

Volume 1

**TEACHER EXPERIENCES OF SUPPORTING PUPILS EXPOSED TO TRAUMA
AND OF IMPLEMENTING TRAUMA-INFORMED APPROACHES.**

by

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ABSTRACT

Trauma is an increasingly popular concept in both the field of psychology and across wider society. The existing research is clear that developmental trauma can have a harmful and lasting effect on an individual. Although the true prevalence of developmental trauma is unknown, some estimates suggest as many as one in five adults experience at least one form of child abuse before the age of 16 (Office for National Statistics, 2020). Within the classroom, teachers play a vital role in caring for children who have experienced trauma, and their relationships can help buffer the effects of adversity (e.g. Bethell et al. 2019). This research aims to explore teachers' experiences of supporting children who have been exposed to developmental trauma, and their experiences of implementing trauma-informed approaches following whole-school training. Seven teachers took part in semi-structured interviews. The data obtained was analysed using Reflexive Thematic Analysis (Braun & Clarke, 2022). A total of five major themes were developed: 1) development of practice, 2) managing the demands of the role, 3) understanding of theory, 4) the adult is the intervention, and 5) home factors. Throughout the interviews, participants shared both the challenges they face in supporting children who have experienced trauma and their experiences of the positive impact of trauma-informed approaches. Overall, best practice when implementing a trauma-informed approach was based on building trusting relationships to help the young person feel safe at school and using intentional communication to help them understand and regulate their emotions more effectively. Importantly, participants expressed that trauma-informed approaches should be universal. This thesis concludes with recommendations for school leaderships teams and educational psychologists to consider.

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LIST OF ABBREVIATIONS

ACE(s)	Adverse Childhood Experience(s)
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ARTIC	Attitudes Related to Trauma Informed Care
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CSEW	Crime Survey for England and Wales
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CT	Complex Trauma
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CYP	Children and Young People
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DSM	Diagnostic and Statistical Manual of Mental Disorders
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DSM-3	Diagnostic and Statistical Manual of Mental Disorders (3 th ed.)
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DSM-5	Diagnostic and Statistical Manual of Mental Disorders (5 th ed.)
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DT	Developmental Trauma
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EP(s)	Educational Psychologist(s)
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ICD-11	International Classification of Diseases (11 th ed.).
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IPA	Interpretative Phenomenological Analysis
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LAC	Looked after children
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ONS	Office for National Statistics
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PCE(s)	Positive Childhood Experience(s)
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PTSD	Post-Traumatic Stress Disorder
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RTA	Reflexive Thematic Analysis
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CHAPTER ONE: INTRODUCTION

1.1 Overview of Chapter

This introductory chapter outlines the context for the current research and describes developmental trauma (DT) and related terminology, the current national picture of DT and childhood adversity, the impact of both DT and positive childhood experiences (PCEs) on development, and trauma-informed practice.

1.2 Context of the Research

The research presented in this thesis is an exploration of the views of primary school teachers regarding their experiences of supporting children who have experienced trauma, and their experiences of implementing trauma-informed approaches following whole-school training. The training package that the participants in this research engaged with was created and delivered by educational psychologists in one local authority, where I worked on placement as a trainee educational psychologist. The conceptual basis of the training is the theory and research related to the impact of developmental trauma, and more specifically the role of key adults in minimising the negative impacts of developmental trauma on children and young people. The key aims of the training are to provide participants with an understanding of attachment theory and the concept and developmental trauma, and of the impact of early experiences. Carefully planned activities are built into the training sessions to build a sense of empathy for children who have experienced trauma. The aim of this is to increase motivation within the participants to adopt trauma-informed approaches, which are exemplified across the sessions. Further information on the training sessions, the overall package of support, and the context for the research is provided in Chapter Three.

1.3 Terminology

The concept of trauma is widely used in scientific, clinical and popular literature. However, there is variation in its definition. Trauma is defined in the *Diagnostic and Statistical Manual of Mental Disorders* (5th ed.; DSM-5) as:

The person was exposed to: death, threatened death, actual or threatened serious injury, or actual or threatened sexual violence, in the following way(s): direct exposure; witnessing the trauma; learning that a relative or close friend was exposed to a trauma; indirect exposure to aversive details of the trauma, usually in the course of professional duties (e.g., first responders, medics). (American Psychiatric Association, 2013, p. 271).

The American Psychological Association (n.d.) defines trauma as “any disturbing experience that results in significant fear, helplessness, dissociation, confusion, or other disruptive feelings intense enough to have a long-lasting negative effect on a person’s attitudes, behaviour, and other aspects of functioning” (para. 1) and that poses a threat to psychological safety by challenging “an individual’s view of the world as a just, safe, and predictable place” (para. 1).

