrne, 2017). A correlation study conducted by Mottaghi et al. (2020) found that 77% of individuals reported suffering from compassion fatigue due to secondary traumatic stress and guilt.

Compassion fatigue can lead to emotional weariness, depression, helplessness, and overwhelm, leaving the empathizer depressed, helpless, and overwhelmed (Babik & Gardner, 2021). Professional school personnel often face stressful career situations, such as boundary violations, unethical client interactions, job transitions, and impaired decision-making (McCormack & Adams, 2016).

The stress that school educators experience from aiding children in various situations throughout time leads to compassion fatigue (Maguire & Byrne, 2017). Research has discovered signs of compassion fatigue, such as apathy, tiredness, impatience, reduced performance, boredom, and a state of emotional exhaustion; also, lack of judgment, indifference, and desensitization to the needs of pupils were noted (Kelly, 2020). To reduce compassion fatigue, stress-reduction therapies and training programs should be introduced, as well as addressing boundary violations, unethical client interactions, job transitions, and impaired decision-making (McCormack & Adams, 2016). By addressing compassion fatigue, educators can better support their clients and maintain their professional functioning (Mottaghi et al., 2020).

Burnout

The term "burnout" describes the state that aid workers experience when they become emotionally spent and incapable of reaching a personal goal that is too lofty to reach (Kanno & Giddings, 2017). High stress levels have been linked to burnout, with job fatigue being a significant workplace component. Early research defined the psychological pressures faced by frontline workers who assist trauma victims. Signs of burnout include depression, a lack of empathy, or cynicism. Physical signs include headaches and insomnia (Oberle et al., 2020).

Burned-out workers may not be able to contribute significantly to their tasks. Burnout and secondary traumatic stress disorder (STS) share similarities, but they also differ significantly (Kanno & Giddings, 2017). Burnout develops gradually, while secondary stress can be severe and overpowering simultaneously (Brown et al., 2020; Kanno & Giddings, 2017). When seeking solace from burnout, individuals may quit their jobs, ending the condition. However, sufferers of secondary traumatic stress disorder have aftereffects that extend beyond the workplace (Oberle et al., 2020).

Teachers are feeling the pressure from day-to-day activities and the pressure of managing students' behaviors. Stress among teachers has considerably soared in recent years (Jennings, 2019). A survey conducted for K-12 educators across America showed alarming data—46% of teachers stated that every day at work was drenched with high levels of tension (Cavanuagh, 2016). These worrying figures parallel distress statistics reported by other professionals in intense careers like nursing or doctoring.

Research regarding teacher burnout and how students perceive burnout is limited (Jennings et al., 2017). While it is clear that we need more research involving students' opinions on their teachers' social-emotional competence (SEC) skills, most studies have not asked the

pupils themselves about how they view these abilities in their educators. Nor is there much data out there exploring factors influencing student perceptions of teacher SEC. Considering the profound impact occupational stress and burnout can have on a teacher's interaction with students it is then concluded more research is needed to determine how the interactions are impacting student learning (Lewis & King, 2019).

Teachers' Role in Students' Well-Being

The psychology of teaching is a challenging endeavor (Bilz et al., 2022). Educators have been identified to face increased occurrences of mental and psychosomatic issues compared to other professionals according to several studies (Bilz et al., 2022; Scheuch et al., 2015). An essential component for teachers is successfully dealing with these taxing factors while maintaining their morale. A well-cherished value here is 'well-being', set forth by Diener (1984), who underlined its inherent subjective aspect. Strikingly, this concept features two key segments: satisfaction with life (cognitive element) and positive emotional experience (affective facet).

The academic accomplishment seen among students has often been linked directly back to educators' sense of well-being (Diener, 1984; Herman et al., 2017). Schools are more than centers dedicated to academics but also grounds for nurturing cognitive character alongside social-emotional development in children. The pivotal milestones throughout childhood into adolescence tend largely to occur during school hours under an instructor's watchful eye (Herman et al., 2017). The abundant student-teacher interactions pervading every day at school is thought to lead to a correlation between teacher well-being and youth welfare quotient (Bilz et al., 2022; Glazzard & Rose; 2019). Bilz et al. (2022) went on to state, "Little is known about the association between teachers' well-being and students' well-being" and more research is needed to determine these crucial factors" (p. 272).

Teachers all around the world are reporting stress and issues caused by stress related factors (Klusman et al., 2016; Scheuch et al., 2015). Teachers admit to experiencing higher levels of both physical and mental health problems compared with other professions. A competent teacher model suggested by Baumert and Kunter (2013) frames teachers' wellness as a result of successful self-management - managing one's resources responsibly. Being unable to handle work-related pressure can have lasting negative impacts on teachers' well-being (Kidger et al., 2016; McLean & Connor, 2015). The negative impact of stress does not only affect educators; it spills over into students' lives also.

Studies suggest there may be links between how healthy a teacher feels physically or mentally and how they behave in the classroom environment along with student-teacher relationships (Kidger et al., 2016; Klusman et al., 2016; McLean & Connor, 2015). The factors related to teaching could potentially influence pupil performance significantly – many investigations discovered positive associations between well-being amongst faculty members, leading towards better academic success for pupils studying at schools where such conditions exist.

Teachers do more than impart knowledge; they aid in shaping children's social and emotional skills (Arens & Morin, 2016; Jennings et al., 2017; Oberle et al., 2020). The well-being of students is closely tied to the accomplishment of developmental tasks, a charge that falls largely on teachers (Harding et al., 2019; Hascher & Waber, 2021). Studies have shown links between teacher factors like burnout and negative effects on student health such as higher stress levels (Oberle & Schonert-Reichl, 2016) or increased prevalence for depression (Harding et al., 2019). Ironically though there has been little research invested into understanding how teachers'

well-being directly affects their pupils; only a few studies give insight from both parties' perspectives (Hascher & Waber, 2021).

One crucial element, however, seems clear: teacher support. Wholesome environments conducive to positive relationships are less likely formed by distressed teachers who often struggle with building healthy relational ties (Klusman et al., 2016; Oberle & Schonert-Reichl, 2016). Unsettled teachers may try to keep up appearances; however, students can sense this lack of effective engagement (Arens & Morin, 2016).

Instructors experiencing lower states of overall happiness or increased emotional fatigue deliver lessons likely not to meet certain quality standards (Glazzard & Rose, 2019; Klusman et al., 2016). This could affect their capability to facilitate student learning and also limit their efficiency with students who face challenges in learning. It is probable, too, that these circumstances are influenced by factors such as students' traumas and the effect that has on the classroom teacher. Therefore, more variables and studies should undergo an examination as potential reasons behind a teacher's well-being (Hascher & Waber, 2021).

Teachers' welfare plays a crucial role in fostering student development, both academically and mentally. There is a pressing need for efficient early detection and prevention strategies, as well as responsive intervention measures to handle complications related to wellness among teachers and students alike. Regarding teacher wellbeing specifically - recent studies shed light on possible interventions available; however, their effectiveness requires more evaluation and review (Muehlhausen, 2021). The unhealthy condition (due to any cause) of educators jeopardizes student welfare. Most importantly, if further validated, it would be another strong argument advocating teacher-priority health care.

Educators and Secondary Traumatic Stress (STS)

In recent years, the frequency of trauma in childhood and adolescence has been given increasing public attention (Castro Schepers & Young, 2022). This spotlight is leading education systems to delve into how these traumatic experiences are impacting students, teachers, and schools. Some have introduced strategies known as 'trauma-informed practices' which claim effectiveness for helping support in the classrooms. Meanwhile, experts question if there might be an indirect negative effect on teaching staff by way of STS (Alvarez, 2020).

Traumas like STS occur when professionals working intimately with traumatized groups are affected themselves just by witnessing the alarming incidences (Cafaro et al., 2023; Connell et al., 2024). Findings underscore the urgency of continued exploration into STS's effect on educators; future inquiries have the potential to enlighten both teacher training programs and professional growth opportunities (Berger & Martin, 2020; Gallagher et al., 2019). These investigations could enable professionals to pinpoint strategies that can help lessen teachers' exposure to secondary traumatic stress.

Professionals like therapists, social workers, and emergency rescuers lean on research and proven support methods to navigate Secondary Traumatic Stress (STS) in their teams (Sprang & Garcia, 2022; Stevens et al., 2019). This phenomenon first caught the attention of psychologists wanting to understand how professionals working with traumatized groups are affected by being privy to the lived experiences of these individuals. Current studies highlight a need for addressing STS's impact on healthcare and mental health professionals. However, there is little research on the impacts on classroom educators.

Over a hundred years ago, the strain and ill health effects associated with teaching, including high demands and few resources, were recognized (Alvarez, 2020; Brown et al., 2020).

Society has always viewed educators as nurturing, loving model figures compared to those outside of educational institutions. Extensive public conversation implies that teachers are expected to be compassionate and empathetic in their student interactions - for many instructors, these values are intrinsic parts of who they are professionally (Sprang & Garcia, 2022). Nurturing this emotional connectivity is crucial for cultivating classroom camaraderie; scholars maintain that students thrive when such an atmosphere exists. Research proves this theory: classrooms where students form strong connections with their teachers' marked improvements in academic performances and social skills (Berger & Martin, 2020; Gallagher et al., 2019).

In recent times, we have seen increased attention to the trauma encountered by students. This gained further spotlight due to the collective distress brought about by closures in response to COVID-19, a crisis that amplified not just those enduring such hardship but also exposed gaps in the availability of psychological aid for students (Taylor, 2021). Shockingly enough, over two-thirds of children have reportedly faced at least one traumatic event before the age of 16 (SAMSHA, 2023). Children confronting these hardships come from every race and socio-economic bracket with an assumably higher percentage found among pupils attending Title I-funded schools (Connell et al., 2024; Stevens et al., 2019; Taylor, 2021).

Certain deeply unsettling occurrences are recognized as potentially traumatic events by SAMHSA (2023). These include incidences of emotional, physical, or sexual mistreatment; violence in community arenas or educational settings; exposure to domestic aggression, and violent incidents at a national scale such as natural disasters or acts associated with terror threats. SAMSHA (2023) also highlights other shocking experiences that can create trauma, including losing loved ones without warning, tragic circumstances befitting refugees and war victims. Cafaro et al. (2023) discuss how both physical and sexual assault, like serious accidents that pose

a threat to life, can have significant negative impacts on the individuals involved. These incidences not only raise concerns about safety but also leave enduring traumatic impressions on victims.

Childhood trauma leaves a significant imprint on children's lives, as numerous studies have demonstrated (Christian-Brandt et al., 2020). Connections can be drawn between childhood traumatic experiences and an array of negative outcomes. Their academic performance may falter as stress levels rise in response to the trauma; they also stand higher chances of receiving referrals for individualized education programs due to learning or behavioral issues. To broaden the understanding of 'trauma,' researchers are beginning to factor in what is known as “insidious trauma” (Karatzias et al., 2020, p. 4). This term encompasses damage inflicted by systemic inequalities—a concept common within the critical trauma research landscape. Insidious trauma defines a genre of trauma experiences encompassing traumas within the student population. These include effects from poverty, discrimination, and racial and generational trauma inflicted by the school system itself. However, it laments that common definitions do not take these types of situations into account adequately.

Schools are starting to address the effects of traumatic events on students by introducing trauma-informed practices (Castro et al., 2022; Christian-Brandt et al., 2020). The support for those implementing this care is increasing, recognizing that they can also experience secondary stress from their pupils' experiences. Teachers spend a significant amount of time with their students and, therefore, have deep insights into them, which may even expose teachers to continuous inflictions through witnessing student traumas. However, it has been observed that school staff often feel inadequate in dealing with affected students (Gallagher, 2019).

Previous research on teacher stress has mainly focused on the impact of school-related factors like policy implementation and specific requirements for teachers (Sprang & Garcia, 2022). Although there have been studies examining the direct impacts of stress, this study investigates secondary traumatic stress in educators, which is triggered by learning about their students' trauma experiences (Karatzias et al., 2020; Stevens et al., 2019). Current research has found the impact of secondary traumatic stress on teachers, noting that it can cause significant burnout, as seen in other helping professions. Research also indicates a need for further exploring which demographic groups within the teaching profession are most affected by this kind of stress (Castro et al., 2022).

There is much exploration into the application of Secondary Traumatic Stress (STS) studies, largely rooted in psychology and associated fields like nursing or social work (Sprang & Garcia, 2022). However, these applications do not translate directly to an educational context due to stark differences between these domains' operating environments, and little research has been conducted on the educational realm (Brown et al., 2020). Exploring coping strategies often implemented for STS, which focus on both individual interventions and organizational adaptations, can be beneficial for educators and the education society (Gallagher, 2019). Some methods may be applicable within a school environment, while some might cause adverse effects rather than benefits, such as spending less time with students or shifting teachers from frontline roles, which are considered non-viable options that could potentially harm more than help. Adequate research is needed to determine the effects of STS on educators and appropriate intervention methods (Stevens et al., 2019).

Schools as Facilitators of Mental Health

Clayborne et al. (2019) stated, "Poor mental health can have a serious adverse impact on

youth wellbeing and future success” (p. 1). As a result, more educators and medical experts are recognizing that one of the most important requirements of adolescents is mental health (American Academy of Pediatrics, 2021). Sanchez et al. (2018) reported the ability of schools to establish comprehensive school mental health (SMH) systems must be developed and strengthened in order to effectively and sustainably meet students' mental health needs. SMH systems organize services to support student's social and emotional growth, which may positively and enduringly influence juvenile behavior, accomplishment, and well-being.

Larson et al. (2017) pointed out that “schools are an important point of contact for the prevention, identification, and treatment of mental health issues and disorders” (p. 676). Schools are often the first point of contact for students in need of mental health assistance, with approximately one in five children requiring services. Schools provide the perfect setting for providing mental health treatments, as attendance is required and schools may be less stigmatizing for families compared to hospitals or clinics (Raval et al., 2019). The school sector provides treatment for about 70% of children who receive mental health services. However, the number of kids in need still exceeds the supply.

The increasing mental health requirements of K–12 children, especially since the start of the COVID-19 epidemic, necessitate that schools make the most of the professional development of their present staff in order to offer mental health programs in an organized and effective way (Zabek et al., 2022). The pandemic's effects, such as increasing young people’s mental health needs, knowledge loss and dealing with grief or family stress, have demonstrated the potential of school-based mental health partnerships (O’Malley et al., 2023). This model could offer much-needed support in handling crises efficiently. Enhancing how these services are delivered in schools can be done by refining policies and practices, sharing successful programs to guide

other districts, encouraging involvement from school management teams and fostering staff independence for well-being across all care sectors is also important (Sanchez et al., 2018). Future studies should explore effective partnership examples within this framework, especially those characteristics that might influence the continued use of mental health crisis interventions over time at the system or program level (O'Malley et al., 2023; Zabek et al., 2022).

Professional Development

Teachers are key in supporting students' mental health, but studies reveal many do not feel equipped for this due to a lack of training (Anderson et al., 2021; Wei et al., 2020). The need for teachers to understand these issues is emphasized by various researchers noting that tackling classroom struggles often starts with the teacher's observation and action (Carr et al., 2017). Increasing teachers' understanding of maintaining mental wellness, their own and others', and increasing knowledge of ailments, including depression or anxiety, can be beneficial to teacher wellness (Kutcher et al., 2015; Milin et al., 2016). Reports highlight interventions via professional improvement sessions and teaching materials introduced into daily curriculum dramatically bolstered recognition of good psychological health effects among educators as well as youth (Berger & Martin, 2020; Carr et al., 2017).

Schools tend to be the main source of mental health services for children and young people, providing between 70% - 80% of all psychosocial assistance they receive (Wei et al., 2020). Yet, this approach is not generally successful for kids with disruptive behavior disorders (those often flagged by school referrals), especially those in low-income city schools, because there is a lack of training among school staff (Bland & Gershwin, 2023; Carr et al., 2017). Providing educators with trauma training will allow them to meet the needs of their students more effectively (McIntyre et al., 2019). To become a trauma-informed school, there is a

significant need for support from all personnel, including administration and teachers. Foundational professional development (FPD) is a common method for implementing comprehensive school system efforts (McIntyre et al., 2019). An orientation program for teachers (FPD) introduces new initiatives to staff, inspiring them to incorporate them into lesson plans and school rules. Teachers' excitement and drive to adopt new techniques may increase with increased understanding of trauma and trauma-informed practices. Child-teacher relationship training (CTRT) is another program that instructs teachers in fundamental play therapy practices (Opiola et al., 2020). CTRT empowers teachers to act as catalysts for change in their pupils' lives. School counselors can focus on children with more complicated problems by working with teachers to better understand and react to students. CTRT involves two stages: Phase 1, which consists of eleven weeks of 30-minute training sessions, and Phase 2, which includes one 45-minute weekly class coaching session and an additional 11 weeks of training. Despite the promising outcomes of CTRT, the duration of instruction makes it difficult to implement in a public school system (Opiola et al., 2020). Nonetheless, schools need to provide adequate training on behavioral methods and trauma to support trauma-informed practices.

Glazzard and Rose (2019) stated that more studies were needed to determine a relationship between teacher professional development and the impact on student's well-being. The researchers went on to report that the most significant opportunity and obstacle for future research lies in surpassing the current snapshot-style approach to delve into deeper reciprocal links between educators and pupils' well-being (Brown et al., 2020). This scope would require more than a single measuring point. Employing contemporary data-gathering techniques could shed fresh light on how teachers and students are impacting each other's lives (Glazzard & Rose (2019).

