Teaching through Collective Trauma in the Era of COVID-19: Trauma-informed Practices for Middle Level Learners

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Abstract

The COVID-19 pandemic has had an unprecedented impact on education and the ways in which teachers engage their students. Given the individual and collective traumatic nature and impact of this global health crisis, we provide specific strategies for addressing the needs of young adolescents while teaching remotely. Specifically, we posit that middle level educators should embed trauma-informed practices, focused on restoring safety and modeling adaptive behaviors, into their remote instructional practices. Recognizing that the COVID-19 crisis has a collective traumatic impact, affecting the lives and wellbeing of students and teachers alike, we also discuss the importance of self-care, providing strategies and resources for teaching professionals. Finally, we provide some guiding thoughts on how teachers might approach moving forward upon returning to face-to-face learning in the physical classroom.

Introduction

The United Nations Educational, Scientific and Cultural Organization [UNESCO] (2020) reports that 190 countries worldwide have closed schools for the remainder of the academic year as a result of COVID-19. In the United States, this translates to the disruption of the academic year for more than 55 million K-12 students (EdWeek.org, 2020) in public and private schools. While many questions remain about when, how, and under what circumstances schools will reopen, it is clear that students, parents, teachers, families, schools, and communities are forever changed by the impacts of the COVID-19 pandemic. As educators in this moment, we are working to triage the situation by providing the best-we-can-do remote learning experiences, working to stay connected with our students and colleagues, and keeping our own families safe, healthy and sane. However, as we face the inevitable return to face-to-face instruction, we must consider how this **disruption to every aspect of our students' lives** is impacting their social and emotional well-being as well as that of our colleagues and ourselves as teachers. It is important that we recognize this social disruption as a psychologically traumatic event that could have cumulative effects with long-term consequences. Approaching our current remote classrooms as

well as our return to the physical classroom through a trauma-informed lens has the potential to recognize the strengths we all bring to the situation, support the resiliency of our students, and provide learning opportunities that support social and emotional health and opportunities for recovery for everyone.

Trauma, COVID-19, and the Young Adolescent

Psychological trauma generally stems from one or more physically or emotionally harmful events that interrupt **a person's** ability to function (Substance Abuse and Mental Health Services Administration [SAMHSA], 2019) or respond in an adaptive way to the resulting stress in their environment. When trauma occurs, an individual has become overwhelmed by stress to the degree that their physical, mental, emotional, or social wellbeing has been compromised (Wolpow et al., 2016). On an individual level, trauma can include, but is not limited to, experiences of domestic or interpersonal violence, persistent poverty, or community violence. On a larger scale, trauma can result from encountering war or famine, natural disasters, or a pervasive health crisis, such as the COVID-19 pandemic. Such widespread traumatic experiences create *collective trauma*, which occurs when a traumatic event impacts an entire community or

society, having a communal impact and creating a shared memory of the event(s) (Hirschberger, 2018). These memories generally have a lasting societal influence, as they often become an indicator for future generations of potential threats and ways to navigate them.

The myriad negative effects of trauma on young adolescents has been well-documented. Youth can experience impairments in brain development (Anda et al., 2006; Black et al., 2012), and various aspects of executive functioning, including cognition, comprehension, attention, and behavior regulation **that impede students' ability to focus** on classwork and be successful (Cole et al., 2005). The neurobiological impact of trauma can also result in an inability for young people to verbally articulate their emotions related to the traumatic event(s). This loss of language can impede socioemotional development and make it more common for youth to express their emotions in less healthy ways (Wolpow et al., 2016). As middle level students experiencing the COVID-19 crisis grapple with these individual effects of trauma, they may also be struggling with the collective traumatic impact of the pandemic—collective trauma creates a mutual injury to our view of the world, challenging our notions about safety, our ability to control our own circumstances, and the human experience (Hirschberger, 2018).

The immediacy of the COVID-19 onset makes it difficult to provide accurate data on the current prevalence of childhood trauma caused by the pandemic. However, lessons learned from previous public health crises would indicate that COVID-19 has undoubtedly created trauma for many of our middle level students—some more than others. In one study of youth behavioral health during a public health crisis, researchers found that approximately one-third of children who were quarantined or socially-isolated developed post-traumatic stress disorder (Liu et al., 2020; Sprang & Silman, 2013). Additionally, youth who endured this experience were also at a higher risk for various other mental health diagnoses (i.e., adjustment disorder, acute stress disorder). Furthermore, literature has described the ways in which national crises, such as the COVID-19 pandemic, can increase instances of child abuse and neglect among our most high-risk youth populations, as parents grapple with myriad additional stressors inside and outside of the home (Abramson, 2020).

Young people are now faced with both real and imagined fears about their own health and the health and mortality of their loved ones. They are also coping with grief and loss over the lack of emotional connectedness due to being socially isolated from their peer group, cancelled activities and milestones (e.g., birthday celebrations, school ceremonies, etc.), and disruptions in academic progress due to the interrupted school year. In addition, young adolescents also lack many of the typically normative opportunities to test boundaries and social norms because of more restrictive living situations. As with all forms of childhood trauma, this collective traumatic experience may have fundamentally shattered youths' notions of physical and social safety and quite possibly created disruptions in the development of adaptive behaviors. We suggest that these (i.e., safety and adaptive behaviors), along with a strengths-based perspective, may be crucial areas of focus for those teaching and engaging students remotely during this crisis.