DT generally describes “the impact of early, repeated trauma and less which happens within the child’s important relationships, and usually early in life” (Lyons et al., 2020; p. 5). DT encompasses a wide range of early life events, such as a baby or child who is abandoned or neglected, or who experiences physical, sexual or emotional abuse, or severe health problems and medical interventions (Lyons et al., 2020). Research also suggests that trauma can occur *in utero*, reflecting maternal stress during pregnancy. An unborn baby can suffer trauma if their mother experiences violence, alcohol or substance misuse or severe mental health difficulties during pregnancy (Lyons et al., 2020). Scientific research is now also recognising epigenetic mechanisms as an explanation for the familial effects of trauma. This research suggests that children can be affected by parental trauma that occurred prior to their conception, transmitted through DNA modifications, and thus explaining, in part, the impact of intergenerational trauma (Yehuda & Lehrner, 2018).

Complex trauma (CT) is the exposure to multiple interpersonal traumas, that occur repeatedly or cumulatively over time, and by its nature is often associated with childhood adversity. CT increases the likelihood of post-traumatic stress and psychological difficulties (Briere & Scott, 2015). Although not yet recognised in the DSM-5, the International Classification of Diseases (11th ed.; ICD-11) distinguishes CT as distinct from post-traumatic stress disorder (PTSD), highlighting the complexity

and chronicity of its effects (World Health Organisation, 2019). Individuals who experience CT tend to experience reactions beyond those typically observed in PTSD, captured in the ICD-11 across three key domains: emotion regulation, self-identity and relational capacities (Cloitre, 2020).

Toxic stress is another term used in the literature to describe the experience of children who are affected by frequent, repeated or prolonged periods of adversity or trauma. As a result, this stress causes frequent, heightened, or prolonged activation of the body's stress response systems (Sciaraffa et al., 2018). Such stress can disrupt the developing architecture of the brain and impact an individual's ability to respond and manage stress in the longer term (Sciaraffa et al., 2018).

Trauma is an increasingly popular concept in both the field of psychology and across wider society. Haslam (2016) proposed that the meaning of trauma, and other harm related concepts, has broadened over time. This semantic change process is described by concept creep theory which can occur horizontally (to include new phenomena) or vertically (to include less severe phenomena; Baes et al., 2023). Initially, a traumatic event was described as that which evokes symptoms of distress and falls outside of typical experiences such as rape, military combat and natural disasters (Baes et al., 2023). More recent editions of the DSM have included indirect exposure and less extreme stressors such as business loss or martial conflict (Baes et al., 2023). Broadened harm concepts, such as trauma, may mean that truly harmful or traumatic events are minimised (Dakin et al., 2023). On the other hand, concept creep can create opportunities for positive social change. For example, the inclusion of PTSD in the DSM-3 (American Psychiatric Association, 1980) allowed people to have their difficulties recognised and addressed, thus filling an important gap in theory and practice (Baes et al., 2023). Despite this, further concept creep may result in the overdiagnosis of PTSD (Baes et al., 2023).

Throughout this thesis, the term developmental trauma is used as an umbrella term to capture the range of adverse experiences that children and young people may have experienced. The decision not to use diagnostic labels, such as those recognised by the DSM-5, is based on the premise that the vast majority of the children and young people who have experiences of trauma will not have a diagnosis.

1.4 Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) is a term that is used widely within the literature and is defined as traumatic events that occur during childhood (0-17 years; Centers for Disease Control and Prevention, 2022). ACEs include experiences which impact on an individual's health, well-being and development, such as experiencing or witnessing violence, abuse or neglect. ACEs also comprise of characteristics of the child's environment that can act to undermine their sense of safety and stability, such as familial substance use or mental health difficulties (Centers for Disease Control and Prevention, 2022). The seminal ACE study by Felitti et al. (1998) was one of the largest investigations of the association between early adversity and poor health and well-being outcomes in adulthood. The 10 ACE categories, proposed by Felitti and his colleagues, were organised into three categories: abuse (psychological, physical, sexual), neglect (emotional, physical) and household dysfunction (substance abuse, parental separation/ divorce, mental illness, domestic violence, parent in prison). Felitti et al. (1998) developed a scoring system where each type of ACE counted as one point in the child's overall ACE score. For example, if an individual was verbally abused throughout their childhood, but experienced no other *types* of abuse, as categorised by Felitti et al. (1998), this was counted as an ACE score of one. If a child experienced verbal abuse, had parents who separated and lived with their mother who suffered from mental illness, this was counted as an ACE score of three. This research pointed towards a strong relationship between number of ACEs and problematic health behaviours and outcomes linked to mortality. Since this, there has been considerable interest in ACEs research. The finding that individuals with four or more ACEs are significantly more likely to have poor health related outcomes, has been consistently replicated (Simkiss, 2019).