Emotional Support for Teachers

School leaders have an important role in dealing with mental health issues experienced within their buildings (Gallagher et al., 2019). A significant problem present across the United States is related to the emotional wellness of teachers and students alike. It is worth noting that a staggering 75% of instructors expressed that they often encounter stressful situations at work, which compares unfavorably to just 40% reported by other working adults (Steiner & Woo, 2021). Not only are these stress levels worrying, but there is also a concern that educators who have endured STS also showed symptoms reminiscent of depressive disorders. Drawing on these alarming findings, Steiner and Woo (2021) proposed several solutions for staff alongside school principals and classroom educators. This involves creating extensive mental health initiatives focusing on promoting overall well-being among educational workers. In response to such growing problems, many resourceful administrators have already been making substantial efforts to meet their staff's needs (Christian-Brandt et al., 2020). To alleviate workplace stress, administrators are increasingly employing mental health clinicians. Positions such as mental health specialists and social workers have become significantly important (Pataky et al., 2019). These school-based clinicians offer access to professional support for student and staff welfare while also forming crucial links with external mental health agencies.

Research conducted by Fraenholtz et al. (2015) found that despite recognizing the necessity for mental health assistance, school personnel often feel unequipped to handle students' mental health requirements. The study suggested that teachers frequently find themselves lacking adequate training or feeling ill-prepared when faced with a need to intervene in such matters. Interestingly, it was observed that educators experiencing less professional exhaustion and

possessing higher compassion satisfaction deemed counseling approaches more beneficial (Castro Schepers & Young, 2022).

With this backdrop of increasing demand for robust initiatives addressing students' mental wellness across institutions nationwide, roles like mental health coordinators are being conceived (Cafaro et al., 2023; Frauenholtz et al., 2015). These professionals work closely not only within faculty bodies but also involve community collaborators along with parents/guardians in promoting awareness around what essentially can be termed psychological wellbeing (Castro Schepers & Young, 2022). Fighting against societal taboos attached to seeking help is one of their many tasks.

In recent years, efforts aimed at enhancing access points through which elementary students could receive various kinds of psychological aid - both on campuses and within the community (Gallaher et al., 2019; Pataky et al., 2019). Alongside these ground-level steps, policy changes on a structural scale continue evolving, too, towards embracing positive change. In December 2021, the U.S. Surgeon General made public recommendations referring specifically to a mental-health-crisis, advocating enhancement of resources under existing school-based healthcare programs (US Surgeon General, 2021). Examples include recruitment and skill development avenues providing explicit roles, including guidance counselors, medical nurses, and social workers, focusing on school support, followed by dedicated clinical psychologists working primarily out of educational institutes.

Self-Care

Secondary traumatic stress (STS) is a significant issue that affects both professional and personal lives, particularly in the context of teachers who are dealing with traumatized individuals (McMakin et al., 2022). The symptoms experienced by staff members can make it

difficult for them to collaborate with students. To alleviate STS symptoms, various strategies are recommended, including self-care activities aimed at enhancing health, preventing illness, or preserving well-being (McMakin et al., 2022; Nelson et al., 2018).

Research on the effects of coping methods on self-care of caregivers for traumatized individuals is limited (Butler et al., 2019). However, self-care is a critical practice for professionals to enhance their well-being and increase job performance, centering around activities that are meaningful and enjoyable. This approach should be personalized since it does not have universal applicability; the selection of coping strategies depends on one's personal circumstances. Commitment to self-care can lead to self-improvement. Lewis and King (2019) specify that integrating self-care tactics like deep breathing or grounding techniques into the routines of school educators may combat compassion fatigue, burnout, and vicarious trauma effectively, thus elevating their professionalism.

Yoga is an effective self-care strategy for enhancing social connectedness and promoting wellness among professionals, especially when complemented by peer consultation and collaboration among colleagues (Lewis & King, 2019). In addition to reducing personal issues and countertransference through these best-practice strategies, professional educators can manage trauma effectively while maintaining connection with their students. They face challenges such as burnout and compassion fatigue due to numerous stories shared by students about their abuse or fear, which negatively influence them, leading to vicarious trauma. To address these influences properly without affecting one's well-being adversely, it is proposed to use regular self-reflection, viewed as beneficial for educators to prevent excessive symptoms related to burnout (Briere & Scott, 2015; Evans & Graves, 2018; Schepers, 2023).

School educators' self-care regimen is a crucial part of their overall performance and effectiveness. This involves maintaining good physical health by engaging in regular exercise, having frequent wellness checkups, and maintaining proper nutrition (Nelson et al., 2018.) More important, though, is the importance of mental well-being with mindfulness highlighted as an essential aspect of successful self-care achieved through efforts like meditation resulting to increased awareness without judgment on individual perception of care (Lewis & King, 2019). Educators also stand to benefit from peer influence and collaboration, which can provide emotional support that contributes towards personal wellness.

The effectiveness and performance of an educator can suffer if they fail to recognize triggers and respond negatively to situations, particularly during crises (McMakin et al., 2022). In school settings, classroom teachers, alongside administrators, are the primary points of contact when a crisis arises. When dealing with students undergoing trauma, the inability to efficiently handle these situations could pose harmful impacts on both personal and professional levels for the teacher, especially without adequate self-care practices (Briere & Scott, 2015; Schepers, 2023). Engaging mindfully in work-related tasks while promoting well-being through daily activities can boost wellness as well as increase an individual's awareness of one's state (McMakin et al., 2022).

Navigating through trauma does not come with a universal blueprint for pinpointing the challenges that may arise for classroom teachers. Implementing strategies of self-care serves as a crucial aid to buffer against the impacts engendered by routinely dealing with students battling traumatic experiences (Butler et al., 2019).

Summary

Secondary trauma is a phenomenon that affects first responders, including teachers, counselors, and therapists. However, research on the effects of secondary trauma on educators is limited, with most studies focusing on first responders and therapists (Eads, 2023). Burnette and Wall (2015) found that educators felt underprepared for their jobs and recommended more training on dealing with traumatized students. Further studies are needed to confirm the results and gain a deeper understanding of the phenomenon.

Educators may undergo short-term or long-term changes in their perception of the world due to their interactions with traumatized children (Kapoulitsas & Corcoran, 2015). Raising awareness in the education sector is crucial, as it helps establish policies and practices that meet the needs of classroom educators. This research examines the lived experiences of elementary school teachers who interact with traumatized children, their impact on the exposure, and their handling of information about their pupils' experiences.

Vicarious traumatization refers to persistent negative trauma caused by sympathetic interaction with a person who has direct experience of a traumatic event (Foreman, 2018). School educators are often impacted by vicarious trauma, which can negatively impact their personal and professional lives. Research on secondary trauma and raising awareness of the problem are essential. School educators can also be vulnerable to additional conditions such as “burnout, compassion fatigue, and secondary traumatic stress disorder” (Pryce et al., 2021, p. 40).

Many strategies and treatments are thought to help reduce the impact of these problems on classroom teachers. Self-care techniques exist for school educators working with traumatized adolescents, and becoming self-aware and knowledgeable about the signs of secondary trauma

can help them be proactive in preventing trauma exposure (Nelson et al., 2018). Specific research questions investigated throughout this review include: How do elementary educators make meaning of secondary traumatic stress (STS) caused by interactions with students with traumatic lived experiences? How do educators experiencing secondary traumatic stress perceive the training available to them to mitigate the effects of STS? How do educators experience and interpret their use of self-care in managing encounters with students who have experienced trauma? The researcher also explored other strategies for reducing susceptibility and steered classroom teachers towards enhancing their careers and well-being. There is ample evidence of secondary trauma among different professions, including social workers and first responders (Kelly, 2020). There is currently little research on its effects on educators (Cafaro et al., 2023).

Chapter Three: Methods

Overview

The purpose of this phenomenological study was to understand the central phenomenon of elementary educators recognizing their lived experiences of secondary traumatic stress and investigate their self-care techniques. This study investigated the experiences of school educators affected by secondary trauma through a qualitative hermeneutic phenomenological design. This methodology emphasizes the participants' perspectives and excludes researcher input from the narrative (Nigar, 2019). It involved hermeneutic phenomenology as both a philosophical and research tool to interpret individuals' unique understanding of their lived experiences (Creely, 2016). This research intended to learn how educators handle and deal with these real-world situations.

This phenomenological study investigated schoolteachers' experiences, with a particular focus on secondary trauma. The literature review revealed extensive research into this phenomenon among other helping professions, such as mental health professionals, but not specifically for classroom teachers (Martins et al., 2019). Therefore, the phenomenology methodology was chosen as it allowed analysis from the perspectives of these individuals who were directly experiencing such traumas. Creswell (2013) explains, "A phenomenological study describes the common meaning for several individuals of their lived experiences of a concept or phenomenon" (p. 76). The focus of this research was to understand educators' experiences with secondary trauma. This area currently lacks extensive study, thereby not giving teachers a platform to express their first-hand experiences and insights on this subject matter.

The content covered in Chapter Three include details about its design, posed research questions, the setting, and participants' pertinent procedures carried out throughout the project

along with the investigator's role. Additionally, elements like data collection and analysis techniques along with trustworthiness measures were taken with any ethical concerns.

This research hoped to explore the lived experiences of teachers who have experienced STS from students in their classrooms.

Design

The study was a qualitative exploration that employed a phenomenological approach to investigate the lived experiences of classroom teachers who have endured secondary traumatic from their students. Moustakas (1994) described the phenomenological approach as “detached from any personal presuppositions by eliminating interferences” (p.74). Given that these incidents cannot be definitively measured, the choice for a qualitative research design allowed the examination of educators' concepts, opinions, and encounters rather than the numerical analysis offered by quantitative research (Merriam & Tisdell, 2016). The researchers opted for hermeneutic phenomenology due to its ability to encapsulate participants' real-life experience with STS, their perception of available training resources, self-care practices and how personal interactions with learners influence them as educators (Nigar, 2019). The text outlined the suitability of a phenomenological approach for this research. This method was chosen as it is valuable in examining and understanding human science's fundamental elements, acting as underpinning knowledge foundations (Moustakas, 1994).

A phenomenological study aims to understand the experiences of individuals and how these impact their perception and experience of life, as it believes there is a commonality in all human experiences that can be captured (Creswell & Poth, 2018). This essence of shared experience can then be identified, scrutinized, and analyzed through specific phenomenological methods. Diving deep into the world of educational studies, this research work specifically

explored phenomenologically. Framed as a hermeneutic study, it casted light on the influence of STS (Secondary Traumatic Stress) among classroom teachers that brought forth an undiscussed facet of teacher student dynamics (Kinkaid, 2021).

This was a phenomenological study that used the hermeneutical approach to describe and interpret participants' lived experiences. Phenomenology focused on explaining social experiences or phenomena from the participants' perspective (Creely, 2016). This study involved understanding social phenomena, aspects of global reality, behaviors, and opinions in society as well as identifying the role societal influence played on these occurrences. It was developed by Husserl in the early 1900s to understand human experience deeply (Creely, 2016; Nigar, 2019). Although initially vague about its goals, over time it has been clarified that unlike other methods aiming at explanation or evaluation (like quantitative ones), phenomenology's primary objective was understanding a phenomenon as exemplified through an ongoing study regarding how teachers make meaning of secondary trauma (Lindseth & Norbeth, 2021).

This study applied Creswell and Poth's (2018) attributes of qualitative research to explore teachers' impact of STS. The focus was understanding a single social phenomenon – the phenomenon of STS on teachers from students who have experienced trauma. Study methods included direct academically targeted inquiries, along with open-ended questions during interviews for free expression about their experiences. Multiple data collection techniques were employed to ensure accuracy through the triangulation process. Data was also gathered firsthand due to the researcher's personal experience with similar traumas, contributing additional depth and perspective.

Hermeneutic Phenomenological Design

Nigar (2019) distinguished between three methods for carrying out phenomenological

research: interpretative phenomenology, hermeneutic phenomenology, and descriptive phenomenology. "Explore and describe the essential structure of an experience in terms of the phenomena" was the goal of the researcher using descriptive phenomenology (Porter & Cohen, 2013, p. 182). Researchers from a variety of fields often used this methodology, which was frequently connected to the writings. Phenomenological research emphasizes the importance of not presuming knowledge about a topic, but rather guiding the study without assumptions (Moustakas, 1994). Researchers using interpretive phenomenology aimed to comprehend and analyze the participants' experiences (Merriam & Tisdell, 2016). By considering individuals' perceptions of their lifestyles and learning to comprehend the phenomena's experiences, hermeneutic phenomenology researchers go a step further and mix elements of both hermeneutic and descriptive senses (Nigar, 2016).

Hermeneutical phenomenology is a method that tries to create an all-encompassing interpretive narrative of human experiences while recognizing their complexities (Lindseth & Norberg, 2021). It considers our interaction with the development of the meaning behind these phenomena over time, differentiating it from other methodologies by focusing on providing insightful descriptions without any form of labeling or conceptualizing. This approach aims at divulging minor yet significant aspects often undiscovered in daily life and accepts that human consciousness cannot be disentangled from experience as they intertwine closely. The interpretation of lived experience is not inferred unless explicitly expressed. Lindseth and Norberg's (2021) study explored the role of storytelling and reflection in attributing meaning to personal experiences. According to their research, an experience alone lacks inherent meaning. Instead, it is through sharing or recalling those experiences that understanding is reached, giving

significance to these incidents. Their research specifically tackles the interpersonal childhood phenomena.

The study focused on understanding how teachers make meaning of STS. The target was to grasp these experiences from individual perspectives, thus creating meaning from their narratives rather than relying on other methodologies. Hermeneutic phenomenology was employed as an effective tool for realizing this goal because it aids in determining how STS shapes educators as a professional and how educators perceive the trauma training, they may be receiving (Merriam & Tisdell, 2016; Nigar, 2019).

To ascertain the "essence of each participant's experiences and perceptions of a phenomenon and make meaning by discovering similarities and differences among the cases" a phenomenological design will be used (Glesne, 2016, p. 290). First-person reports from casual and formal talks and interviews are the primary source of data used in phenomenological research, providing scientific insights (Creswell & Creswell, 2018). When researchers use phenomenological approaches to study this phenomenon—about which there is presently little research—the voices of individuals who are suffering secondary trauma become more visible (Creely, 2016).

Research Questions

1. How do elementary educators make meaning of secondary traumatic stress (STS) caused by interactions with students with traumatic lived experiences? Research has shown that symptoms of secondary traumatic stress (STS) can lead to significant emotional and work-related troubles. This made it important to understand how this influenced the ways teachers communicate with students in their routine job responsibilities (Figley, 2013). Given teaching is highly interactive by nature - a constant task of establishing heartfelt

connections with individual students and families – this setting provides many instances for teachers interacting daily to become aware about student trauma incidents via these encounters (Hydon et al., 2015).

2. How do educators experiencing secondary traumatic stress perceive the training available to them to mitigate the effects of STS? Educators spend the majority of their day interacting with young people yet receive minimal training in handling vicarious traumatization (Jennings, 2017). The impact of Secondary Traumatic Stress (STS) on teacher-student relationships and students' socio-emotional functioning remains largely unexplored. Previous research across other care-focused professions has revealed that working closely with trauma-exposed individuals can result in noteworthy social, emotional and occupational impairments for these caregivers (Kanno & Giddings, 2017).
3. How do educators experience and interpret their use of self-care in managing encounters with students who have experienced trauma? Studies have shown that secondary traumatic stress (STS) can lead to burnout, weaken a professional's self-efficacy and impair interpersonal relationships if not properly managed with daily self-care techniques (Kelly 2020). This is particularly noticeable in the social service professions. For instance, qualitative research found that out of six teachers working with traumatized students, five reported distancing themselves emotionally from children as well as avoiding forming close bonds due to the emotional strain involved (Larson et al., 2017).

Setting

The real-life experiences of educators in diverse school settings was the main subject of this research. In line with deliberate criteria sampling, participants were chosen via personal and professional networking. Interactions with those participating were secure and

genuine due to this method. Pseudonyms were used in this research to maintain participant confidentiality, safeguard their identities, and conceal their place of work. Prospective volunteers responded to a 10-minute screening questionnaire with inquiries regarding their experiences working with traumatized adolescents in schools in order to be eligible for the research. The volunteers who were suitable for the research were chosen using this screening method. Schools utilized for this study were open to all elementary schools within the Southeastern Tennessee

The participants' homes, workplaces, or schools were taken into consideration while choosing the interview settings. To encourage a special relationship between those being interviewed and the researcher, the interview procedure was socially built and organic (Pope & Mays, 2020). The researcher conducted the interviews using Zoom software, which allowed for contact between different places.

Participants

This component discussed the parameters and techniques used in this study's sampling strategy. The elements detailed include the size of the sample, its type and source pool, as well as methods applied during selection procedures (Merriam & Tisdell, 2016). It also mentioned demographic data such as age, gender, and race/ethnicity that will be gathered for analysis purposes within this research endeavor. Further reference will be made to inclusion/exclusion criteria and screening protocols for possible participants before including them in this investigation process.

Sample

For this qualitative study, 10-15 individuals were chosen to participate with the goal of 12 possible participants. This value was determined as five samples did not reach data saturation,

while 10 was still insufficient (Merriam & Tisdell, 2016). Conducting interviews with 10-15 individuals provided sufficient detail and perspective on the themes under investigation.