What is Trauma-Informed Practice?

As defined, trauma-informed practice (TIP) includes recognizing the widespread nature of trauma, the ways in which traumatized youth are impacted, and the responses that support traumatized youth rather than re-traumatize (SAMHSA, 2015). In school settings, TIP is a holistic and dynamic cultural shift from traditional school practices, which generally includes some level of on-going professional development related to trauma and youth development (Crosby et al., 2015) to aid teachers and other school personnel in understanding the prevalence and impact of trauma on students. TIP in schools also means implementing trauma-sensitive practices to respond to student**s' needs**, including flexible instructional practices, modified classroom management styles that prioritize relationships over curriculum (Crosby et al., 2015), sensitive—rather than punitive—disciplinary practices (Baroni et al., 2016), and a school-wide culture of support and self-care (Oehlberg, 2008). It is important to note that TIP is not one-size-fits-all program or intervention—it is dynamic and must change according to the needs of those in the impacted system.

As we endeavor to meet the academic needs of middle level students in the midst of the ever-changing social landscape created by the COVID-19 pandemic, middle level educators

have had to swiftly modify their academic practices, perhaps become familiar with new technologies, and also translate much of their curricula to platforms that allow students to still learn from their homes while socially distancing themselves. As a holistic framework for school practice, some aspects of TIP have become inevitable in our current social climate (e.g., many of our instructional practices are taking place online rather than face-to-face and have probably never been more flexible than they are now), while many other key elements of addressing student trauma have become much more challenging to accomplish due to our lack of physical proximity. For example, TIP promotes student-teacher relationships as a primary vehicle for addressing student needs and establishing a sensitive classroom climate. However, necessary social distancing guidelines in many school districts have made it more difficult for teachers to foster these types of corrective relationships with their students. As a dynamic framework, TIP in the era of COVID-19 may require that middle level educators focus specifically on the urgent needs of our young adolescents (i.e., safety and adaptive behaviors). We posit that teachers should make more intentional instructional decisions during remote learning to address these pressing needs, using their modified instructional practices to assist students in restoring a sense of safety and to model adaptive ways of functioning.

TIP During COVID-19: Restoring Safety Through Remote Learning

As previously noted, the impact of trauma can make it extremely difficult for young adolescents to give substantial attention to the cognitive processes necessary for school success. In order for students to engage the higher executive functions, they often need a comfortable learning environment where they can feel safe and remain emotionally-regulated (Wolpow et al., 2016). The fears around health and illness, disruptions to our social wellbeing, and general loss of normalcy created by the COVID-19 crisis has equated to a lack of safety for our young adolescents—the world is no longer the safe and consistent place that it used to be. For some of our students, who were already experiencing their own individual trauma, COVID-19 made an unsafe world feel that much more precarious. Middle level educators looking to embed TIP into their instruction must acknowledge these realities when designing coursework and engaging with students. We offer the following

strategies for recreating a sense of normalcy as a means to assist students in restoring safety while learning in a remote environment.

Middle level teachers should establish consistency in their coursework expectations in order to restore some level of normalcy. These expectations should be communicated to students and their caregivers very clearly, with outlined instructions as well as examples of routines for students to follow. Helping students to maintain familiar routines provides consistency and a level of autonomy that is helpful to the traumatized brain during chaotic life situations. Another aspect of normalcy that students are lacking is the typical socializing and recreational experiences common in middle school. Therefore, assignments should include creative opportunities for students to engage with their peers, as well as something recreationally-focused (Teaching Tolerance Staff, 2020). Teachers should also exercise flexibility and empathy when dealing with students who may be struggling with the coursework. Additionally, they should establish a plan for communicating with caregivers, particularly those who may be experiencing greater challenges due to work/work-from-home obligations, illness, financial loss, etc.

TIP During COVID-19: Modeling Adaptive Behaviors Through Remote Learning

While young adolescents are struggling to cope, they may be also dealing with the difficulties of expressing their challenges in healthy ways. There are a number of strategies that middle level educators can use to model adaptive behaviors and enable them to process their experiences. Teachers can craft assignments to include opportunities for students to write or draw about their experiences with and understanding of COVID-19. This provides students with the chance to not only process their experiences, but to reflect on language that adequately expresses their feelings. To assist students in learning appropriate feelings language, teachers can also include check-ins in their activities, where students have to verbally identify their feelings (Teaching Tolerance Staff, 2020).