However, in recent years, the concept of ACEs as a measure of exposure to trauma and adversity has been challenged and criticised (Krupnik, 2018). It is argued that whilst ACE research and data may be useful at the population level, it can be stigmatising and ill-adapted for the individual family or child (Kelly-Irving & Delpierre, 2019). At an individual level, having a high ACE score is not deterministic of poor health outcomes. Furthermore, by adding the number of ACEs to give a cumulative

score, statements about individual risk assume that cumulative patterns of ACEs and their consequences are consistent across individuals. In reality, the severity, frequency, timing and duration of traumatic life events are likely to have ranging consequences for future health outcomes (Kelly-Irving & Delpierre, 2019).

The ten ACE categories are described by critics as limited in the adversity that they identify and are weighted inappropriately (Winninghoff, 2020). ACE categories, selected prior to data collection in the initial research carried out by Felitti et al. (1998), do not recognise all adversities and traumas, excusing important experiences such as cultural and systemic forms of oppression (Winninghoff, 2020). The equal weighting of ACEs means that there is no distinction between severity of experience, for example, an ACE score of one as the result of an amicable divorce between two stable parents is considered to be equitable to an ACE score of one as the result of chronic physical abuse throughout childhood. More recent research highlights this problem further by demonstrating parental divorce and parental imprisonment were unrelated to trauma symptoms in a contemporary youth population (Turner et al., 2020).

Despite this, the ACE framework for understanding the impact of childhood trauma underpins much of the trauma-informed movement within education (Winninghoff, 2020). Extensive ACE research has justified the necessity of trauma-informed practice, particularly in relation to cognition and learning, special educational needs, behaviour and attendance (Perfect et al., 2016). Higher ACE scores have been correlated with lower cognitive function in several domains, including working memory and attentional skills (Park et al., 2014), and language skill development (Segal & Collin-Vézina., 2019). The critics of ACEs warn against their use as a screening tool and their use within education settings, asking professionals to be critical of frameworks which reinforce oppressive narratives and hierarchies about children and their families (Winninghoff, 2020).

1.5 Developmental Trauma in the UK

As DT is an umbrella term used to describe a wide and varying range of stress and trauma experienced by children *in utero* or in their early years, it is difficult to quantify. As a result, there are no formal records of DT prevalence in England or the

UK. There is also no source providing current prevalence of child abuse. The Office for National Statistics (ONS) publish data from the Crime Survey for England and Wales (CSEW), which reports the prevalence of adults who experienced abuse before the age of 16. The CSEW estimated that, in the year ending March 2019, one in five adults aged 18 to 74 experienced at least one form of child abuse (characterised as emotional abuse, physical abuse, sexual abuse, or witnessing domestic violence or abuse in the home) before the age of 16 (ONS, 2020). This is equivalent to 20.7% of the population, or 8.5 million adults (ONS, 2020). Adults reported witnessing domestic violence or abuse in the home, and emotional abuse as the most experienced types of childhood abuse (ONS, 2020). As well as this, 44% of adults who reported experiencing childhood abuse, experienced more than one type of abuse, and this proportion was higher for women (46%) than for men (41%). Around one in seven of the adults who contacted the National Association for People Abused in Childhood helpline have not disclosed their abuse to anyone before, suggesting that the true extent of child abuse prevalence is unknown (ONS, 2020). These statistics are important in aiding understanding of historical abuse. However, they do not provide a clear picture on the current levels of abuse experienced by children and young people (CYP) in England and Wales.

The cohort of children with the greatest exposure to DT (or ACEs) are those who are looked after by the local authority. Looked after children (LAC) are more likely to have been exposed to deprivation, abuse, neglect and parental domestic violence, substance misuse and mental illness (Lyons et al., 2020). In 2021, there were 80,850 LAC in England (Department for Education, 2021). It is reported that abuse and neglect are the most common reasons that children enter the care system (NSPCC, 2021).

1.6 Implications of Developmental Trauma

The effect of early trauma on a developing child is substantial and lasting. Not only are children who have experienced trauma likely to develop unhealthy coping strategies and behaviours in response to threat, they are also not likely to have the opportunity to develop healthy, functional living skills (Lyons et al., 2020). There exists a common narrative that children who experience trauma in their early years

were too young to remember it, or that the trauma occurred too long ago to be the cause of current difficulties. This is particularly prevalent if the trauma does not appear 'typical', the true extent of the trauma is unknown, or the individual (or their family) does not recognise themselves as having experienced trauma (Lyons et al., 2020). However, the research is clear that early life experiences, even those which occur before birth or within the first four years of life (and so cannot be remembered by the individual), shape later development and well-being (Lyons et al., 2020).