This research utilized a purposeful sampling method to gather participants that fit the study's requirements (Creswell & Poth, 2018). Participants had to meet certain requirements, possessing a current teaching license, and having experience dealing with traumatized adolescents in a K-5 educational context. There were preconditions such as access and proficiency in using relevant technology for online discussions independently. Those not meeting all criteria were dismissed from participation (Creswell & Creswell, 2018). The purposeful method of study was to draw on a sample of participants based on convenience. This method was used for recruitment and screening processes and to save time and resources (Merriam & Tisdell, 2016). The invitation was disseminated through posts across social media that Southeastern Tennessee teachers participated in and that were relevant to the topic. Social media groups included Teachers of TN public Facebook group, Tennessee Teachers private Facebook group, and Support Your Tennessee Teachers public Facebook group. In addition to social media permission was obtained from Cleveland City Schools for use of employees' email to recruit participants for the study. Teachers received an email letter from Cleveland City School administration, detailing the objectives of the research and the informed consent procedure. A phone contact to address any concerns the instructors have came after initial contact (Creswell & Poth, 2018).

To reach more participants, snowball sampling was also utilized. Key individuals suggested possible participants using snowball sampling (Patton, 2015). Educators who have worked with traumatized students and who fit the selection criteria required the use of snowball sampling (Patton, 2015). An invitation post was sent out, outlining the purpose of the research

and detailing who can participate, based on certain conditions. Those interested were urged to confirm they fulfill the prerequisites prior to participation.

The study involved participants who needed to self-verify that they meet certain outlined inclusion and exclusion criteria. This was checked during the intake process and before an interview, where their eligibility for participation, including safety aspects, was confirmed. Participants also verified if they have undergone therapy related to events due for discussion in the interview, as well as having access to a support system. To ensure confidentiality, every participant was assigned or allowed to choose a pseudonym; this measure of confidentiality was explained at the time of verbal consent before the interviews.

Inclusion Criteria

The study's sample population was comprised of 12 adults who have had interactions with one or more students that have encountered at least one traumatic event. Given possible distress from discussing such sensitive topics, only participants comfortable talking about their past or currently undergoing or having undergone counseling were selected for the survey to prevent severe emotional turmoil triggered by disclosing their potential secondary trauma for the first time (Creely, 2016).

The study involved participants of all genders to comprehend how STS affects various genders regarding their views and experiences related to working with traumatized students. The decision not to segregate participants into traditional binary genders was made considering contemporary understandings of gender, acknowledging that some promising candidates might not conform to these conventional roles (Creswell & Poth, 2018).

The text emphasized that race and ethnicity were not factors for screening or inclusion in a particular study (Nigar, 2019). If there was variety within the racial, ethnic, or cultural

backgrounds of participants, the impact of such diversity was analyzed when processing the data to establish its effect on the results obtained (Creswell & Creswell, 2018). Encapsulation of diverse perspectives was appreciated as it enhances precision in acquired information by benefiting from having multicultural sample populations. There was a requirement for individuals to be involved in a video-based interview. Access to suitable technology such as phones, computers or tablets with high-quality audio and video was necessary. A stable internet connection to ensure seamless communication was also required along with a private space where the individual could conduct interviews without interruptions or being overheard.

Exclusion Criteria

The study excluded individuals who do not have a valid teaching license as the goal is to understand the lived experiences of current classroom teachers. Individuals that have not experienced working with students who have endured trauma were also excluded. Individuals who have never addressed their STS were not able to participate in this study. This exclusion was done to prevent emotional distress and re-traumatization among participants. Individuals having suicidal thoughts/self-harming behaviors were also left out for safety reasons. Criteria for the study further included technological access; anyone without high-quality audio/video technology or a stable internet connection in private locations were omitted due to the sampling requirements of the research.

Procedures

The Institutional Review Board (IRB) gave permission before participants were chosen for the study through purposeful sampling. Advertising for participants was posted on social media, and participants were contacted via email using personal and professional connections to express interest in the research. They were informed about the study's potential hazards,

confidentiality guarantee, and data collection purpose. Participants were voluntary and could have discontinued at any time. Twelve participants was the target population, advertising for participants through social media and screening interested parties before sampling them.

Interview questions were pre-tested with volunteers to ensure their effectiveness during actual interviews. Based on Merriam and Tisdell's (2016) guidelines, a total of 10-15 individuals participated in this qualitative research, which aligned within the recommended range between 5-25 participants based on guidelines, ensuring adequate data saturation tailored towards targeted phenomena under investigation.

In research data saturation was the point when newly collected data does not bring new insight. This happened when recurring themes are noticed in participants' responses, as defined by Merriam and Tisdell (2016). It was suggested that phenomenological research should involve at least 10 participants to reach this level of saturation. The collection procedure included frequent reviews after each interview to ascertain if adequate saturation had been reached.

Participants completed a prequalifying screening instrument and signed a document indicating their informed consent. Interviews were conducted using Zoom software, and participants were asked about their experiences working with traumatized children as school educators. Data on demographics was gathered, including years of experience, degree, license, and certification. Audio recordings were stored and professionally transcribed, and participants received a copy of their transcript via email. Participants were invited to participate in an accuracy-checking member-checking review before the data was completed. The study aimed to provide valuable insights into the experiences of educators working with traumatized children.

Screening

In the research study, participation was determined through a self-screening process in

the invitation. Only individuals who give affirmative responses to all screening questions were included in the study.

For purposes of this study: Secondary Traumatic Stress is defined as the behaviors that arise due to knowledge of a traumatic event experienced by a student in one's classroom.

1. Have you interacted with a learner who has faced one or multiple traumatic events?
2. Have you experienced distressing recollections or discomfort related to the trauma the student(s) have endured?
3. Have you had any feeling of emotional numbness?
4. Do you tend to avoid anything that stirs memories of the troubling event that was shared with you?
5. Have you thought about your students and their trauma when you did not intend to do so?
6. Have you had any trouble struggling to focus on daily work task?
7. Are you willing and open to discuss your experiences with learners who have encountered one more or more traumatic events?
8. Have you shared your experiences with others including family, friends, or a mental health professional?
9. Are resources like high-speed online connection and computer/phone/tablet capable of supporting Zoom video calls along with access to personal space for such discussions available at your disposal?

Researcher's Role

The purpose of this qualitative study was to explore educators' actual experiences in assisting traumatized adolescents. I work in Tennessee as a behavior support for elementary schools with a program entitled Trauma and Behavior (TAB). I have spent 16 years working

with elementary students. As a behavior support for students with trauma as well as a personal background of my trauma, the goal of qualitative research was to provide an unbiased explanation of an individual's experiences. It was essential for me to define my function as a researcher to make sure that my viewpoint did not influence or control the main points of the investigation. Throughout this research, I functioned as a human instrument to obtain a thorough knowledge of the experiences of educators with secondary trauma.

As a behavior support interventionist, I am regularly faced with stressful circumstances at work as a result of children confiding in me about their horrific experiences on a regular basis. Despite having personally encountered this phenomenon, I maintained my objectivity throughout the research and made use of reflective journaling techniques. To address possible bias, I developed a standardized methodology that includes peer evaluations, member-checking, and verbatim transcriptions of interviews. Having worked with the occurrence of secondary trauma as a researcher, I knew I must take a neutral position and let the participant's experiences enrich the research. I recorded first-hand experiences encountered during the study by applying reflexive thinking (Creswell & Creswell, 2018).

I put my personal opinions aside throughout the interview process and concentrated on the participants' real-life experiences. Giving each contributor the chance to share their experience of secondary trauma was crucial because different people were affected by this phenomenon in various ways. Throughout the interview, I deliberately communicated with the participants both verbally and nonverbally. I was careful to avoid influencing the participants' answers (Patton, 2015). The researcher's prior experiences facilitated a connection to the research, whether it was regarding the environment, population, or culture under investigation (Creswell & Creswell, 2018).

Data Collection

In this phenomenological study, information was gathered through a series of thoughtful and effective semi-structured interviews. The questions were designed to evoke responses relevant to the investigation's queries (Merriam & Tisdell, 2016). This method offered both standardization for all participants and flexibility in acquiring clear explanations if needed.

By opting for an interview format rather than focus groups or questionnaires used by others previously collected material, firsthand experiences that have confidentiality will bring more depth to their accounts that might be sensitive (Klem et al., 2022). Utilizing video interviewing with Zoom handled any distance issues between respondents assuring convenience and no disruptions ensuring privacy during these detailed discussions. Before beginning each discussion, consent was obtained from every individual before audio/video recording them.

Participants had the choice to give consent for both audio and video recording during their interview sessions (Merriam & Tisdell, 2016). They also settled solely for an audio recording if preferred. The task of transcribing these recordings was fulfilled with the help of Zoom although all transcripts underwent manual verification later.

Employing a semi-structured format made it possible to maintain consistency across each participant's account while still preserving room for obtaining clearer insights into any information disclosed by participants involved in this process (Klem, 2022). In lieu of limiting responses via yes/no type questions, this technique prioritized open-ended queries allowing individuals complete freedom while sharing personal experiences encountered within this context.

All information collected was securely stored electronically on a computer that is encrypted - ensuring safekeeping of sensitive data files. Furthermore, names used during this

study were replaced with pseudonyms as another layer of protection towards maintaining confidentiality among research participants. Any printed documents produced were stored in a locked cabinet until they were shredded at the end of the research. Interviews came forth as fundamental methods of data collection throughout qualitative studies.

Interviews

This qualitative phenomenological study used interviews as its sole data collection method. The topic was the experience of secondary trauma in educators working with traumatized students, including their self-care practices. Broad questions eliciting detailed, reflective descriptions was utilized to gain insight into the nature of this phenomenon (Moustakas, 1994). These sessions took place on Zoom and last between 30-60 minutes each depending upon session requirements; consequently, a premium membership upgrade on Zoom ensured no interruptions during potentially long conversations or impact from time limit restrictions. The recordings were stored for future review and transcription services use. The inclusion of open-ended questions further enriched knowledge about experiences related to traumatic exposure in educational settings.

The participants of the study were asked semi-structured, open-ended questions in qualitative research setting that encourages open dialogue and investigation. Interviews started with queries about demographics and background to form positive rapport amongst individuals involved within an environment they find comfortable. Participants were be notified their before the interview that their interactions were virtual, and recorded, but optional for participation throughout the research process. After gaining permission from each participant, sessions were recorded and then transcribed word-for-word later for data evaluation purposes, during which the researcher noted attitudes or gestures observed as well other impressions from the session.

A demographic sheet is in Appendix E to introduce the study and to provide introduction questions.

Standardized Open-Ended Semi-Structured Interview Questions

Secondary Traumatic Stress

1. What methods do you utilize to become more aware of your students' experiences relating to trauma?
2. Would it be possible for you to recount a specific incident involving one student who had experienced trauma?
3. Can you detail how this particular encounter was processed at the moment and in its aftermath?

Professional Development

4. Describe your personal experience with secondary traumatic stress as an educator and how it has impacted your professional and personal life.
5. What specific training or resources have you accessed or been provided with to address secondary traumatic stress in your role as an educator?
6. How effective do you perceive the current training programs to be in mitigating the effects of STS? Can you provide examples of strategies or techniques you found particularly helpful or ineffective?
7. Have you noticed any gaps or areas for improvement in the STS training available to educators? If so, what suggestions do you have for enhancing these programs?
8. In your opinion, what role should educational institutions and administrators play in supporting educators experiencing secondary traumatic stress beyond providing training?

Self -Care

9. As an educator how would you describe self-care?
10. Can you share any activities that have been a part of your routine or those that are presently serving to enhance this sense of well-being?
11. Could you articulate the advantages of adopting practices focused on sustaining oneself physically and mentally?

Shaping their Roles as Educators

12. What unique difficulties have you faced in supporting students who have been through traumatic events?
13. How have the distressing events encountered by your students influenced your instructional approach?
14. Have you experienced increased levels of stress in your job as a result of interacting with students who have endured traumatic experiences?
15. As an educator do you feel that the students who have endured trauma receive more or less support from you throughout the school day?

Concluding Questions

16. Would you like to share any other experiences, memories, or situations involving traumatized children?
17. Are there any other questions or observations you would like to share?

The research made use of probing methods such as encouraging further elaboration with phrases like "Please explain" and "Could you clarify". These were based on the reactions of those being interviewed. Questions on the demographics sheet in Appendix E are knowledge questions (Patton, 2015). They offer an opportunity for rapport development between the

researcher and participants, thereby creating a space that is friendly enough to conduct subsequent dialogue successfully. These knowledge questions have special traits: they are direct-to-the-point, come across non-threateningly, and play pivotal roles in fostering positive connections expressly (Patton, 2015).

Castro Schepers and Young (2022) discussed the importance of educators reflecting on their own experiences with secondary trauma. Questions one to three are aimed at exploring these first-hand accounts and assessing how they have affected one's professional life. Educators must be aware of STS and how it impacts the classroom (Klusmann et al., 2016). When teachers have an ongoing self-analysis of personal experiences along with analyses of personal beliefs and religious worldviews, they are more equipped to process secondary trauma (Sprang & Garcia, 2022).

Questions four through eight examined the way educators perceive the professional development that is available to them within their school. For educators to be prepared when dealing with students' trauma, they need the necessary tools (Wei et al., 2020). Providing educators with the proper training regarding student trauma will allow them to be more effective educators (Brown et al., 2020). According to Wei et al. (2020), the school system is the designated party when providing mental health services to students; however, teachers often feel they are unprepared to provide the needed services. Question six allowed educators to discuss if they feel the current training they are receiving is sufficient and effective while question seven discussed the current gaps in the professional development modules.

To lessen the symptoms of STS, many self-care techniques are suggested including mindfulness and yoga (Nelson et al., 2018). Questions 9-11 explored how educators are currently

utilizing self-care techniques. Lewis and King (2019) explained that self-care techniques such as deep breathing and grounding exercises can help alleviate the stressors of secondary trauma.

Questions 12-15 provided insights into how STS shapes an educator's classroom instruction. Classroom instructors often feel unprepared to deal with the daily stressors of working with traumatized children (Wall, 2015). Question 14 allowed educators to express the amount of stress they have felt while working with traumatized students. Classroom teachers can be vulnerable to burnout, compassion fatigue, and vicarious trauma when they are unprepared to work with students who have endured traumas. Question 16-17 allowed educators to share other information with the interviewer and gave participants an opportunity to ask questions.

Data Analysis

Data coding and organization were both part of the data analysis process. As the first loop in the spiral, managing the data management entailed organizing the data itself first. At the start of the analytical process, researchers often organize their data into digital files (Creswell & Poth, 2018). The data collection method (e.g., digital files, digital photos, software program uploads) must be selected by the researcher (Creswell & Poth, 2018). Every interview's audio recording was transcribed into an electronic file.

The gathered data was coded and analyzed using a thematic analysis process. The researcher was able to compare things chronologically. Making plans for long-term storage also had an impact on the research's later analysis (Creswell & Creswell, 2018). In data coding, themes were constructed by reading the data word-for-word and using an inductive approach to generate codes (Creswell & Poth, 2018). Early thoughts and impressions were noted by the researcher, who then allowed labels to combine to create codes that represent many key concepts. Sorting the codes according to their linkages and interconnections lead to the

identification of the major themes (Creswell & Creswell, 2018). This procedure helped ensure that all opinions—even the unexpected ones—were included when drawing findings from the research (Creswell & Poth, 2018).

Trustworthiness

To assure reliability, this study made use of reflexivity, independent researcher evaluation, and member verification. Each participant received a copy of the interview transcript, an opportunity for feedback, and the opportunity to provide their final consent. The study's dependability was enhanced as the data's trustworthiness was raised by carefully gathering participant input via member-checking (Nigar, 2019). Since this study was being conducted by a single researcher, an unbiased researcher will be engaged to examine the interviews. This provided the researchers with the ability to see any fresh topics and work together to ensure that no information is omitted from the investigation (Barrett & Burger, 2021). In addition to discussing the phenomenon, the researcher talked about her experiences working with traumatized children and how those experiences have shaped the way the researcher understands the phenomenon (Creswell & Creswell, 2018). Qualitative researchers need to "position" themselves in their work to uncover the biases, attitudes, and experiences that they bring to their study (Creswell & Poth, 2018).

Credibility

Credibility refers to how accurately the analyzed data reflects original information from participants. To ensure this accuracy, measures such as using direct quotes and implementing member checks for data verification were taken when quotations cannot be applied. The research also incorporated an external audit to confirm both the incoming data and detected themes' reliability further ensuring credibility standards were upheld. Moreover, personal bias issues that

could distort results aligned with beliefs were dealt with by leaning on input from these external audits.

Dependability and Confirmability

Dependability refers to the trustworthiness of data and conclusions made by a researcher, while confirmability represents another person's capacity to verify these without external sources or through replicating the study itself. The author employed strategies such as member checks for verification with participants. The author also used transcription software to transcribe all audio and video interviews and then manually ensure their accuracy. A comprehensive explanation of the study methods provided a pathway for future replication, ensuring dependability and confirmability. The author identified various themes during analysis, which were well-defined and described in detail for comprehension.

Transferability

The concept of transferability refers to the potential for research findings to be applicable in different settings or contexts. In qualitative research, there is a challenge concerning the actual feasibility of transferring real people's experiences from one context to another. Despite this, the researcher strived to present the material persuasively and with relevance that resonates well with readers by providing comprehensive descriptions of sample populations, identified themes, and applied procedures.