Teaching these adaptive behaviors through relevant content is essential for young adolescent students. Utilizing interdisciplinary units that include topics related to social and emotional wellbeing can also play a significant

role in helping students consider the content through the lens of their lived experiences. For example, an interdisciplinary unit exploring the economic and social impacts of the Influenza Pandemic of 1918 on society could help students process their own experiences of loss due to COVID-19. For some, reading firsthand accounts of **others'** experiences may help to normalize their feelings and experiences. For others, it offers hope of recovery after extreme disruption to the way of life. One historical fiction text in particular, *One For Sorrow* (Hahn, 2017), tells of the realities of life during the 1918 Flu Pandemic from a 6th grader**'s perspective**. Utilizing resources that **connects to students'** experiences validates their uncertainties, offers perspective on their circumstances, and provides them with a sense of understanding of their own feelings. Additionally, this text provides an historical context of similar collective traumas, which allows students to see a path forward from COVID-19. While it is useful for students to read texts that describe similar circumstances of loss or trauma, this should be done cautiously to avoid retraumatizing. TIP does not mean avoiding negative material or material that causes negative emotions. TIP means providing authentic reflective opportunities for students to unpack their thoughts and feelings about the material collectively, as a class. Exploring this type of material (i.e., learning that negative emotions are inevitable), while also modeling how to move through the emotions that the material creates, models a healthy response to disturbing experiences like the COVID-19 crisis. This is also an important part of socioemotional learning for students, especially young people who are learning how to deal with their feelings about the world not being as safe as they thought it to be.

We know that some young adolescents have experienced the COVID-19 crisis with significantly less household and community resources than their counterparts. Young people from traditionally disadvantaged populations and those with pervasive individual trauma carry additional burdens into their learning experiences. Consistent with recommendations for online learning environments for adolescents, teachers should work intentionally to engage both students and caregivers (Borup et al., 2014), especially when working with families who may be experiencing significant hardship or stress. Instructionally, topics that examine the structural inequities brought to light during the COVID-19 pandemic are also possibilities to

consider and offer middle level educators the opportunity to use authentic interdisciplinary content and skills to critically examine issues of classism and racism as well as other forms of discrimination at play in their communities. These academically oriented lessons should also support learners to create a way forward through solutions and advocacy with, for example, social action plans inclusive of their experiences and voices.

Teachers, Self-care, and COVID-19

As we think about the needs of our students, we must also consider the ways in which collective trauma is impacting our own wellbeing, acknowledging that teachers are grappling with the collective impact of COVID-19, much like their students. One of the greatest ways that we can model adaptive behaviors for our students is by exercising appropriate self-care ourselves. In fact, appropriate self-care among education personnel has been considered an ethical imperative (Wolpow et al., 2016), not a luxury. It is also essential to healing-centered engagement (Ginwright, 2018). Self-care begins with understanding that our own health and well-being impacts how we care for our students and how our students engage in the classroom (Arens & Morin, 2016). As teachers and students return to school when they reopen, it will be critical for them to not only have an understanding of self-care, but also a plan for enacting ways to cope with their own trauma of COVID-19 and that of their young adolescent students.

Self-care is the deliberate practice of engaging in actions or perspectives to improve and care for **one's mental, emotional, spiritual and physical** health. For teachers this practice can induce guilt because of the tendency to focus on the needs of their students first. This is understandable, but self-care supports a **teacher's health and well**-being. Self-care does not have to be expensive or time consuming. There are many strategies that are simple and **supportive of a teacher's well**-being whether they are teaching remotely or face-to-face. For example, a few simple self-care actions include: being kind to yourself—use positive self-talk and celebrate all you are doing well, track your sleep habits and make sure you are getting enough re**st, be comfortable saying "no" to more** obligations, and going for a quick walk to get fresh air. There are a number of resources teachers can utilize to plan for and engage in

self-care. One excellent resource from the online manual, *The Heart of Learning and Teaching: Compassion, Resiliency, and Academic Success*, includes a Self-care Plan (see Wolpow et al., 2016).

Returning to Face-to-Face Learning: Healing-Centered Engagement

When classes do return to traditional classroom settings, teachers will work to ease the transition back to the routines, rituals, and procedures of the typical school day. However, the collective **memory of our society's experience with COVID-**19 will remain. Therefore, as teachers engage in their planning for this return, they should also consider how to be responsive to the ways in which trauma will impact the academic performance of their students. Reframing the collective experiences of everyone in the community toward healing-centered engagement (Ginwright, 2018) enables young adolescents to acknowledge that they are more than what happened, and in fact, they may emerge with more self-awareness about their own emotional needs as a result of their time in pandemic-induced realities. While we do not expect youth to spend their time accomplishing lofty goals, we do believe that celebrating their pride for accomplishments and for what they learned about themselves and the human condition centers their healing and agency. To aid students in this type of development, we urge educators to invest in resources that can assist them in implementing healing-centered and trauma-sensitive practice. One such article, *Social Justice Education through Trauma-Informed Teaching* (see Crosby et al., 2018), provides detailed content related to embedding trauma-informed practice into middle level teaching in the physical classroom.

Conclusion

The collective and individual experiences of the COVID-19 pandemic for young adolescents promises to be the source material for research and reflection created by teachers and students alike. By emphasizing safety and socioemotional learning, teachers can play a pivotal role in assisting middle level students through this challenging landscape. Post-pandemic schooling for middle level learners will also reflect these experiences. We view this time as an occasion to pause business-as-usual and in its place create learning that honors the assets of middle level learners while being both trauma-informed and healing-centered.

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