During early development, implicit sensory memories are stored in the autonomic systems of the brain (Harricharan et al., 2021). These memories influence an individual's self-perception, their understanding of the world and their actions in response to sensory stimuli (Harricharan et al., 2021). In fact, research has shown that brain development is particularly susceptible to toxic stress experienced in a child's early years, making children who experience DT in their early years particularly vulnerable to negative outcomes (Sciaraffa et al., 2018).

The following sections explore the effect that early childhood trauma has on a wide range of outcomes related to success in the learning context of a school classroom, including social relationships, cognitive ability and academic attainment, and emotional and behavioural regulation.

1.6.1 Social Relationships

Attachment theory suggests that early infant-caregiver experiences play an important role in shaping long-term social and emotional development (Bowlby, 1982; Ainsworth et al., 2015). The security of the attachment between an infant and their caregiver is associated with a wide range of positive psychosocial and social well-being outcomes for CYP, including enhanced peer and adult relationships and social competence (Waters et al., 2010). Lahousen et al.'s (2019) theoretical analysis suggests that traumatic experiences affect a child's ability to form positive attachment relationships, as those who have been subject to abuse or neglect continue to seek out these patterns of attachments in trusted adults, with the belief that all relationships are defined by distrust. This difficulty with accepting trusting relationships is particularly apparent in those who have been harmed by their attachment figure (Pearlman & Courtois, 2005).

Exposure to early trauma can also have a negative effect on the development of typical language and communication skills (Cook et al., 2005). Difficulties with verbal communication can hinder the development of positive relationships with both adults and peers. As well as this, children who have experienced trauma have also been shown to have difficulties with play skills, vital for building early peer relationships within the school context. Children with trauma backgrounds are often hesitant to engage in or initiate play with others; instead they tend to participate in play with younger children and use play to relive or re-enact their trauma experiences (Stubenbort et al., 2010).

National data also exemplifies the impact of trauma during childhood on social outcomes later in life (ONS, 2020). For example, CSEW data reveals that over half (51%) of adults who experience abuse during childhood, go on to experience domestic abuse later in life, compared to those who suffered no childhood abuse. Those who experienced more than one type of abuse, were more likely to experience abuse as an adult (ONS, 2017).

1.6.2 Cognitive Ability and Academic Attainment

The correlation between DT and low academic achievement is strong and well documented within the literature. Research shows that experience of trauma affects the development of executive function skills (e.g. attention) which are vital for success in the classroom (Perry, 2007). Research into teachers' beliefs suggests that this contributes to consistent underachievement in key curriculum related skills such as reading and writing (Martin et al., 2010). The research has also consistently demonstrated that children exposed to chronic trauma have poor academic outcomes, and that this link is mediated by poor mental health. The mental health disorders that have been shown to have the greatest negative impact on academic performance are PTSD, depression, and anxiety (Larson et al., 2017).

In comparison to peers who are not from trauma backgrounds, those who have experienced DT, score lower on standardised achievement tests, are more likely to experience academic failure, and are more likely to have an Individualised Education Plan (Anda et al., 2006).

1.6.3 Emotional and Behavioural Regulation

Children who have experienced trauma are more likely to exhibit internalising and externalising behaviours in the classroom as a response to stress. Research into teachers' perceptions suggests that typical behaviours of students experiencing such stress are withdrawal, anxiousness, impulsivity, and hyperactivity (Martin et al., 2010). In the context of the classroom, these behaviours are often described as poor behaviour or acts of non-compliance. Perry (2007) proposes that the difficulty for individuals who have experienced trauma, is that even when they transition to a safe environment, their survival response remains active. This means that unknown or seemingly small events within the environment can signal extreme threat, and lead to heightened emotional or behavioural responses (Lyons et al., 2020).

Research has evidenced that children who experience DT are at an increased risk of experiencing difficulties regulating their emotions. As a result of exposure to trauma, individuals may sustain attunement for specific sensory stimuli (hypersensitivity) in the external world linked to traumatic events (e.g. the sound of slamming doors), which can lead to hypervigilance and decreased attention to other sources of sensory information that are available within the environment to guide understanding and decision making (Harricharan et al., 2021). As well as this, trauma exposure causes a narrowing of an individual's 'window of tolerance', meaning that their emotional reactions are intensified in response to daily stressors and challenges, and it becomes more difficult for them to access regulatory strategies and manage distress (Harricharan et al., 2021).

1.7 Protective Factors

Beyond the vast quantity of literature describing the association between exposure to stress *in utero*, DT, early adversity and poor health and well-being outcomes in later life, there is a growing body of research highlighting the buffering effects of positive experiences that follow childhood trauma. Research suggests that regardless of the number of ACEs an individual has experienced, advantageous childhood experiences (otherwise PCE's or counter-ACEs) can help to protect against poor health, as well as promote positive physical health and psychosocial well-being outcomes during adulthood (Crandall et al., 2019).