Ethical Considerations

The ethics committee must give its approval before using human subjects (Merriam & Tisdell, 2016). The subjects will be teachers and support personnel in schools who work with children who have experienced at least one traumatic event. A request for consent for review and approval was sent to the Internal Review Board (IRB) at Liberty University. After the Internal

Review Board gave official approval, official recruitment letters were distributed. It was essential that the researcher informed possible participants of the study's goal and emphasized that participation is entirely voluntary rather than required (Creswell & Poth, 2018). The recruitment letter clarified that the study was carried out to complete the requirements for a doctorate at Liberty University and that the findings and lessons learned might be applied to the creation of future initiatives in different school districts.

It was also mentioned that the study might be published and referenced in other studies in the future. In addition, it was stressed to participants that they could withdraw from the study at any time without facing consequences and the procedure to safeguard their personal information was explained. After the participants were identified, each educator was given instructions to fill out an informed consent form, sign it, and return it to the researcher.

A pseudonym was assigned to each participant to prevent them from disclosing their identity, since safeguarding participants from potential harm is an ethically significant consideration. It was crucial to provide comprehensive findings and include every participant's experience to present the most accurate picture of the facts, considering my own prejudices.

Summary

The hermeneutical phenomenology study aimed to delve into the experiences of educators who have endured STS from classroom experiences. This chapter explicated the qualitative approach chosen for this investigation, specifically tailored towards understanding these lived traumatic instances and how they influence one's engagement in the classroom. It outlined critical research aspects such as open-ended interview questions that were professionally transcribed. Further details provided include a restatement of research questions, selection criteria for participants that align with the objectives ensuring results, the researcher's role, and the setting of research. Methods utilized in data collection and analysis were depicted

as facilitating possible future replication while augmenting validity status. The research also render a trustworthy resource by acknowledging ethical considerations and stating actions taken to prevent causing harm to any participant. Chapter Four is expected to present related results, detailed accounts relevant to understanding the studied phenomena.

Chapter Four: Findings

Overview

This chapter presents the research results and introduces the study participants. The initial section presents a comprehensive overview of the research participants, utilizing data extracted from the interview's section on demographic information. The subsequent section examined the participants' personal encounters with secondary trauma and the measures taken, including self-care, to alleviate the impact. The interviews yielded central themes, and the lived experiences shared by the classroom teachers are also summarized. The objective of this study was to understand the central phenomenon of elementary educators recognizing their lived experiences of secondary traumatic stress and investigate their self-care techniques. The significance of this study was to understand better the viewpoints and firsthand knowledge of educators in public schools who work with traumatized children and their capacity to identify and meet their needs. To support instructors who engage with these students regularly, having a more profound knowledge of how teachers see traumatized students can be helpful. This understanding can help in developing new coping mechanisms by investigating the effects of STS (secondary traumatic stress) on teachers.

Participants

This section provides an account of all individuals who took part in the research. Every individual chose a pseudonym as a means of preserving their confidentiality. All participants in this study met the specified criteria: all participants held a valid teacher's license, work within a K-5 setting, and had either current or experience working with students who have endured trauma. The sample consisted of twelve individuals, nine women and three men. The ethnic

breakdown of participants was as follows: one Hispanic, three African Americans, and eight White individuals as noted in Table 1.

Table 1

Participants' Demographic Details

Participants	Age	Ethnicity	Years in Education	Sex
Andrea	54	African American	19	Female
Avail	50	White	24	Female
Clara	26	White	4	Female
Harper	52	White	27	Female
Harris	48	White	17	Male
James	54	African American	22	Male
Jocelyn	42	Hispanic	18	Female
John	45	White	15	Male
Katie	52	White	21	Female
Laura	34	White	12	Female
Lori	36	White	14	Female
Sara	29	African American	6	Female

Note. Participants demographics chart.

Following the interviews, the process of transcribing was conducted through a transcribing agency Read.ai. After completion of the transcriptions, everyone was emailed their own transcription for the purpose of member checking. Subsequently, six individuals responded to the email and shared their edits. Table 2 presents descriptive data regarding the information documented for the research, incorporating the participant's identification, the duration of the

interview, and the total page count for each interview. A total of 12 interviews were completed for data analysis.

Table 2

Participants' Information from the Descriptive Interview

Participants	Length of Interview	Total Number of Interview Pages
Andrea	28:34	9
Avail	32:40	10
Clara	43:36	12
Harper	28:30	9
Harris	19:20	7
James	18:54	6
Jocelyn	29:54	9
John	21:32	8
Katie	37:12	11
Laura	44:45	12
Lori	33:09	10
Sara	28:06	9

Note. Information chart for the descriptive interview with participants.

Andrea

Andrea is a 54-year-old African American female. She has worked in the education field for 19 years. She has taught multiple grade levels in multiple school districts. She currently works in a K-5 elementary. She wanted to pursue a career in education since she was a young child. However, life situations did not allow her to complete her degree until she was older in life. Andrea expressed that she had always loved children and had the desire to make a difference. Andrea described how, as a young child, her family struggled with homelessness and that she had to fight her way to gaining an education. She felt that becoming an educator would help others overcome the adversities she faced as a young child.

Andrea recounted a specific incident of a student who had endured trauma. This student had lost their home in a tragic house fire, and the child had returned to the home to save her

grandfather. The rescue was unsuccessful, and the student was severely burned by the fire.

According to Andrea, the fire had taken away all the child's belongings and part of her identity.

Andrea commented she grieved over the situation as she, too, understood how it felt to "have nothing and be homeless. "Andrea then stated she felt guilty for grieving as though she was homeless as a young child she had not endured the loss of her grandparent, and she had not been physically injured. Andrea described that she still thinks of the student and the tragedy often.

Avail

Avail is a 50-year-old White female. She has taught in an elementary classroom teacher for 24 years. Avail reported she always wanted to help others but never thought that would lead her to pursue a career in teaching. Avail thought she would teach for a couple of years and then move on to something else. She stated that her first few years of teaching were "so difficult and heartbreaking, I wasn't sure if I could do it anymore, but I also knew I couldn't leave". Avail went on to say that in 24 years, she has worked with over a dozen students who have experienced trauma, and each student has had a profound effect on her.

Avail shared about a specific student who, "still haunts her today." A young boy had been in a car wreck that claimed the lives of both of his parents the summer before his kindergarten year. The student lived with his grandparents, and he came to her kindergarten class with a wide range of emotions. Avail expressed how he was fearful to be left at school, and he would cry and scream for hours each morning before he was able to be settled. Avail stated she became so immune to hearing the crying that, at times, she would hear him crying when she was at home, and he was no longer with her. Eventually, the grandparents removed him from the school system and decided to homeschool him. Avail commented that she felt "emotionally numb and guilty" for not being able to meet his needs.

Clara

Clara is a 26-year-old White female who has worked in teaching elementary students for four years. Clara shared that her mom and her grandmother were both in the education field, and she knew it was “her calling.” Clara expressed that she loves her students “fiercely,” and they are like her own children even though she does not have any at this time. Clara knew what she was facing when she signed up to teach at a low-income school, she was following in the footsteps of the women in her life. Clara reported that she did not know the profound impact it would have on her life.

Clara shared a story from her first year of teaching. She recounted a student who lived in poverty. The student was a young girl and extremely underweight. Clara noticed that the student would wear the same clothing for multiple days in a row. The student did not have any school supplies, and she would come to school daily with her head hung low and rarely talked or played with others. Clara attempted to contact the family, but the numbers listed were disconnected. Clara commented how she would always buy extra food and leave it inside the student’s desk, and she found some school supplies. Clara shared how she had bought a new jacket for the student, but the student never returned to class. The next day Clara received notice that the student had withdrawn from the school. Clara stated how she felt regret, sadness, and powerless for not doing more for the student and that she still wonders where the student is now.

Harper

Harper is a 52-year-old White female who has been in education for 27 years. Harper commented that education is the “key to happiness,” then she laughed and said, “It’s also the key to a lot of tears, heartache, and stress.” She went on to describe how she became an educator and said, “I was supposed to be an attorney and God had another plan.” She described her plans for

law school and how she had her life planned out, but while filing out the law school application, she broke into tears and said, I just couldn't ignore the calling that I feel I am to be an educator. She described that she has been teaching, "all these wild children ever since."

Harper recounted an incident from what she stated was many years ago when things were different. Harper shared how she had a ten-year-old girl in her class that led her to many tears and almost to jail. Harper stated her class runs like clockwork, and she is strict, but she stated, "I love my students and would protect them at all costs." Harper shared through tears the story of the young girl who was being sexually abused by a family member. Harper described how the student broke down one afternoon and told Harper the situation. Harper commented, "I remember it like it was yesterday; my first thought was it is March, and how has this happened all year, and I missed all the signs; I should have known." Harper stated that she felt a range of emotions because she had not protected the child. Harper recounted the incident she stated, she refused for the child to go leave her classroom and go home that day. Harper shared, "I knew legally that was not allowed, but I had to save her." Eventually, the student was removed and placed in a foster family and Harper explained that she did not see the student again. However, one day, the student appeared at the door of her classroom and told Harper, "Thank you for saving my life." Harper noted that moment was worth all the years she had spent in education.

Harris

Harris is a 48-year-old White male who has been teaching for 17 years. He began his career as a junior high school educator and then moved to a K-5 educator. Harris stated he first became an educator as he was a coach who loved science and working with troubled kids. However, when he had a child of his own who became a middle schooler, he realized he was burned out and needed a change and therefore moved to working in a different sector.

Harris stated that as a middle school teacher he worked with many students who have experienced trauma. However, he shared about a specific incident. A young boy transferred into his classroom in the middle of the school year, and the student spoke no English. The student was withdrawn and appeared sad most of the time. Harris assumed it was because he did not understand the language, but the behaviors began. When the student became upset, Harris stated that he would let him use the classroom iPad instead of the assigned classwork. The iPad then became the only tool the student would use without escalating. Harris attempted to take it away one day, and the child threw it at him. Harris recounted a meeting with the family in which they shared how they came to the U.S. and how the entire family was captured and placed in a truck and taken to a cell where they had to pay for their freedom after several days of little food and water. Harris's facial expression changed at this point when he shared how he felt anger, disappointment, and guilt in himself for not investigating earlier and how he still often thought of this student and the experience they encountered.

James

James is a 54-year-old African American male who has been working in a K-5 classroom for 22 years. James described these past 22 years as the most exciting times of his life. James thought he wanted to be a police officer but instead, he found his calling of public service in teaching. He started his career as a teaching assistant and went back to school to become a licensed teacher at the age of 32.

James reported that he has had many highs and lows in education, but one memory stands out above the rest. He shared a memory of a young boy who had faced many adversities and how he helped this child overcome some of those. The young boy came to James' class with a lot of anger and frustration. Daily, he would become emotionally dysregulated and needed to be

removed from the classroom. James stated that to this day, he does not know the full extent of the trauma the student endured. He does know that the student's father was an alcoholic and was abusive to all the family members. James shared how the student's classroom behavior challenged him, and he tried to find a balance between discipline and understanding. James went on to say he felt unprepared and unequipped to provide the support a student with such trauma would need.

Jocelyn

Jocelyn is a 42-year-old Hispanic female who has been teaching for 18 years. Jocelyn shared that her family moved to the United States when she was a young child and that her teachers poured into her and that inspired her to do the same.

Jocelyn expressed that she has had many successful students in her 18 years of teaching and that she loved her job. However, during this time she has also worked with many students who have endured trauma. She commented that "not all stories have a happy ending". Jocelyn shared that a student had once been taken into state custody and had been placed in multiple foster homes. The child had been physically and sexually abused and she had several clinical diagnoses. Jocelyn stated that the behaviors were severe and at times the student would hit and kick her or other students. Jocelyn shared she was aware of the trauma the student endured and wanted to make a connection. However, as the year progressed, the behaviors became more severe, and the school could no longer meet her needs. Jocelyn expressed how guilty, sad, and angry she was that she could not help this student. The student was removed from another foster home, and Jocelyn never heard from her again. Jocelyn remarked, "This student that I couldn't save still haunts me to this day."

John

John is a 45-year-old White male who has been teaching for 15 years. John shared he did not complete his teaching degree until later in life. He stated before that he worked in various factories and realized that was not something he wanted to continue to do. John shared he pursued a career in education because he wanted out of the factories but after 15 years of teaching, he realized he truly has a passion for his students.

John depicted an incident that occurred in his classroom when he first began teaching. John stated, “I still think about this student and wonder if he turned out ok.” John shared a story of a student who lived a “less than adequate homelife.” He described that the student was responsible for caring for his siblings, that there was lack of food in the home, often the children wore the same clothing and smelled of urine. John learned that the student’s father had been an alcoholic who abused the mother. John shared how the student in his classroom was never physically abused but that according to reports the student witnessed the abuse often. John expressed how difficult it was to process the situation and felt anger, fear, and sadness.

Katie

Katie is a 52-year-old White female who has been in the education field for 21 years. Katie has taught a variety of grades and classes, she remarked she always had a desire to help others, and that teaching is where she landed in hopes of making a difference. Katie stated she feels that it is everyone’s duty to protect our students and to help them be successful.

Katie recalled an incident that happened in her third year of teaching when she said she felt lost and afraid. Katie shared about a student who made good grades, appeared well-groomed, and was always polite. Katie did not know that this student went home to chaos and trauma every day and that good grades and perfectionism were the way this child internalized and held her life

together. One day, Katie noticed that the student had erased her name from a piece of paper and put another student's name on it. Katie stated she confronted the student and asked her why she changed the name, and the student refused to respond. Katie then asked if she would be in trouble if she took home a "C," and the student replied "nope". Katie stated she was confused at this point, so she called home to see how things were going. When Katie spoke with the parent for the first time all year, she learned that the parents were not concerned with the student's grades and seemed agitated that Katie was calling them. When the student returned the next day, she had a black eye and a large bruise on her arm. Katie described feeling responsible for the child's injuries because she "complained to the parents." Katie contacted the authorities, and the student was removed temporarily from the home.

Laura

Laura is a 34-year-old White female who has been teaching for 12 years. Laura stated that if she was "being honest," she wanted to be a teacher because it always fit into her dream of raising a family and being a teacher. Laura went on to describe that over her 12 years of teaching she has considered doing other things, as "teaching is hard and working with students can be taxing on your system."

Laura described an incident she felt was the most traumatic event in her teaching career. Laura was on the verge of quitting teaching. According to her, she felt it was too much, and she needed a break. A new student transferred into her classroom a few weeks after school had started, and the student had behavioral concerns. Immediately, the student would hit, kick, and bite for no reason that she could pinpoint. Laura went on to describe how the student's behaviors increased, and the school called the Department of Children's Services. After an investigation, it was found that the child had been physically abused. The child went to live with a relative who

was no longer in her school zone. The foster family asked for the child to stay with Laura for the remainder of the year. Laura described how she could not allow this child to have another trauma, so she agreed to have the student return. Laura stated by the end of the year the student had improved so much, but every day was a struggle, and it was the hardest year of teaching of her life.

Lori

Lori is a 36-year-old White female who has been teaching primary children for 14 years. Lori reported she had no intentions of becoming an educator. She always envisioned herself living in a big city and traveling the world. Lori said she had a change of heart after working at a vacation bible school and realized she had a calling for children.

Lori recounted a tragedy that occurred to a student in her class a few years ago. She shared about a student who came into her classroom whose mother had passed away when he was just four years old. The student was in the home and with the mother when she passed away. The student lived with his father. Lori reported how she had also lost her mother and how this student's story triggered memories and emotions for her. She went on to describe how she felt helpless when she could not provide more support for the student, but she also had a classroom of other students, and they all needed her, and "there just is not enough of me to around."

Sara

Sara is a 29-year-old African American female who has been teaching for six years. She stated she always played school as a young child. Later, she became involved in afterschool and youth programs throughout the summer. She knew she was going to be in education; she just thought she would work with older students, but the younger students stole her heart.

Sara shared an incident that happened in her classroom regarding a student who had moved to the United States to find refuge. Sara stated the young student did not speak English, and the school system did not have a translator that could provide the needed language, so communication with the family was based on a computer-based program. The student would come to class each day and cry for hours she was withdrawn and sometimes defiant. Sara stated she felt heartbroken for the student. Even though she did not know all that she endured, she knew the family had suffered a great loss. Sara went on to describe the efforts she made to connect with the student and that by the end of the year she felt the student had made gains, but Sara stated, “I worried about her constantly I felt that she took all of my focus and possibly my other students suffered from this.” Sara stated she felt a range of emotions from this event and still thinks about it often.

Results

This section presents the analysis of the participants' individual experiences of secondary trauma and self-care. The findings are organized under the headings of Theme Development and Research Questions Responses. The Theme Development section outlines the process of analyzing the data and generating themes. The section titled “Research Questions and Responses” lists the research questions along with related themes that provide answers to the questions. The chapter will conclude with a summary following the results.

The interviews with participants were analyzed using Braun and Clark’s (2006) thematic analysis comprising six phases. This study employed thematic analysis to investigate the lived experiences of classroom teachers in relation to secondary trauma, as well as the self-care techniques they utilized to manage the effects of vicarious trauma. Braun and Clark (2006) outlined six stages for conducting thematic analysis: familiarization with the data, initial code

generation, identification of the theme, reviewing of theme, theme refinement, and analysis write-up.