In their retrospective study, Jaffee et al. (2017) investigated the potentially buffering effect of nurturing relationships in adult women with histories of childhood abuse or neglect. They found that participants who experienced safe and supportive relationships following their earlier maltreatment were protected from its potentially negative effects in terms of depression, physical health, sleep and behaviour. Although not focused on relational experiences during childhood, this research shows that interpersonal relationships, which in this study tended to be romantic partners or close friends, can promote good health and protect against poor outcomes (Jaffee et al., 2017).

In their retrospective investigation of PCEs, Bethell et al. (2019) found that PCEs have a cumulative effect on mental health and relational outcomes during adulthood, akin to the cumulative effect of ACEs. The PCEs score included seven items developed from existing scales, and covering factors such as social support, inclusion and safety. The findings suggest that PCEs may have a lifelong, protective effect, despite potentially pre-occurring or co-existing presence of adversity (Bethell et al., 2019). As with the ACE framework, this is not an exhaustive list, and is likely not to capture the wide range of positive experiences during childhood that contribute to positive later outcomes. However, this research does highlight pathways for support and intervention. The PCE captured in the statement, *had at least 2 non parent adults who took genuine interest in them*, specifically highlights the importance of positive adult relationships outside the family network.

The link between DT and offending is well documented (Baglivio & Wolff, 2020). In their study of the mitigating factors of offending among young people exposed to ACEs during infancy, Baglivio and Wolff (2020) found that among youth with high PCE scores, the positive association between ACEs and reoffending (measured by both arrest and conviction) is no longer significant. Again, providing evidence that PCEs can protect against the potentially deleterious effects of childhood adversity.

One of the suggested reasons for the strong link between PCEs and later outcomes, is that positive experiences and supportive relationships help CYP develop resilience, which helps them to endure adverse experiences in later life (Sege & Browne, 2017).

1.8 Trauma-Informed Practice

To be trauma-informed, in any context (be that educational, clinical or medical) is to understand the impact of traumatic experiences on the lives of individuals involved, and to then apply this understanding to everyday practices, underpinned by sensitively designed systems that accommodate the needs of those who have experienced trauma (Carello & Butler, 2015). One of the fundamental principles of trauma-informed practice is ensuring emotional and physical safety. In an educational context, safety is seen as a necessary precondition to an environment that is conducive to learning (Carello & Butler, 2015).

There is a clear, yet sometimes misunderstood distinction between trauma-informed and trauma-specific practice, which Harris and Fallot (2001) describe with the comparison of trauma-informed versus trauma-specific and disability-informed versus disability-specific services. Disability-informed organisations ensure that their services are accessible to all individuals, but do not, however, offer specific services or interventions for those with a disability (Harris & Fallot, 2001). In the same way, trauma-informed practice is a universal approach that is strength-based and solution focused (Carello & Butler, 2015). Within the social sciences, disability is viewed as relative to the environment, and as situational (Tøssebro, 2004). Harrison (2006) commented “Disability in and of itself is not a problem, but the environment in which we ask people with disabilities to function often is” (p. 152). Similarly, trauma-informed practice recognises that it is the environment which often causes difficulty for those who have experienced trauma. The aim of trauma-informed approaches is to remove barriers within the environment which have the potential to impact upon feelings of safety and connectedness, and thus within the context of education, an individual’s ability to learn.

Trauma-informed practice within the school environment necessitates trauma-sensitive teaching practices, restorative approaches towards behaviour, change to school policy, revised and ongoing professional development for all teaching staff, and strong collaborative work between schools and mental health professionals (Oehlberg, 2008). Becoming a trauma-informed school goes far beyond identifying and referring CYP who may have experienced DT to external agencies for support and intervention, instead relying on all members of staff to implement trauma-

informed approaches both more narrowly, within their teaching of the curriculum, and more widely, permeating all interactions with all young people (Oehlberg, 2008).

It is the role of the school to create trauma-informed culture amongst all staff, which leads to questions such as “what has happened to this young person?” rather than “what is wrong with this young person?” (Dorado et al., 2016). When school staff view behaviour through a holistic lens, they can begin to reduce the use of punitive disciplinary systems, which can be damaging to CYP who have experienced trauma. Within the school context, trauma-informed practice provides a framework for integrating an understanding of trauma into school policy, school cultures and, the staff knowledge base (Dorado et al., 2016).

Trauma-informed practice rests on a relational approach, which is underpinned by the idea that as trauma is born out of experiences in relationships, it can also be healed through experiences in relationships (Treisman, 2016). Schools who adopt a trauma-informed approach must not only understand the importance of trauma-informed approaches for overall well-being but must also recognise that relationships are the foundation for all learning (Treisman, 2016). Treisman (2016) states ‘relationships are the anchor’ and holds that trauma-informed approaches involve a central focus on building and maintaining positive pupil-teacher relationships. The PACE framework promotes a relational approach to supporting CYP (Hughes & Golding, 2012). PACE stands for playfulness, acceptance, curiosity and empathy, and describes a way of being in relationships that facilitates connection and teaches children that adults can be trusted (Treisman, 2016). The principles of a relational approach promote the experience of safety within interactions and relationships which is vital for learning across all domains (Hughes & Golding, 2012).

1.9 The Role of Teachers

Within the early childhood classroom, it is likely that many children are experiencing toxic stress due to environmental stressors and familial experiences (Sciaraffa et al., 2018). Traumatic experiences may affect a young person’s ability to form positive, trusting relationships with others and thus, the quality of pupil-teacher relationships can be negatively affected by trauma experienced by a young person outside of the school context (Brinamen & Page, 2012). Children who experience

relationship difficulties in response to trauma will be seeking relational support in addition to academic content from their teacher but may do so in varying ways as a result of their prior experience (Ladhawala, 2021). Teachers must be keenly aware of the prevalence, and understand the impact of, trauma exposure in the classroom and on developmental and educational outcomes, must provide trauma-sensitive instruction, and must be trained to deal with trauma-related behaviours (Ladhawala, 2021). Teachers serve a supportive role in caring for children who have experienced trauma, and their relationships can help to buffer the effects of adversity (e.g. Bethell et al., 2019). Teachers who are not appropriately trained or relational in their response can inadvertently reinforce behaviours or create situations that are retraumatising (Alisic et al., 2012). The present research study, grounded in research on the impact of DT on young people within the school context, recognises the essential support that teachers play in buffering negative experiences and outcomes.

1.10 Structure of Volume One

Following this chapter, the literature review outlines the current research related to teacher experiences of supporting children with DT, and their experiences of implementing trauma-informed practice. Following the literature review, the methodology for the current study is described, including the approaches and research methods employed to gather and analyse the data, which is then discussed in more depth in the following sections. Direct links to existing research themes are highlighted and the limitations to the research are identified. The implications of the research are discussed, with consideration given to how an improved understanding of teachers' experiences of supporting CYP who have experienced trauma can inform and guide practice within the field of educational psychology.

CHAPTER TWO: LITERATURE REVIEW

2.1 Overview of Chapter

This chapter explores research on DT in CYP through the lens of teachers. This is split into two parts: teachers' experiences of supporting CYP who have experienced DT, and teachers' experiences of implementing trauma-informed approaches. The rationale for the present research is then explored, with reference made to the existing literature and its limitations.

2.2 The Importance of Teachers' Experiences

As discussed previously, the role that teachers play in supporting CYP who have experienced trauma is crucial. The professional development of teachers in understanding the effects of trauma, and how they can support children experiencing DT, is essential in the implementation of trauma-informed school culture. In their quantitative, questionnaire-based study, Alisic et al., (2012) suggest that trauma-informed approaches adopted by teachers can avoid the unintentional re-traumatisation of CYP and can promote healing and development. In their role, teachers can provide positive relational experiences including opportunities for co-regulation, as well as structure, boundaries and consistency to promote feelings of safety and predictability. By providing these opportunities for children through secure and trusting relationships, they lay the foundations for the development of further protective skills such as self-efficacy and self-regulation (Sciaraffa et al., 2018).

2.3 Literature Review One

The first literature review will explore the current literature around teachers' experiences of supporting children who have experienced trauma.

2.4 Search Strategy: Literature Review One

For the purpose of this thesis, a systematic search of the literature was conducted via PsychINFO, PROQUEST, EBSCO and Web of Science, to explore the current literature on teachers' experiences of supporting CYP who have experienced DT.

This literature review takes a narrow focus to search specifically for current literature that aligns directly with the present research (i.e. research that closely aligns with the current research in terms of the characteristics of the participant group and the methodological choices made in conducting the research). The databases were searched using a range of terms including teacher* AND experience* OR perspective* AND trauma* OR developmental trauma* OR complex trauma* OR child* trauma* OR early trauma* OR toxic stress OR adverse childhood experience* or ACE*. Initial scoping revealed a lack of research published in the UK. The inclusion criterion for study location was adjusted to incorporate research from the US, as at the time of carrying out the literature review, my scoping searches revealed that the majority of the relevant literature arose from the US. The search identified papers which had teacher experiences (or related terms) in the title. Due to the sheer volume of literature related to childhood trauma, this helped to focus the search and identify relevant papers only. All searches identified literature published after 2012. The majority of the literature in this review is dated from 2019 to 2022, with one research thesis dated 2014. Therefore, to capture recent research, a search of the previous ten years was completed (i.e. between 2012 and 2022). The final inclusion and exclusion criteria used for the literature review are displayed in Table 1.