Theme Development

Thematic analysis was employed to develop the study's themes. Thematic analysis is a technique used to analyze and comprehend qualitative by identifying and highlighting important patterns (Clarke & Braun, 2017). The six stages of the thematic analysis were utilized to identify themes related to the personal experiences of classroom teachers regarding secondary trauma, as well as their self-care strategies to alleviate the impact of secondary trauma. The process of thematic was driven using an inductive approach. The data was encoded in a manner that deliberately avoided the inclusion of any preconceived theories of reasonable assumptions made by the researcher (Braun & Clarke, 2006).

Acquainting Oneself with the Data

The researcher dedicated the initial stage of the thematic analysis to familiarizing themselves with the data acquired from the interviews. The recorded interviews were meticulously reviewed once more to verify that the transcriptions faithfully captured the participants' encounters with secondary trauma. Throughout the interview process, the researcher diligently documented their thoughts and insights in a reflective journal (See Appendix F). The researcher fully engaged with the data to gain a deeper understanding of the participants' narratives regarding their experiences with secondary trauma.

Once all the transcribed data was verified for accuracy of all transcribed data and conducting member checks with participants to enhance credibility and reliability, the interview files were finalized (Braun & Clarke, 2006). The researcher took note of any interesting text passages in the participants descriptions of their experiences with secondary trauma and

proceeded to manually code each file. The researcher meticulously annotated the substantial elements present in all interview recording using labels and various highlighting tools within NVivo software, while also maintaining detailed remarks in an independent audit file. The researcher went on to analyze the relevant data for the research questions using the NVivo program (Clarke & Braun, 2017).

Developing Initial Codes

The researcher employed deductive and inductive methods to examine the participants statements regarding their personal encounters with secondary trauma. The theoretical examination involved in putting the data with pre-existing notions about the expected patterns, which was anticipated to be repeated in accordance with theory or preconceived notions held beliefs, as stated by Braun and Clarke (2006).

The research study examined the participants' accounts of their encounters with secondary trauma utilizing Pearlman & McCann's (1992) constructivist self-development theory and Secondary Traumatic Stress Theory (Ludick & Figley, 2017). The themes were identified through inductive analysis, which involved analyzing the data obtained from the participant's real-life encounters with trauma (Braun & Clarke, 2006). The codes and themes were derived through deductive and inductive data analysis, a fundamental aspect of qualitative research studies.

The researcher inputted the interview data into the NVivo software. The researcher utilized NVivo to analyze the participant descriptions regarding their experiences with vicarious trauma. The analysis involved conceptual and semantic coding. Initially, the researcher inputted memo remarks pertaining to the participants' personal encounters with secondary trauma using NVivo software. Codes were generated by systematically observing the frequency of concepts in

the text. Ultimately, the researcher devised a comprehensive color-coding system that visually recognized frequently utilized codes or similar concepts (Braun & Clarke, 2006).

Seeking Themes

To identify major themes, the researcher created a thorough list of codes for future coding reviews. Following the method outlined by Braun and Clarke (2006), the researcher examined all interview data using codes developed with the NVivo program. A keyword search was conducted to identify commonly mentioned terms in the interviews. This search helped develop concepts; see Figure 2.

Figure 2

NVivo Key Word Query



Note. The NVivo Word Frequency Query helped identify project themes and analyze frequently used words within the transcripts. Word clouds highlight words with higher frequency, with the larger words indicating a greater prevalence. This word cloud highlighted significant words from the transcripts, including trauma, unidentified, students, classroom, secondary, and experiences.

After finalizing the list of the codes and reviewing the audit trials, the researcher analyzed the data notes, as well as Secondary Traumatic Stress theory by Ludick and Figley

(2017) and Pearlman and McCann's (1992) constructivist self-development theory. This analysis aimed to determine which components of the code list were relevant to the deductively supported themes and how they coordinated with theoretical frameworks.

The researcher determined that the ideas were generated through inductive reasoning, resulting in the emergence of emerging subjects and understandings linked to theoretical thinking. The codes were classified into distinct categories. Shared characteristics were identified and derived from the section containing interview questions, creating categories. The following categories were designated: secondary trauma, perceived training and self-care. During the thematic analysis, codes were identified that were relevant to the generated themes and codes that supported the theoretical framework of Secondary Traumatic Stress theory and Constructivist self-development theory (Ludick & Figley, 2017; Pearlman & McCann, 1992).

Evaluating Themes

The researcher thoroughly validated all data using various codes, examining initially derived codes from participant interviews to ensure correctness. The thematic analysis largely adhered to Braun and Clarke's (2006), with NVivo software integral in managing the resulting coding process and creating audit trails. Participants' descriptions underwent careful examination by the researcher, who also made note of any emerging thoughts or ideas or references. To discover more areas where a new concept could apply, close inspection was given to the relation between data points and previous accounts provided by participants, which were cross-referenced diligently. Both inductive and deductive analyses played roles when reviewing coded or themes. If themes did not fit into existing theoretical frameworks, an inductive approach was used to explore new concepts; conversely, if they aligned with predetermined theories then a deductive process was applied. Innovative ideas from inductive reasoning were also taken into

consideration during the analysis procedure. The compiled data resulted in creating a concept map through NVivo, which can be found in Appendix G.

Establishing and Designating Themes

The codes and themes were thoroughly analyzed and evaluated by considering the participant comments and conceptual meaning present in the raw data during the process of establishing the themes. Upon a meticulous review and examination of the unprocessed data, the researcher the conclusion that the act of identifying and consolidating codes aided in the formation of thoughts and ideas pertaining to personal encounters of classroom teachers with secondary trauma. Additionally, the deductive grouping of both new and preexisting codes into established themes played a vital role. A clear and logical understanding was developed by considering the new viewpoints provided by the participants' narratives (Braun & Clarke, 2006).

Generating the Report

Completing the first five steps of Braun and Clarke's (2006) thematic analysis paved the way for the concluding phase, a comprehensive analysis. The audit trail was documented to serve as a reference for documenting the thought process during the analysis of the participant's reports on their own experiences with secondary trauma to create a coherent narrative (refer to Appendix F). The researcher referenced the audit trail notes, which contained a summary of the process, various lists of codes that were developed and refined over time, and the correlation between the themes and codes with Pearlman and McCann's (1992) constructivist self-development theory and secondary traumatic stress (Ludick & Figley, 2017). The researcher offered an in-depth description of the data (Braun & Clarke, 2006). The critical stage involved composing a report on the analysis that substantiated the conclusions drawn, using specific instances (Braun & Clarke, 2006). The themes identified in the thematic analysis are presented in Table 3.

Table 3*Themes*

Themes
1) Classroom teachers described a range of emotional reactions to their experience of secondary trauma.
2) Classroom teachers shared how secondary trauma impacted their personal lives.
3) Classroom teachers expressed how secondary trauma impacted their professional work.
4) Classroom teachers expressed their difficulty in accurately recognizing secondary trauma.
5) Classroom teachers reported insufficient training in dealing with secondary trauma.
6) Classroom teachers expressed their inability to provide needed support to their students.
7) Classroom teachers emphasized the significance of coworker support.
8) Classroom teachers shared self-care strategies.
9) Classroom teachers described inadequate time for self-care practices.

Note. Themes identified in this study.

Research Question Responses

This section presents the findings of the study by addressing the research questions and utilizing the themes derived from the analysis of the data. The three research questions were: (a) How do educators make meaning of secondary traumatic stress caused by interactions with students with traumatic lived experiences? (b) How do educators experiencing secondary traumatic stress perceive the training available to them to mitigate the effects of STS? (c) How do educators experience and interpret their use of self-care in managing encounters with students who have

experienced trauma. Table 4 displays the themes that correspond to the research questions.

Table 4

Research Question Themes

Research Question	Themes
1. How do educators make meaning of secondary Traumatic stress caused by interactions with students with traumatic lived experiences?	a. Classroom teachers described a range of emotional reactions to their experience of secondary trauma. b. Classroom teachers shared how secondary trauma impacted their personal lives. c. Classroom teachers expressed how secondary trauma impacted their professional work. d. Classroom teachers expressed their difficulty in accurately recognizing secondary trauma.
2. How do educators experiencing secondary traumatic stress perceive the training available to them to mitigate the effects of STS?	a. Classroom teachers reported insufficient training in dealing with secondary trauma. b. Classroom teachers expressed their inability to provide needed support to their students.
3. How do educators experience and interpret their use of self-care in managing encounters with students who have experienced trauma.	a. Classroom teachers emphasized the significance of coworker support. b. Classroom teachers shared self-care strategies. c. Classroom teachers described inadequate time for self-care practices.

Note. Research Questions and Developed Themes.

Research Question One

This research question aimed to understand how classroom teachers described their experiences of secondary trauma. Four themes were developed through NVivo that correspond to this research question. Classroom teachers described a range of emotional reactions to their experience of secondary trauma. Next, classroom teachers shared how secondary trauma impacted their personal life and their professional work. Lastly, classroom teachers expressed their difficulty in accurately recognizing secondary trauma.

This study explored the commonalities of secondary trauma among participants, revealing challenges and self-awareness after exposure. Participants, including classroom teachers, shared their experiences and challenges, highlighting the continuous exposure to student trauma.

Classroom teachers described a range of emotional reactions to their experience of secondary trauma. This theme demonstrated the spectrum of emotions that the participants encountered while coping with secondary trauma. Barrett and Berger, (2021) discussed the potential psychological disturbances that an individual may encounter following a traumatic event, including disruptions in their dependence on others, security, control, autonomy, self-worth, relationships, and frame of reference. The schematic areas have an impact on an individual's emotional reactions, resulting in the emergence of varying emotional reactions. Several participants expressed a range of emotions, including feeling powerless, anxiousness, regret, and frustration. They observed that these emotions arose from their diligent efforts to ensure that students received support, but they acknowledged their inability to exert control over the outcomes. The participants observed a sense of sadness as they acknowledged that the students would be negatively impacted due to the inability of their parents and caregivers to fulfill their responsibilities. Many classroom teachers went on to describe their feelings of being powerless when they were unable to provide the help their students needed. Other participants described feelings of guilt or regret for not being able to do more for their students. Several participants shared they often felt unsure how to help their students when dealing with their trauma. While secondary trauma may present itself in various ways for different individuals, there were certain commonalities observed when those who participated discussed the emotions associated with their experiences. The list of emotions was summarized in Table 6.

Table 6*Emotional Responses*

Participant	Anger	Sadness	Powerless	Guilt	Regret
Andrea		x	x	x	
Avail	x				x
Clara		x	x		x
Harper	x			x	
Harris	x	x	x		
James					x
Jocelyn	x				
John		x	x		
Katie			x		
Laura		x			
Lori		x	x	x	

Note. Emotional responses of participants.

Each participant was asked to recount a specific incident involving one student who had experienced trauma. They were also asked to detail how this encounter was processed at the moment and in its aftermath. A follow-up question was added to determine the emotions that the individuals felt when experiencing secondary trauma. Specific responses from participants included a wide range of emotions.

Harris expressed:

I felt all the things anger, disappointment, and guilt in myself. I should have investigated earlier, and I could have made a difference. But could I really, I often think what I would have done differently, I still don't know maybe everything and maybe nothing. Does that make me a bad person?

Lori shared:

I felt helpless that I could not provide more provide more support for the student. I felt triggered because I had also lost my mother at a young age and the sadness flooded back to me and I just wanted to help my student not feel what I felt.

Classroom teachers shared how secondary trauma impacted their personal life.

Several participants discussed how their secondary trauma began to impact their personal lives. They described how it was difficult to disconnect from work and often thought about their students and their lives even when they tried not to think about it. However, other participants emphasized the significance of decompressing from work.

Avail divulged:

I think the biggest thing now is that, um, I got on some medication for anxiety, and it helped kind of curb the, I mean, the anxiety anxious feeling, you know, so it's helped. But I wish I didn't have to take it.

Katie remarked, "Personally, I was driving home from school crying, and some days I was driving to school crying. I just couldn't get myself together."

Harper shared:

Emotionally it was hard, I looked at my own children and wanted to do nothing more than protect them. I became so bothered that I refused to allow my own daughters to spend the night with friends, I caused conflict and drama in my own home with my children and my husband. I couldn't help it; I just couldn't get over it.

Lori commented, "Um, uh, you know I let my health go, as far as going to doctor's appointments, checkups, you just get stuck in all that and I gained a bunch of weight."

Classroom teachers expressed how secondary trauma impacted their professional work. Many participants discussed how secondary trauma affected their lives inside of their classroom. They shared how they felt their attention was often taken away from the other children to deal with behaviors or to meet the needs of the students who had endured trauma.

Sara noted, “And I had no idea how to deal with a child that is underneath the table screaming while I’m trying to teach. I didn’t know how to teach with that, and my entire class suffered.”

Jocelyn remarked:

I shut down. I literally shut down for almost a year. I have always been able to manage my classroom very well. Like that is one of the things I’m really good at but I couldn’t do it anymore and I think I just had to quit trying I was killing myself.

John communicated, “Well, you, know, you just do the best you can. A lot of it was some planned ignoring. Or one student can take away from other students because they’re needing more attention.”

Laura vocalized:

Processing things was difficult. I think I don't think I processed it immediately afterwards. I think it took me days to process things that happened, especially when he bit me and it left huge bruises on the arms for weeks. So, I don't know, I just, I would go home and just think about, wow, that really happened. But in the moment when he was, you know, when we were in the calm down room, and he was biting me, like, I don't even know if I was like, I don't know, it was like an out-of-body experience, I guess. So, and then afterwards, I would just go back to my room and drink a Diet Coke and, be expected to keep teaching my class.

Classroom teachers expressed their difficulty in accurately recognizing secondary trauma. This theme revealed the presence of uncertainty regarding the definition of secondary trauma and the participants’ lack of clarity in recognizing this problem. At first, the participants lacked a uniform understanding of secondary trauma, expressing uncertainty and limited knowledge about the topic. Some participants had a grasp of the concept but had different definitions, indicating a sense of ambiguity regarding secondary trauma. The researcher

addressed the participants' difficulty in defining and recognizing secondary trauma by providing a clear definition of the term and elaborating on the study's objectives. The participants displayed a lack of confidence with providing a clear definition of the concept. The participants' definitions were ambiguous as indicated by their responses. The study found classroom teachers had difficulty accurately recognizing secondary trauma, despite having experienced it themselves. Some of the participants had heard the term in the professional lives though they did not have clear understanding of the term. Other participants who qualified via the screener realized they had never heard the term secondary trauma and only related their experiences to what they knew as Post Traumatic Stress Disorder (PTSD) or burnout.

Andrea explained:

I didn't really know that secondary trauma was a thing until now. I just always called it PTSD. Yeah, you know, they, they laugh, or they joke about, you know, we trauma bond, trauma bonding, but it's like, it's a real thing, and I think I share this with many other teachers who have had similar experiences, and what if we all have secondary trauma and they don't even know it.

Clara articulated:

And nobody so far has any, um, I don't, I mean, I know we have like we discuss that there are emotions brought out from trauma. I mean, like literally I still, whenever somebody's screaming down the hallway, I have that PTSD, like, oh my gosh, is that my child? And then I'm like, no, not in that year anymore. But I do not know if it is PTSD it's probably secondary trauma that's just not something I know a lot about until talking with you.

Research Question Two

The second research question investigated how educators experiencing secondary traumatic

stress perceive the training available to them to mitigate the effects. Two themes were discovered through the coding and analysis. Classroom teachers reported insufficient training in dealing with secondary trauma and they expressed their inability to provide needed support to their students.

Anderson et al. (2021) described the importance of trauma-informed training for teachers. Trauma-informed care allows educators to see their students as “children first and learners second” (Anderson et al., p.59). Providing trauma care for teachers allowed them to have the necessary skills to take of themselves and to lessen the effects of secondary trauma.

Classroom teachers reported insufficient training in dealing with secondary trauma.

All 12 participants reported they had little to no training regarding secondary trauma. Several participants discussed they had trauma-informed training to help identify students who had endured trauma. All participants shared they needed more training on what how to handle students with trauma and not just identifying the trauma. Multiple participants stated they needed professional development on how to identify secondary trauma and how to handle the effects. Other participants noted that their school system is promoting mental health wellness for teachers but not providing specific training on the effects of trauma.

Sara noted:

I mean, maybe not a ton. I mean, I'll be honest with you. I know that they, like the mental health world is huge and growing and Like therapy. I'm in therapy right now, because, I mean processing everything in your brains just turn all the time. It's good to talk to a non-biased person. So, I think that's important. I do know that they they've increased like mental health awareness for teachers and getting resources and insurance cards and trying to now find someone that's

in your network and covered can be difficult. But I think that's one thing that they have promoted a lot in recent years to teachers, but they haven't trained us on anything.

James shared:

I don't think that there has been, there's been professional development on childhood trauma, but not necessarily here's your support system as a teacher, as an educator, here's what you need to do. It's been more the ones that I took part in were more about recognizing childhood trauma and not really the secondary trauma that comes with that.

Classroom teachers expressed their inability to provide needed support to their students. Multiple participants shared how they feel they have little training on how to support their students who have endured trauma. Several participants went on to describe how the lack of training regarding their own mental health put a strain on their ability to help their students.

James remarked:

I would say, you know, there needs to be a lot more professional development certainly on that, a lot more tools that can help educators recognize that and what to do about it. I think it's not just teachers who are kind of struggling, but it's, you know, the system. I do not think any of us really know how to help students when it comes to dealing with their traumas.