Table 1*Inclusion and Exclusion Criteria for Literature Review One*

Study Parameters	Inclusion Criteria	Exclusion Criteria
Type of publication	Published and unpublished literature, including research theses	Published in other sources e.g. books
Language	Published in English	Not available in English
Availability	Full text available	Only partial text available e.g. abstract only
Date of publication	Published between 2012 and present	Published prior to 2012
Location	Conducted in the UK or USA	Conducted in any other country
Research Design	Qualitative or mixed methods	Quantitative
Sample	Study includes nursery or primary school (Year R-6) teachers in the UK or pre-kindergarten or elementary school (Grade K-5) teachers in the USA	Secondary, middle or high school teachers only, teachers in training, designated teachers, studies which do not specify year group or range
Focus of research	Explores teachers experiences of supporting pupils who have experienced DT in mainstream school settings	Studies exploring teacher preparedness only and studies exploring teachers' experiences of supporting refugee children
Research outcome measure	Teachers' experiences presented thematically	No separation of primary and secondary school teacher experiences

2.4.1 The Importance of Relationships

A key theme within the existing literature relates to the importance of relationships, particularly in terms of the positive impact that relationships have in helping teachers to manage challenging behaviour and promote academic success. Henderson's (2022) doctoral research explored early years teachers' role in supporting children with ACEs. The research was carried out across several Title 1 schools (schools in the USA where children from low-income families make up at least 40% of pupil enrolment). In total, 29 teachers completed a survey and 11 were then interviewed. The findings highlighted teachers' perception that a positive classroom environment, achieved through positive, caring relationships, is a precursor to academic success, so must be considered prior to the teaching of academic skills. All participants reported feeling unprepared to support children who had experienced trauma, particularly upon qualifying as a teacher. This research also added to the existing literature which suggests that students from areas of poverty experience more trauma than those of higher socio-economic backgrounds. It should be highlighted that research which uses ACEs as a part of its inclusion or recruitment criteria should be interpreted with caution. Recently, the use of the ACEs has been critiqued due to their stigmatising nature and inappropriate use at the individual level (Kelly-Irving & Delpierre, 2019). It has also been highlighted that the ACE model does not accurately capture the full range or impact of DTs (Winninghoff, 2020).

Wiley's (2021) doctoral research explored K-4 (Kindergarten to Grade 4) teachers' lived experiences of supporting CYP who had experienced trauma. A total of six participants took part in individual interviews and a focus group. Deductive thematic analysis revealed three overarching themes. Teachers spoke about the unique challenge that children who have experienced trauma present with in the context of the classroom. It was reported that behavioural challenges were the biggest barrier to teachers' ability to provide academic instruction. In addition, professional development opportunities were described as inadequate, both in terms of frequency and practicality of training content. Those who successfully managed children with complex needs related to experiences of trauma, described the importance of establishing and maintaining positive relationships, and creating a supportive and safe environment.

Although based on a small sample of teachers, the findings of Henderson (2022) and Wiley (2021) both provide positive teacher accounts of the impact of a relational approach in supporting CYP who have been exposed to trauma. However, Jones' (2019) research thesis suggests that although participants tended to demonstrate an awareness of the impact of trauma on behaviour, relationships and the approach to learning of the CYP they work with, they were unclear on how best to offer support in the classroom and help students engage in with learning activities. This highlights the importance of practical, trauma-informed training for educators, which not only informs teachers of such factors, but also emphasises the importance and impact of adopting a relational approach.

Focusing on children experiencing toxic stress, Abell's (2021) doctoral research investigated K-3 (Kindergarten to Grade 3) teachers' experiences. A total of ten teachers from three elementary schools were interviewed and the data was analysed using thematic analysis. Teachers identified that children with toxic stress often present with socialisation difficulties and struggle to maintain relationships with others. They expressed concern regarding pupils' lack of social skill development and highlighted the importance of socialisation for learning in the early years. In addition, teachers reported having a lack of practical strategies to help students deal with challenging emotions. Teachers shared that students were often triggered by unknown events and had great difficulty regulating their emotions. Finally, teachers discussed the complex demands of students experiencing toxic stress, identifying the challenges associated with this and the need for additional professional development opportunities and resources.