Jocelyn mentioned:

I think it would just be great to, you know, explore more, you know, resources for educators and how to, how to reach out, like not only how to deal with our trauma or secondary trauma, but also how to, to

help the kids more so like, you know, in the moment and what to do and how to help families with their kids. And I mean, I know that's, I know we're just educators and there's only so much that we can do.

Research Question Three

The third question examined how educators experience and interpret their use of self-care in managing encounters with students who have experienced trauma. Three themes developed from the analysis in relationship to teacher self-care. Classroom teachers emphasized the significance of coworker support. They shared self-care strategies and also described inadequate time for self-care practices.

According to McMakin et al., (2022) everyone can benefit from self-care, however in some professions it is shunned more than in others. Teachers frequently find it is easier to give advice to others than it is to do it for themselves. McMakin et al., (2022) went on to describe teachers are urged to put a great deal of effort into helping others and very little effort into themselves. Many of the participants shared this concept during their interviews. Several participants mentioned various types of self-care activities but also shared they do not always have time to practice them for themselves. **Classroom teachers emphasized the significance of coworker support.** Throughout the thematic analysis and coding coworker support was mentioned by several participants.

Avail shared:

Well, self-care is about having time with my girls. These people I teach with are the best friends I have ever had and they understand what you are going through. I try to not take it home my husband doesn't understand but my work people they get it, because they live it too.

James noted:

My co-teacher is my greatest sense of support. When I cannot work out in my head what is happening, I often turn to my team and share with them. They understand the day to day issues along with the crisis that sometimes happen.

Lori commented:

Well, your teaching team is like your family. When you need to process just so you can make it through the day, they are there. I wouldn't be able to teach if I didn't have my support teachers. I don't know how anyone could; teaching can be lonely if you are out on the island by yourself.

Classroom teachers shared self-care strategies. The most successful self-care strategies classroom teachers use to assist them with their secondary trauma include exercise, prayer, co-worker support, therapy, reading, and travel and noted in Table 7.

Table 7

Self-care strategies

Participant	Exercise	Church	Co-Worker Support	Therapy	Reading	Spa
Andrea		x	x	x		x
Avail	x	x	x			
Clara					x	
Harper	x					x
Harris		x	x			
James	x					
Jocelyn		x				
John	x	x	x	x		
Katie	x			x		
Laura	x	x				
Lori			x		x	x

Note: Participants self-care strategies

Andrea remarked:

I think that as educators, especially when we have children with, you know,

huge emotional needs, that we just take that on ourselves. And we put ourselves on the back burner. And I think that self-care, you've got to take time to do something you enjoy. You need, as much as I hate it, a little bit of exercise, you know, even if it's a walk. You need to watch your diet. You need to, you know, make time to read something that is not educational, if that's your thing. You need time to decompress. One of the best things about living 25 or 30 minutes away from where I taught is that I did have some time to decompress. After work, and so I didn't walk in the door still carrying that burden.

Harper commented:

I exercise and run. That's one thing I do and kind of helps me clear my head. I have really been into audio books lately and it kind of just lets me mindlessly walk around and I'm listening to books. Um, I enjoy yoga. I used to do it a lot more than I do now, but an occasional pedicure, facial, those are great. I'm trying to think of what else. Just hanging out with friends and doing things non-school related and having quality time conversations with others.

John noted:

Yes, I have quiet time. I read my Bible in the mornings. And then at night, after when I get home, I try to walk on my treadmill. Sometimes it doesn't always work. Or I go to the track and walk. Walking and running really helped me get that extra, it's not energy, but it's probably stress coming out, just to burn off that anxious stress or anxiety.

Classroom teachers described inadequate time for self-care practices. All the participants described various types of self-care practices and detailed how important self-care practices are to them. However, four participants described the lack of time for adequate self-care practices.

Clara remarked:

All the self-care practices are great but when you're in the middle of the trauma I felt like all I could of is just all you can do is function, get up, take a shower, go to school, come home, drink wine.

Harris commented:

I run that's what I do, I am a runner. But then I stopped because I couldn't make myself get up and do it and my stability at work and home suffered. I knew I was stressed, and I couldn't fix it. I had to go back to running it was the only thing that helped get all that stress out of me.

Summary

This chapter examined the results of the results of the lived experiences of secondary trauma experienced by classroom teachers, along with the self-care techniques teachers use to minimize its effects. All twelve of the study's participants acknowledged that they had personally encountered secondary trauma. The participant responses were obtained by the researcher using open-ended semi-structured interview questions. After data analysis, nine themes emerged. The nine themes were:

1. Classroom teachers described a range of emotional reactions to their experience of secondary trauma.
2. Classroom teachers shared how secondary trauma impacted their personal life.

3. Classroom teachers expressed how secondary trauma impacted their professional work.
4. Classroom teachers expressed their difficulty in accurately recognizing secondary trauma.
5. Classroom teachers reported insufficient training in dealing with secondary trauma.
6. Classroom teachers expressed their inability to provide needed support to their students.
7. Classroom teachers emphasized the significance of coworker support.
8. Classroom teachers shared self-care strategies.
9. Classroom teachers described inadequate time for self-care practices.

This chapter also examined the three research questions within the study. Research question one: How do educators make meaning of secondary Traumatic stress caused by interactions with students with traumatic lived experiences? This question was answered by four themes that focused on range of emotional experiences, impact on personal life, impact on professional life, and the recognizing of secondary trauma. Research question two: How do educators experiencing secondary traumatic stress perceive the training available to them to mitigate the effects of STS? Two themes provided a response to this question. Classroom teachers reported insufficient training in dealing with secondary trauma and expressed their inability to provide needed support to their students. Question three: How do educators experience and interpret their use of self-care in managing encounters with students who have experienced trauma. Three themes contributed to answering this question including, significance of coworker support, self-care strategies, and inadequate time for self-care practices.

Chapter Five: Conclusion

Overview

The study aimed to comprehend the nature of secondary trauma among classroom teachers, their perception of training, and establish awareness about their self-care strategies. The findings, analyzed through related literature and theories like constructive self-development theory as well as concepts on self-care, may assist current and prospective classroom teachers in managing exposure to such trauma. Furthermore, practical implications alongside methodological aspects are explored within this research while also acknowledging its constraints or limitations with additional future suggestions for exploring this subject area further.

Summary of Findings

The purpose of this study was to describe classroom teachers' personal experiences with secondary trauma, perceptions of available professional development, and self-care practices. The data analysis employed for this research was Braun and Clarke's (2006) thematic analysis to produce nine themes. The themes revealed that classroom teachers who have worked with students that have endured trauma shared a common experience of secondary trauma. This study was guided by three research questions: (a) How do educators make meaning of secondary traumatic stress caused by interactions with students with traumatic lived experiences? (b) How do educators experiencing secondary traumatic stress perceive the training available to them to mitigate the effects of STS? (c) How do educators experience and interpret their use of self-care in managing encounters with students who have experienced trauma? Answers to the research questions were supplied by the themes that surfaced from the data analysis (see Table 4).

Four themes emerged based on the data to address research question one of this study, which examined the lived experiences of educators who experienced secondary trauma. Classroom teachers described a range of emotional reactions to their secondary trauma experience. They also communicated how secondary trauma impacted their personal lives and their professional work. Classroom teachers additionally expressed their difficulty in accurately recognizing secondary trauma.

Educators expressed a variety of emotions regarding their secondary trauma ranging from, sadness, guilt, anger, powerlessness, and disappointment. The emotions varied based on how the educators perceived their role in the student's situation and the effect the student's trauma had upon their lives. Some participants believed that due to the detrimental impact on their emotions, it was crucial to unwind on the way home from work to regain emotional control and overall well-being following exposure to secondary trauma. Classroom educators went on to share how their professional lives within their classrooms were affected by the trauma. Several participants stated that other students suffered due to the lack of attention they received within the classroom. Other participants shared how they felt shut down in their classroom and how they were not performing well as employees any longer. Some participants shared their inability to appropriately identify secondary trauma and explained how they had little to no concept of the phenomenon even though it had happened to them correlating to research question two and the theme that educators have received little to no training on secondary trauma.

The second research question in this study inquired how educators experiencing secondary traumatic stress perceive the training available to them to mitigate the effects. Two themes answered this query. Classroom teachers reported insufficient training in dealing with secondary trauma and they expressed their inability to provide needed support to their students.

Classroom educators described the lack of professional development regarding secondary trauma. They noted it was difficult for them to understand the phenomenon, and how to comprehend the effects. Educators expressed the need for training to provide knowledge on secondary trauma and techniques to help reduce the symptoms. The participants noted they would like to learn more about the dangers of STS and could boost their resilience. Participants also shared they needed more knowledge regarding STS to better support their students. Teachers commented how STS impacted their professional work and bled over into their classroom relating to question one and the developed theme.

The third research question investigated how educators interpret their use of self-care in managing encounters with students who have experienced trauma. Three themes emerged to answer the final research query. Classroom teacher emphasized the significance of coworker support. They also shared self-care strategies and described further inadequate time for self-care practices. The value of receiving support from people who could relate to and understand their experiences firsthand was illustrated by the seventh theme, which focused on co-worker support. Through co-worker support the participants established a forum for discussing issues that arose during their school day. Additionally, they discussed coping techniques with colleagues and peers.

Classroom teachers can improve their personal and professional well-being by utilizing coping strategies to encourage self-care. The participants reported various methods highlighting the range of self-care practices used to support wellness and assist in overcoming secondary trauma. The participants' self-care routines included exercise, church, co-worker support, therapy, reading, and spa services.

The participants noted that they understand self-care techniques however, they do not utilize them as often as they should. Classroom teachers stated the classroom takes most of their time and effort and they have little to no time for self-care activities.

Discussion

The study produced valuable insights into the secondary trauma experienced by school educators, perceptions of professional development, along potential self-care strategies for managing it. It corroborates constructivist self-development theory through findings that regular interactions with traumatized students influenced participants' perceptions of reality and elicited negative emotions while also prompting them to question their professional competence. In addition, this research emphasizes the theory of secondary traumatic stress (STS). STS is a harmful outcome associated with indirect trauma exposure, arising from secondary victimization. It is connected to the process of vicarious traumatization and represents the difficulties encountered when dealing with individuals who have experienced trauma either directly or indirectly. The manifestation of STS can vary from self-reports to psychometric evaluations (Burnette & Wahl, 2015; Ludick & Figley, 2017).

The study findings revealed a connection between understanding and coping with secondary trauma, work-related stressors, and individual professional outcomes. Participants who were uncertain about defining secondary trauma or lacked self-care strategies appeared to be negatively impacted by such traumatic exposure in their workplace, leading them to take medical leave. Conversely, those providing detailed information on this type of secondary traumatization had better results in fulfilling their daily job duties.

Empirical Literature

The themes outlined in this study complemented previous research on secondary trauma. Classroom educators are primarily affected psychologically by secondary trauma, which includes emotional, behavioral, and cognitive effects. Researchers concur that because of their empathetic interactions when learning about students' traumatic experiences, teachers' perceptions are negatively shaped by the secondary trauma process (McNeillie & Rose, 2021). STS can mimic the symptoms of the original trauma and are frequently the same as those of the trauma survivor. Hypervigilance, anxiety, difficulty sleeping, and difficulty concentrating are some of the symptoms that some people exhibit (Nelson et al., 2018). These symptoms are consistent with some of the emotional responses that study participants have described. Clara mentioned that she had trouble comprehending secondary trauma, and to lessen her stress, anxiety, and depression, she needed to practice self-care more often.

Oberg and MacMahon (2023) identified several risk factors for secondary trauma, including trauma in one's past, insufficient coping mechanisms, an absence of support from others, and inconsistency in one's personal life. For example, Avail mentioned that she was so focused on meeting the demands of her students that she found it difficult to take care of her own needs and those of her family.

The study found nine themes that explained how educators dealt with the consequences of their lived experiences of secondary trauma and how they employed self-care techniques. Each theme was consistent with the previous document literature.

Theme one described a range of emotional reactions to the experience of secondary trauma. Many different emotional reactions can result from secondary trauma (Pryce et al., 2021). Anger, sadness, powerless, guilt, and regret were among the emotional reactions that

surfaced in this research, aside from the initial symptoms experienced during the event. For various reasons, some participants found it difficult to identify these feelings. Rauvola et al., 2019 asserted that a professional's response to strong emotions and physical reactions could indicate that they are struggling to perform their daily tasks. One of the study's participants resigned and took a leave of absence for a few years before being able to return to the educational setting. Another participant took a medical leave due to the ongoing stress he was experiencing and returned after some time off. Other participants shared their feelings regarding the secondary trauma but did not report having severe emotional reactions to their exposure. These incidents were linked to unfavorable emotions, discomfort, and bodily responses that were previously classified as secondary traumatic stress (Figley, 2013).

The second theme shared how secondary trauma impacted educators' personal lives. Participants described how hard it was to put work aside and how, despite their best efforts, they were constantly thinking about their students and their lives. Teachers occupy a unique position in children's lives, serving as their primary adults for approximately eight hours a day, five days a week, for 180 days a year. This allows them to develop a close relationship with their students, sometimes involving prolonged observation of student trauma. The amount of time teachers spend with their students and the relationships they build can often carry over into the teachers' personal lives (Taylor, 2021).

The third theme concerned how secondary trauma impacted educators' professional work. Classroom teachers expressed their lack of faith in the effectiveness of their work. Secondary trauma exposure over time can make teachers doubt their capacity to support their students (Evans & Graves, 2018). Educators may become excessively emotional and feel shame, guilt, and self-doubt as a result of being overexposed to the trauma experiences of their students

(Lindseth & Norberg, 2021). John shared, “I felt like I wasn’t doing a good job, it became harder to see a difference.”

The participants acknowledged that their incapacity to address the traumatic experiences of some students adequately was largely due to a lack of professional development in trauma. Katie noted, "I worry about my kids all the time. Am I supporting them enough in the classroom? What about the other students? Am I even focusing on them?"

The fourth theme concerned classroom teachers’ incapacity to recognize secondary trauma appropriately due to conceptual ambiguity. Limited instruction on trauma and self-care is offered by many educational programs; frequently, the focus is on students' identification of trauma rather than the trauma experienced by the teacher (Zabek et al., 2022). When asked to characterize secondary trauma, a few participants appeared unsure of the term. Prior to the interviews, secondary trauma was not a topic that was frequently discussed, and the participants appeared to pay little attention to the phenomenon. For example, Jocelyn had no idea regarding secondary trauma she commented, “Secondary trauma, I’m not really sure I guess it means all the kids who have experienced trauma and what that does to them.” Harris commented, “I don’t really know, I guess their trauma sort of comes onto me also.”

The next theme addressed the second research question concerned with educators’ complaints about the lack of professional development they had received regarding secondary trauma. Classroom teachers can use self-care techniques, administration support, and professional development to address issues relating to secondary trauma (Connell et al., 2024). The participants expressed the need for increased professional development to give them knowledge pertinent to their roles. In Laura’s words, "I feel like we wear so many hats every day and no one ever provides training on how to do that especially when that hat has been crushed

and you don't know how to reshape it." Given the dynamic nature of the school environment and the ever-changing challenges that students face daily, teachers must have access to continuing education training on secondary trauma to better prepare them to support their students (Edwards & Miller, 2019). Lori stated, "Lack of training makes lots of challenges for me when working with and handling all the traumatic events that our children face every day."

The sixth theme in this study explored classroom teachers' ability to provide needed support to their students. Classroom teachers described how they felt anxious going into the classroom without being able to provide what their students needed. Some participants described the lack of training as a factor, and others described the range of emotions from STS that inhibited them from providing what their students needed. John stated, "I believe I was just emotionally numb how can my students learn from a teacher who is numb inside." Swathi and Reedy (2016) depicted that stress on teachers from experiencing STS can lower their effectiveness in their daily work.

The significance of peer support was highlighted by classroom teachers as the seventh theme. Educators can benefit from coworker support by feeling validated, accepted, and supported emotionally (Garwood et al., 2020). Avail described her collaboration with other educational professionals who serve a variety of populations and have comparable experiences to her own. Additionally, John expressed, "When others understand what you are going through you don't feel alone anymore."

The eighth theme concerned the self-care techniques that classroom teachers reported using to address secondary trauma. Exposure to STS can result in symptoms similar to post-traumatic stress disorder (PTSD), including emotional exhaustion, reduced empathy, and despair (Branson, 2019; Chen, et al., 2021). A vital component of an educator's STS management is self-

care. Teachers who prioritize their physical and mental health, set boundaries, increase their self-awareness, build social support networks, and practice resilience will be better equipped to manage the trauma and stress they encounter on the job (Kelly, 2020). In addition to encouraging greater opportunities for awareness developing coping strategies like self-care could boost professional retention (Hagan et al., 2018). James gave the following example: "Taking care of myself is all I have in helping to maintain my classroom."

The final theme centered on classroom teachers' lack of time for self-care practices. Teachers are generally not very good at taking care of themselves (McMakin et al., 2022). This research pointed out teachers put in too much overtime at work, neglect to get enough rest or exercise, overindulge in unhealthy foods, and neglect to dedicate enough time to activities that revitalize them. Katie shared, "My career is teaching, but if you let it, it can take over your entire life." Teaching is a marathon, not a sprint. Rather than "just trying to make it to the end of each year, I want to find a pace that will last I just never seem to find the time."

Theoretical Literature

Constructivist self-development theory (Pearlman & McCann, 1990) and secondary traumatic stress theory (Ludick & Figley, 2017) served as the theoretical foundations for this investigation. According to McMakin et al. (2022) traumatic experiences are the cause of cognitive schema development, and CSDT provides a framework for assessing and managing trauma reactions. According to constructivism, people create and reshape realities throughout their lives that are based on their thinking and influenced by their surroundings. The participant narratives demonstrated how differently each of them was affected by secondary trauma. Katie, for example, talked about how she found it hard to control her feelings once she established a rapport with the students in her classroom. Lori talked about how she found it difficult to set

boundaries with her students, which affected her capacity to give care. On the other hand, Harris's encounters with secondary trauma inspired him to look for support for both himself and the students he worked with.

Secondary traumatic stress theory discusses various ways in which people can experience secondary trauma through the discomfort of others (Ludick & Figley, 2017). This could be direct interaction like healthcare professionals, witnessing traumatic events like first responders, working within environments that handle distressing situations such as court employees and cohabitation with a traumatized individual such as family members.

The severity of this secondary trauma is often overlooked especially in populations not perceived to deal regularly with stressful scenarios; they become particularly vulnerable due to inadequate training about these issues, insufficient supervision from superiors, and lack of access to therapeutic resources necessary for mental health. Classroom educators are often left unnoticed as being vulnerable to STS due to their classroom experiences (Herman et al., 2017) therefore their training on the subject is lacking. A few participants discussed how, at a certain point in their careers, their experiences had changed the way they perceived their level of professional well-being. The difficulties in detaching from work and the unfavorable outcomes from student's trauma, also caused them to doubt their capacity to deal with trauma in the future. "It is so very hard for me to think anyone would ever harm a child in any way, but I see it all the time and it's just sad," remarked Harper. Clara also said, "The hardest thing is to walk out those school doors and not thinking about all of it."

This research demonstrated classroom teachers could recognize a few of their prior encounters as secondary trauma after learning about the phenomenon. Knowledge has the power to lessen the symptoms of STS and allow educators to improve their effectiveness in their roles.

Constructivist self-development theory offered structure for educators to become cognizant of secondary trauma, which in turn emphasized the significance of coping mechanisms.

The theory of constructivist self-development offered a structure for understanding the psychological burden that teachers bear when working with students who have endured trauma.

Implications

The study's conclusions have effects on many different demographic groups. Researchers, school counselors, medical professionals, educators, and other emotional wellness professionals may find this study useful. Several perspectives, including theoretical, empirical, and practical ones, were taken into consideration when examining these implications.

Theoretical Implications

Researchers examining secondary trauma in educators working with traumatized students should consider the theoretical implications of this study. This study was a good fit for the constructivist self-development theory (CSDT), which looked at the psychological components of a traumatized person. According to McCann and Pearlman (1992), concentrating on the key components enables one to gain insight into the self, any past trauma, and psychological needs. Trauma and how an individual adapts to it are the central themes of constructivist self-development theory (McCann & Pearlman, 1990). The results of this study showed that hearing about their students' traumatic experiences has an impact on educators. As an example, Harper said, "I think as teachers we all have great amounts of empathy and that's why when know our students are hurting then so are we." It was also demonstrated how participants' anxiety about how to handle future encounters with other traumatized students resulted from the effects of secondary trauma.

One of the psychological components of constructivist self-development theory is traumatic memories they highlight this idea and speaks to those memories. The constructivist self-development theory of McCann and Pearlman (1990) informed the themes that arose From analyzing the data which in turn influenced the participants' self-perception, the traumatic memories they revealed, and the emotional demands associated with those feelings.

Secondary traumatic stress theory was appropriate for this investigation. The impact STS has on staff members' sense of wellbeing, is a cause for concern. The theory often covers a variety of careers and states how first responders, counselors, and social service workers are affected. STS involves dysregulation of emotions, which can affect relationships and cognition for all of those affected. This theory also applies to educators who interact daily with students in their classrooms. Educators who interact with students that have experienced trauma are at a greater risk for STS (Deutsch et al., 2020). Furthermore, STS may interfere with the ability of collaborators to engage, with the capacity to think critically, decisively, and clearly when evaluating risk and safety, and with the capacity to render impartial judgments and decisions. Research has also linked STS to employee turnover (Babik & Gardner, 2021). As noted by James, "I had to take a break from teaching for a while. Sometimes, it is just too much."

Empirical Implications

This study has implications for empirical research as well. Researchers studying secondary trauma may find this study useful as it examined classroom teachers' personal experiences. It was found that people who have experienced STS had trouble controlling their emotions. They agreed that there was a demand for training on secondary trauma based on the expectations of the educators. Their professional view of the world and themselves was influenced by feelings of anger, helplessness, and self-doubt resulting from their lack of

education and awareness on secondary trauma. It was difficult to not have control over the outcomes after developing a positive connection with pupils and learning about their trauma.

While working in a classroom with students who have suffered trauma, many people discovered that self-care interventions could serve as a helpful framework for their own recovery. The participants believed it was critical to keep work and personal life apart. The study provided valuable findings in raising awareness of the negative effects that can occur to the mental and emotional well-being of classroom teachers. Even though teachers deal with a variety of challenges, little research has been done on the effects of secondary trauma on educators' mental health (Milin et al., 2016; Oberle et al., 2020). This study fills a vacuum in the body of knowledge about classroom teachers and secondary trauma.

Practical Implications

The study's results might also contribute to developing a framework for this phenomenon's treatment, interventions, and educational initiatives. Literature is paying more attention to the phenomenon known as secondary trauma (McNeillie & Rose, 2021). The results showed that teachers had low confidence in their knowledge of and training in secondary trauma. The study's findings also suggested that teachers, especially professionals who interact with trauma survivors, would benefit from knowing more about the topic. In this study, classroom teachers discussed the value of continuing education in the areas of trauma and secondary trauma. Multiple practical implications were developed to address the needs identified in this study.

Access to Professional Development and Training

Being a lifelong learner is crucial in the field of education. For educators, professional development can be an excellent resource for learning more about trauma and the effects that secondary trauma can have on an individual (Lawson et al., 2019).

Participants in the study highlighted the urgent need for increased educator training to better understand and address the impact of secondary trauma impact. There is a significant demand for tools, resources, and best practices that are informed by an understanding of secondary trauma. Incorporation of trauma education in teacher preparation programs was also stressed as it could prevent secondary trauma among novice teachers who commonly serve at the highest-need schools. Participants further emphasized the role of supportive school administration committed to addressing student-related issues arising from traumatic experiences along with managing secondary stress amongst educators.

Educators who are affected by trauma can develop resilience by participating in professional development on the effects of trauma with colleagues in the same field (Berger et al, 2016). Secondary trauma is still a relatively new phenomenon, so it's not often discussed in state policies, professional development programs, preservice education, or research (Lawson, et al., 2019). Finding educational opportunities that offer proactive strategies for secondary trauma is crucial for educators. Berger et al. (2016) highlighted the need for additional knowledge on secondary trauma, including the warning signs and consequences that accompany the phenomenon. Engaging in professional development activities, continuing education, and discussing the effects of secondary trauma and potential preventive measures with other educators are some of the ways educators can keep learning about secondary trauma.

Implementation of Wellness Programs

When educators are in good mental, physical, social, and emotional health, they are more effective, less likely to miss work, and better able to support the development of their students (Lawson et al., 2019) State departments and other legislators can support the mental and physical health of educators and administrators by providing the framework and opportunities for employee wellness programs.

Wellness programs can be utilized to reduce the symptoms of secondary traumatic stress and enhance teachers' overall well-being. Wellness rooms can be implemented within the school by gathering input from teachers, staff, and administrators. Encouraging healthy eating and active living by hosting a healthy food potluck, displaying wellness offerings, taking "thriving" photos, and displaying exercise instructions on posters. This will promote a positive environment for teachers and staff. To promote relaxation, involve parents and community partners in room design, provide comfortable seating, switch to softer lighting, providing deep breathing examples and relaxing music.

Creation of Support Systems and Peer Networks

Schools that establish peer support networks or mentorship programs where teachers can discuss their experiences and receive emotional support can lessen the effects of STS. Peer networks can reduce feelings of isolation and promote a community of understanding and shared coping strategies. Regular debriefing sessions or support groups can help teachers process their emotions and prevent burnout.

According to research by Berger et al., (2016) when educational support groups are implemented properly, each person can receive skills to help them deal with the stress that comes from their personal and professional lives. Using peer networks teachers can connect with others

who are experiencing similar circumstances. This can provide individuals who are suffering from secondary trauma with a network of support. Even though these relationships can be a very useful tool for teachers, they must have a network of support outside of the classroom. This provides each person with a support system and a way to process some of the experiences they have had with their students. Having the right support enables each person to successfully carry out their work while also attending to their emotional needs.

Integrating Trauma-Informed Practices and Self-Care into Preservice Teacher Education

Teacher education programs should incorporate trauma-informed practices and self-care strategies as part of their core curriculum. Preservice teachers need to be equipped with the knowledge to identify trauma in students and understand the impact of secondary trauma on themselves. Embedding self-care routines and strategies, such as setting boundaries, mindfulness, and stress management, into their professional training can prepare them to handle the emotional demands of teaching. This early introduction helps future educators build resilience and prioritize their mental well-being from the start of their careers.

Interview participants believed that self-care was the main habit incorporated into their everyday schedule for maintaining professional and personal wellness. Increasing the competency of classroom teachers in trauma requires education. Schools need to provide more thorough training on trauma for people who have experienced secondary trauma in a school environment. Classroom teachers are among the first to respond to students' needs, so they are in a good position to begin assisting students in their learning environments.

One of the more popular self-care practices that is covered in research is mindfulness. While everyone's definition of mindfulness is different, it frequently includes yoga, meditation, going for a walk, practicing correct breathing techniques, and engaging in stress-relieving

physical activity. When practiced correctly, mindfulness can promote compassion, forgiveness, and empathy as well as increase focus, emotional regulation, resilience, and broadening of attention (Taylor, 2021).

Christian Worldview

Christian educators are caretakers of the natural world, and the assets entrusted to them, including their main priority, their students. Throughout this research, teachers expressed how they want to give students the best possible learning experience, which entailed responsibly managing their time, skills, and knowledge. Andrea stated, I knew it was my calling that being an educator was God's plan for my life.

A key component of being an educator is the teachers' unconditional positive regard for their students. A great biblical illustration of a father and son showing unconditional positive regard for one another is found in the story of the Prodigal Son. The prodigal son's father welcomed him back home with compassion and open arms, instead of passing judgment on him. Because Jesus came to earth to die in our place so that we might have eternal life, rather than to judge us, He is the best example of what it means to be treated with unconditional positive regard. Clara described loving her students unconditionally even those who can be difficult to love.

The Christian Worldview shapes our academic achievement by providing a framework that inspires us to strive for excellence. The Bible states in Colossians 3:23, "Work at whatever you do with all your heart, as working for the Lord, not for human masters." This encourages us to work hard and humbly on our coursework. However, teachers who have experienced secondary trauma noted their strive for excellence can waiver and be tested when placed in a traumatic situation.

"Spirituality has the potential to be a positive and protective resource or an exacerbating factor for those who experienced trauma or both"(Pearce et al., 2018, p. 2).

Individuals who have gone through trauma will try to "make sense" of it. Examining their spiritual reactions, such as doubting God's will, losing faith, or mistrusting the religious community, can be a part of this sensemaking process from a Christian perspective. Additionally, Pearce et al. (2018) shared it could lead someone to ponder more profound existential queries like "Is God punishing me?" or "How could God allow this to happen"? This was evident in the research when Lori described driving home and trying to decompress and wondering why God placed her in this position and was all this her fault. However, she went on to share that after the fact she felt confident in knowing she was placed in this situation, "Every child is a gift and a blessing" (Psalms 127:3-5).

Delimitations and Limitations

This study aimed to investigate the self-care techniques classroom teachers used to help them deal with the effects of this phenomenon, as well as their lived experiences of secondary trauma. The aim of this research was to identify and increase consciousness regarding secondary trauma among classroom teachers who work with traumatized students. The study's boundaries and restrictions are outlined in this section.

Delimitations

Delimitations are the intentional decisions the investigator makes about the parameters of the study (Theofanidis & Fountouki, 2019). Participants in this research had to meet certain requirements, possess a current teaching license, and work in a K-5 classroom setting.

Participants also need to have prior experience working with traumatized students in K-5

educational setting. The study set out to investigate the lived experiences of classroom teachers with secondary trauma.

All participants were required to provide informed consent and acknowledge that their participation in the research may result in emotional triggers. An additional delimitation for this study was one specific geographic location in southeastern Tennessee. A phenomenological approach would most accurately represent the lived experiences of classroom teachers who had experienced secondary trauma and required self-care, the research strategy for this study was limited to this method.

Limitations

According to Theofanidis and Fountouki (2019), limitations are uncontrollable possible shortcomings of a study. The sample size was one of the study's drawbacks. The findings were not applicable to the perspectives of all classroom teachers due to the small sample size, which permitted comprehensive interviews whereby respondents could share significant information regarding their lived experiences. Subsequent investigations should confirm the findings of this study. Another restriction was gender. Since three men took part in the research future research should consider the male perspective on self-care and secondary trauma in classroom teachers. According to Anderson et al. (2020) socioeconomic status (SES) has a direct correlation to childhood trauma. This study was limited in examining the correlation between SES factors and childhood trauma. Further investigation into SES factors and trauma would provide for a broader study.

The fact that snowball sampling was used to select participants could potentially be a drawback of this study. The study was referred to as an investigation into secondary trauma for educators. It's possible that only individuals who were previously curious about trauma and

aware of their prior trauma knowledge were drawn in by the stated purpose. The inability to duplicate a study is the final intrinsic constraint of qualitative research (Theofanidis & Fountouki, 2019). This restricts the study's applicability to broader populations. A more varied sample of people from various places would yield a study that is more transferable and applicable.

Recommendations for Future Research

The research concentrated on the perceptions of professional development, and on the self-care, interventions utilized to aid twelve classroom teachers in Southeast Tennessee deal with their secondary trauma. Based on the study's data, implications, delimitations, and limitations, the following recommendations for further research are made. This study made a significant contribution to the body of knowledge regarding classroom teacher's secondary trauma. However, future studies on this subject should be investigated.

It is necessary to conduct quantitative research to broaden the study's scope. Since this study was limited to mostly women in Southeast Tennessee, studies incorporating participants from other regions—such as more male classroom teachers—would offer different perspectives on this issue. Due to the wide variations in practices, cultures, and customs, research involving respondents from other areas may contain sociological and cultural perspectives that are different from those found in Southeastern Tennessee. Since many of the participants in the study were White, more ethnic groups should be included in future research. Some of the distinctive cultural experiences might therefore be absent as a result. Future research on the topic of secondary trauma and self-care practices among classroom teachers who identify as Christian-based may

also be conducted. Future research on the effects of secondary trauma on other kinds of classroom teachers can explore a variety of avenues with these topics.

It is important to note that the participants in this study who volunteered were able to recognize the symptoms of secondary trauma in themselves, which enabled them to actively participate and share their experiences. This suggests that these individuals had a certain level of comfort in discussing mental health-related issues, an important factor that likely influenced their willingness to contribute to the research. The teachers who participated also tended to see themselves as part of the solution, suggesting a proactive stance toward addressing secondary trauma. However, this study might not have captured the voices of teachers who have experienced significant secondary trauma but chose not to participate to avoid re-triggering their own trauma. These individuals, as well as those who have left the profession due to secondary trauma, represent a critical group whose perspectives could provide deeper insights into the issue. Understanding the experiences of teachers who leave the field due to trauma would further illuminate the challenges of addressing secondary trauma in educational settings.

Additionally, future research could benefit from employing a systems theoretical lens, such as Uri Bronfenbrenner's (1979) Ecological Systems Theory. This approach can provide a broader perspective by considering the interplay between students, teachers, administrators, families, and the community at large. Viewing secondary trauma through this lens could enhance understanding not only of effective interventions but also of preventative measures. By acknowledging the interconnectedness of these various systems, researchers and policymakers can better identify strategies to mitigate secondary trauma. Applying this model might also offer insights into how to address the self-care needs of teachers, particularly through discussions with school administration. The model emphasizes the need for administrative support and

institutional policies that recognize the significance of self-care, paving the way for systemic changes that protect educators from the long-term effects of secondary trauma.

Summary

The lived experiences of classroom teachers in southeast Tennessee who have gone through secondary trauma, shared their perspectives on professional development and used self-care as a coping strategy were investigated in this hermeneutical phenomenological study. In addition, the study was conducted in light of the secondary traumatic stress theory of self-care and the constructivist theory of self-development as they related to the experiences of the participants. The results of this study demonstrated how, though in different ways, classroom teachers were affected by secondary trauma. The participants recognized dearth of knowledge shaped their opinions about secondary trauma. It was discovered that classroom teachers required more administrative support and professional development on secondary trauma to help them treat traumatized students more effectively.

The participants talked about their experiences and difficulties in caring for traumatized students. Throughout the research participants shared about their insufficient professional development on secondary trauma, leaving classroom teachers without the necessary skills and knowledge to do their jobs well. This study emphasizes the importance of ensuring classroom teachers receive education in dealing with secondary trauma due to its high probability of occurrence during their routine duties. The study also demonstrated a lack of knowledge about secondary trauma, as evidenced by the participants' incapacity to correctly define the term. Participants in the interviews struggled to describe secondary trauma. Although some participants were able to define the phenomenon and gave examples, it was noted that there was uncertainty in the comprehension of the phenomenon.

Classroom teachers described how academic performance is not always positively correlated with the emotional well-being of students. The experiences of the participants with secondary trauma allowed for the identification and description of emotional reactions. A few of the feelings expressed were helplessness, despair, overwhelm, and disappointment. Additionally, participants found it difficult to remain composed when educating with students who have experienced traumatic experiences.

The participants described different coping mechanisms and self-care they employed to develop resilience after experiencing secondary trauma. Participants acknowledged how coping mechanisms assisted them in overcoming the emotional reactions they encountered when teaching traumatized students. The participants discussed the significance of coping mechanisms in upholding a positive professional and personal life balance. The participants believed it was critical to comprehend how practicing self-care boosted their self-esteem and enabled them to inform management about secondary trauma and the detrimental effects that may result from this problem.

Classroom teachers can lessen feelings of overwhelm and loneliness by creating a supportive environment. Co-worker support and its advantages were defined within this study. The participants explained how peer support fostered an atmosphere that allowed for option exploration, problem solving, and decision-making regarding the best course of action to take for educators. Some of the participants in the interview acknowledged the importance of seeking advice from other educators for personal as well as professional growth. Through peer consultation with others, respondents were able to establish connections with one another and learn about contemporary best practices, including conflict resolution techniques.

Future research should investigate the dearth of resources that classroom teachers can use to lessen the effects of secondary trauma. Teachers may benefit from research on how individuals manage symptoms of secondary trauma. A knowledge base derived from this kind of research could help teachers reduce the phenomenon, which would be beneficial to them. Future research on secondary trauma should focus on bringing the phenomenon to light and discussing preventive measures in relation to classroom teachers since most studies on the subject typically focus on behavioral health professionals, including social workers or trauma workers.

Classroom teachers and school personnel must understand the psychological ramifications of secondary trauma to prevent burnout and create a more positive work environment. The study's findings provide crucial information that highlights the need to spread knowledge about secondary trauma as it impacts educators' well-being. The researcher anticipates that there will be more of an emphasis on investigating intervention strategies like self-care as awareness increases.

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APPENDIX A**Consent**

Title of the Project: From Perspective to Practice: Investigating Elementary Educators' Insights into Secondary Traumatic Stress in the Classroom

Principal Investigator: Cassie Bailey, Doctoral Candidate, School of Behavioral Sciences, Liberty University

Key Information about the Research Study

You are invited to participate in a research study. To participate, you must be certified classroom teachers, who work in a K-5 setting, who hold a current teaching license and have experience working with one or more adolescents who have encountered at least one traumatic.

Things you should know:

- The purpose of this study is to provide a description of the experiences of K-5 primary school teachers who interact with traumatized adolescents in a public-school environment in Tennessee's Southeast. If you chose to participate you will be asked to participate in a one-on-one, audio- and video-recorded online interview. Participants will also be asked to do member checking this includes reviewing their interview transcripts, and the developed themes, to check for accuracy or confirm agreement. It should take approximately 30-90 minutes to complete the procedures listed.
- Participants should not expect to receive a direct benefit from taking part in this study.
- Taking part in this research project is voluntary. You do not have to participate, and you can stop at any time.

Please take time to read this entire form and ask questions before deciding whether to take part in this research.

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

The purpose of this study is to describe the experiences of educators who work with students that have experienced trauma in Tennessee's Southeast region. The everyday contact instructors have with kids who have undergone trauma are considered teachers' experiences for the purposes of this research. The knowledge obtained will direct the creation and successful use of trauma-informed treatment in the field of education.

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. Complete an online one-on-one interview with open-ended questions. The conversation will be audio- and video-recorded for transcribing purposes and last between 30 and 60 minutes.
2. Participants will also be asked to do member checking this includes reviewing their interview transcripts, and the developed themes, to check for accuracy or confirm agreement. This process should take approximately 30 minutes.

How could you or others benefit from this study?

Participants should not expect to receive a direct benefit from taking part in this study.

Benefits to society include giving advice to the school sector on how to help K–5 classroom instructors work more effectively with pupils who suffered trauma and self-care techniques that are available. Benefits to society also encompass an enriched compilation of studies that could potentially enhance our grasp on the world. Moreover, they can lead to pragmatic uses in psychiatric health and educational counseling related specifically to indirect trauma experienced by classroom teachers.

What risks might you experience from being in this study?

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

I am a mandatory reporter. During this study, if I receive information about child abuse, child neglect, elder abuse, or intent to harm self or others, I will be required to 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.

- Participant responses will be kept confidential by replacing names with pseudonyms.
- Interviews will be conducted in a location where others will not easily overhear the conversation.
- Data will be stored on a password-locked computer and in a locked filing cabinet. The researcher will have access to the data. After five years, all electronic records will be deleted, and all hardcopy records will be shredded.
- Recordings will be stored on a password-locked computer. The researcher will have access to the recordings. After five years, the recordings will be deleted.

Is study participation voluntary?

Participation in this study is voluntary. Your decision on whether to participate will not affect your current or future relations with Liberty University or Cleveland City Schools. If you decide to participate, you are free to not answer any question 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, please contact the researcher at the email address/phone number included in the next paragraph. Should you choose to withdraw, all data collected from you, will be destroyed immediately and will not be included in this study.

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

The researcher conducting this study is Cassie Phillips. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact her at [REDACTED] or [REDACTED]. You may also contact the researcher's faculty sponsor, Dr. Catherine Packer-Williams, at [REDACTED].

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

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

Disclaimer: The Institutional Review Board (IRB) is tasked with ensuring that human participants research will be conducted in an ethical manner 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.

Your Consent

By signing this document, you are agreeing to be in this study. Make sure you understand what the study is about before you sign. You will be given a copy of this document for your records. The researcher will keep a copy with the study records. If you have any questions about the study after you sign this document, you can contact the study team using the information provided above.

I have read and understood the above information. I have asked questions and have received answers. I consent to participate in the study.

☐ The researcher has my permission to audio-record and video record me as part of my participation in this study.

Printed Subject Name

Signature & Date

APPENDIX B

IRB Approval Letter



July 18, 2024

Cassie Phillips
Catherine Packer-Williams

Re: IRB Exemption - IRB-FY23-24-2019 From Perspective to Practice: Investigating Elementary Educators' Insights into Secondary Traumatic Stress in the Classroom

Dear Cassie Phillips, Catherine Packer-Williams,

The Liberty University Institutional Review Board (IRB) has reviewed your application per 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 described in your IRB 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, **which you must use to conduct your study**, can also be found on the same page under the Attachments tab.

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

Appendix C

Recruitment Letter

Dear Potential Participant,

As a doctoral candidate in the School of Behavioral Sciences at Liberty University, I am conducting research as part of the requirements for a Doctorate in Community Care and Counseling -Traumatology degree.

The title of my research project is: From Perspective to Practice: Investigating Elementary Educators' Insights into Secondary Traumatic Stress in the Classroom.

The purpose of my research is to describe the experiences of educators who work with students that have experienced trauma.

Participants must hold a current teaching license and have experience working with traumatized adolescents in a K-5 educational context. Participants will be asked to part in a one-on-one, audio-recorded, in-person interview. Participants will also be asked to do member checking this includes reviewing their interview transcripts, and the developed themes, to check for accuracy or confirm agreement. It should take approximately 60-90 minutes to complete the procedures listed. Names and other identifying information will be requested as part of this study, but the information will remain confidential, and pseudonyms will be used in all written work.

To participate please complete the applicable instructions. To complete the screening survey, complete the attached survey and return it by email to.

If you meet my participant criteria, I will contact you to schedule an interview.

A consent document will be emailed to you if you meet the study criteria one week before the interview. The consent document contains additional information about my research.

Sincerely,

Cassie Bailey Phillips
Behavior Support



Appendix D

Screening Survey

For purposes of this study: Secondary Traumatic Stress is defined as the behaviors that arise due to knowledge of a traumatic event experienced by a student in one's classroom.

1. Are you a certified classroom teacher that holds a valid teaching license and currently teaching in a K-5 setting?
2. Have you interacted with a learner who has faced one or multiple traumatic events?
3. Have you experienced distressing recollections or discomfort related to the trauma the student(s) have endured?
4. Have you had any feeling of emotional numbness?
5. Do you tend to avoid anything that stirs memories of the troubling event that was shared with you?
6. Have you thought about your students and their trauma when you did not intend to do so?
7. Have you had any trouble struggling to focus on daily work task?
8. Have you shared your experiences with others including family, friends, or a mental health professional?
9. Name
10. Email Address/Phone Number

Appendix E

Interview Questions/Guide

Hello, and thank you for taking the time to participate in this interview. My name is Cassie Phillips, and I am a doctoral student at Liberty University, earning my degree in Community Care and Counseling. I am conducting this study on secondary trauma experienced by teachers for my dissertation. Secondary trauma refers to the emotional and behavioral effects that can occur when you, as educators, learn about traumatic events that your students have experienced.

Today, I am here to listen to your experiences, insights, and challenges related to secondary trauma in the classroom. Your input is incredibly valuable and will help us better understand how to support teachers in managing and coping with these difficult situations.

Before we begin, I want to assure you that your responses will remain confidential, and your privacy will be respected. Please feel free to share openly and honestly. There are no right or wrong answers, and your perspectives are essential to our research. Once again, thank you for being here and your willingness to share your experiences. Let us start the conversation.

- Please introduce yourself and share where you currently teach.
- How many years have you been a classroom teacher?
- What grades have you taught?
- What led you to pursue a career in the educational field?

Standardized Open-Ended Semi-Structured Interview Questions

Secondary Traumatic Stress

1. What methods do you utilize to become more aware of your students' experiences relating to trauma?

2. Would it be possible for you to recount a specific incident involving one student who had experienced trauma?
3. Can you detail how this particular encounter was processed at the moment and in its aftermath?

Professional Development

4. Describe your personal experience with secondary traumatic stress as an educator and how it has impacted your professional and personal life.
5. What specific training or resources have you accessed or been provided with to address secondary traumatic stress in your role as an educator?
6. How effective do you perceive the current training programs to be in mitigating the effects of STS? Can you provide examples of strategies or techniques you found particularly helpful or ineffective?
7. Have you noticed any gaps or areas for improvement in the STS training available to educators? If so, what suggestions do you have for enhancing these programs?
8. In your opinion, what role should educational institutions and administrators play in supporting educators experiencing secondary traumatic stress beyond providing training?

Self -Care

9. As an educator how would you describe self-care?
10. Can you share any activities that have been a part of your routine or those that are presently serving to enhance this sense of well-being?
11. Could you articulate the advantages of adopting practices focused on sustaining oneself physically and mentally?

Shaping their Roles as Educators

12. What unique difficulties have you faced in supporting students who have been through traumatic events?
13. How have the distressing events encountered by your students influenced your instructional approach?
14. Have you experienced increased levels of stress in your job as a result of interacting with students who have endured traumatic experiences?
15. As an educator do you feel that the students who have endured trauma receive more or less support from you throughout the school day?

Concluding Questions

16. Would you like to share any other experiences, memories, or situations involving traumatized children?
17. Are there any other questions or observations you would like to share?

APPENDIX F**Reflective Journaling Excerpt**

July 22, 2024:

Jocelyn was a little nervous to be a part of this study. She shared that she had never done an interview before and though she had shared her traumatic experiences with her therapist she had never shared them with another outside person. My goal was to help her feel and at ease with the interview. I wanted her to be able to share freely about her experiences. I also wanted to ensure that I allowed her the freedom to speak, and I listened without interruptions and that I did not allow my personal feelings and thoughts to interview with Jocelyn sharing her experiences.

July 24, 2024:

Harris and I are getting ready meet online for our interview. I conducted several interviews over the past couple of days however today is the first interview with a male and I am curious if the conversation will flow the same as it did with the female participants. During the interview, it is crucial that I pay attention to what he has to say without drawing any conclusions too quickly. As a former classroom educator, I know I cannot allow my personal experiences to impact the interview. I am also aware that I need be attentive to what Harris says and to ask follow up questions for clarification as needed.

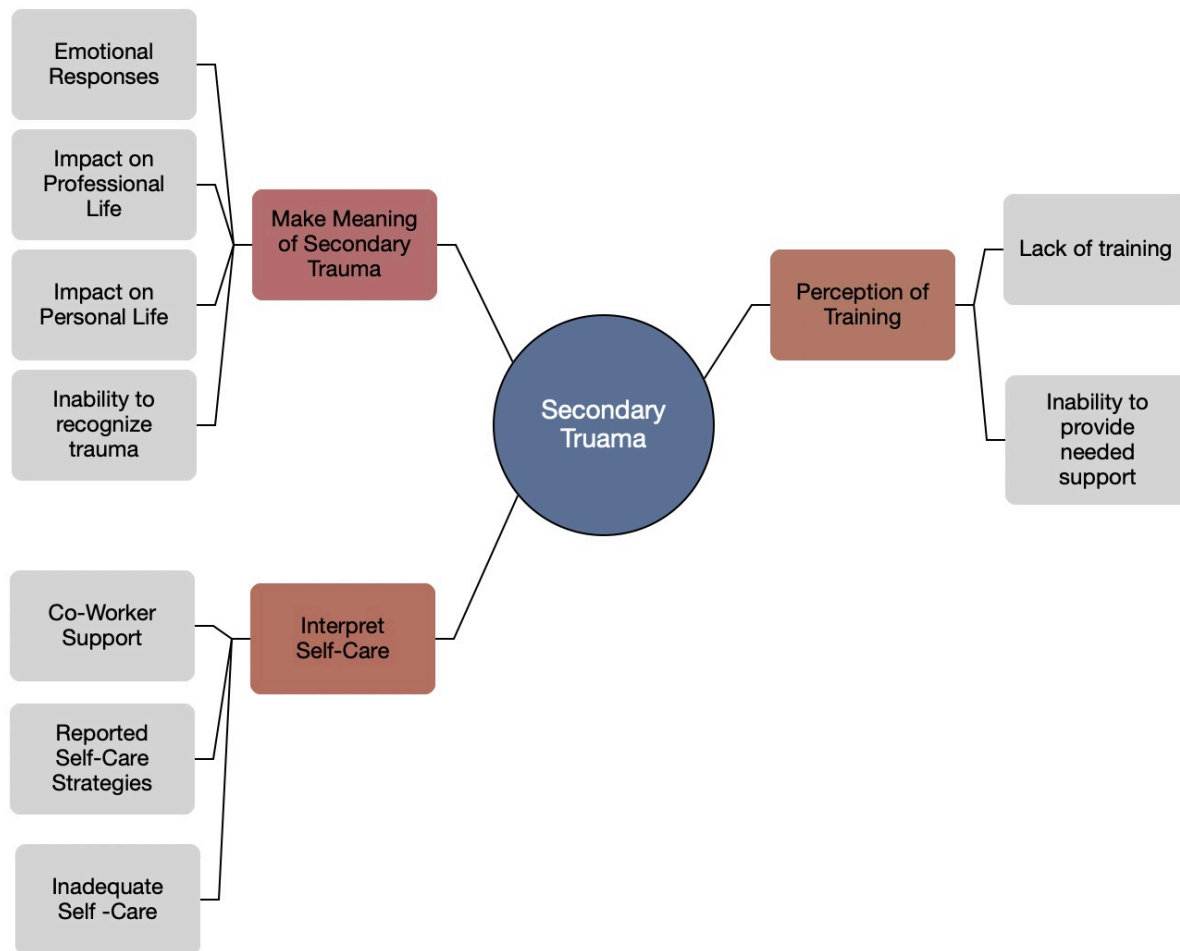
July 25, 2024:

I just finished an interview with Lori. Today I have completed three interviews and they all shared different experiences however they all revealed a commonality: the participants lacked a thorough understanding of secondary trauma before the interview. Participants also discussed their emotional reactions to the trauma experienced by the students. At times participants commented to, "Do you know what I mean", when referring to emotional responses. I had to

ensure I did not comment on their emotional responses and instead listened to their experiences without sharing my own experiences or reflecting on their experiences.


Appendix G


NVivo Thematic Concept Map



Appendix H

Permission to use Model

Bailey, Cassie Bailey
To: figley@tulane.edu





Fri 4/12/2024 10:22 AM


Dear Dr. Figley,

I am completing my Ed.D. at the Liberty University in Lynchburg, VA . The title of my dissertation is:
From Perspective to Practice: Investigating Elementary Educators' Insights into Secondary Traumatic Stress
in the Classroom

I would like your permission to use your figure: Compassion Fatigue Resilience Model. I will include an acknowledgement of the author and the source of the figure and be happy to include specific wording, if you have a preferred form of acknowledgement. My dissertation will be digitalized and available online through the Liberty University Library and other third-party databases. Thank you for your time. If you agree to this use, please confirm your agreement by signing the acknowledgment.

Best,
Cassie Phillips

Charles R. Figley via ResearchGate<no-reply@researchgatemail.net>
To:  Bailey, Cassie Bailey



Fri 4/12/2024 10:32 PM

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ResearchGate

Charles sent you a message



Charles R. Figley
Tulane University

Of course you can have my permission to use the model, with best wishes