2.4.2 Teacher Well-being

In almost all research in this literature review, participants referred to either a lack of practical strategies (e.g. Abell, 2021), lack of preparedness (Henderson, 2022) or lack of professional development opportunities and resources (Wiley, 2021). Research findings are clear that additional opportunities for ongoing professional support are vital, a lack of which links to the theme of teacher stress and the ongoing emotional impact of supporting CYP with complex difficulties related to trauma

exposure, as explored in the research theses of Gallagher (2014) and Ladhawala (2021).

Gallagher's (2014) research thesis sought to understand the experiences of teachers supporting K-12 (Kindergarten to Grade 12) CYP affected by trauma. In total, 42 teachers from across a large public school system in the USA completed an anonymous online survey which contained both closed and narrative style questions. In this study, participants were required to have experience of supporting at least one student with a known trauma background. Trauma was defined as either a discrete event involving death, serious injury, serious harm or threat, or childhood maltreatment, neglect or inconsistent caregiving. The results highlighted that teachers found supporting CYP who have experienced trauma "difficult, heart breaking, and at times overwhelmingly stressful" (p. 5). Over half of the participants reported feeling unprepared to adequately meet the needs of CYP affected by trauma. For those who reported feeling prepared, access to external professionals was often cited. Teacher training programs rarely include information on teaching children who have experienced trauma; the majority did not receive any professional training on the topic, and this was cited as a common reason for feeling unprepared. One prominent theme from this research was the effect of stress on educators as caregivers. Teachers described feeling overwhelmed with trying to meet the complex needs of students, whilst also meeting other job-related demands. Gallagher (2014) concluded that it is imperative that teachers receive comprehensive training on educating children who have experienced trauma, as well as on self-care and stress management, to avoid negative impacts on their well-being. The large quantity of rich information captured is a strength of this study. However, the research's limitations lay also in its design. The online survey was not piloted, and as identified by the researcher, several survey questions were not interpreted as expected. Therefore, some survey questions, which may have been interpreted as repeat questioning, were not answered fully. This resulted in some concepts not being explored as fully as the researcher intended.

Adopting an alternative approach to data collection, Ladhawala's (2021) research thesis used a narrative enquiry approach to gain an insight into teachers' experiences of supporting CYP who had experienced trauma or traumatic events.

The study used survey, interview, and journal entry data. Interviews with 12 K-12 (Kindergarten to Grade 12) teachers revealed their individual accounts of behaviour in the classroom, and teachers' actions, feelings and perceived role in response to behaviour. Participants described the highly stressful and exhausting nature of working with CYP who had experienced trauma and the complex needs they presented within the classroom as a result. All participants spoke of the importance of having support from other school staff and opportunities to de-compress. The findings of this research highlight the importance of emotional support for those working closely with CYP who have been exposed to trauma, so that they are emotionally available and effective in the support that they provide.

Despite the relatively consistent findings of this research related to teacher well-being and stress, both Gallagher's (2014) and Ladhawala's (2021) research investigated teachers experiences across K-12. As it is likely that the experiences of teachers of four- and five-year-olds will differ from that of teachers of 18-year-olds, it is possible that this research missed some of the nuance of teacher experiences across key stages of pupil development, or that this nuance cannot be disentangled from the data.

2.4.3 Self-Efficacy

Within the literature, self-efficacy is highlighted as a factor in teachers' perceived ability to support CYP who have been exposed to trauma. With a focus on elementary teachers only, Campbell's (2022) doctoral research, which was carried out in the USA, explored the lived experiences of those who taught CYP from traumatic backgrounds. This research focused specifically on the construct of individual and collective teacher efficacy. Semi-structured interviews were used to gather data from five teachers, and Interpretative Phenomenological Analysis (IPA) was used to provide a rich, individual account of teachers' experiences. The research positioned its rationale as supporting school systems to prevent burnout and increase teacher retention. One salient theme in the study was teachers' recounts of difficult experiences at work, particularly regarding safety issues as a result of challenging behaviour that had a disruptive impact on learning processes within the classroom. All participants voiced concerns about how effective they felt given the complex

needs of the children they were supporting and highlighted the importance of trauma-informed training for teachers and support staff. The main constraint of this research links to its use of IPA. Within the IPA data collection process, initial interviews were followed by further interviews with each participant. A possible limitation with this method of data collection is that it could alter the meaning of the original interview as participants may over or under emphasise particular points that the research subsequently asks about.

Broussard's (2021) doctoral research used narrower inclusion criteria than past research. A qualitative case study design explored the perceptions and experiences of elementary teachers who had taught CYP who were known to have experienced trauma (e.g. abuse, neglect, violence etc.) in the past year. Broussard (2021) gathered data from 10 teachers via semi-structured interviews as well as teachers' notes and additional documentation. Although this research was not specifically focused on self-efficacy, this theme was highlighted in participants' beliefs in their ability to respond. The two further themes relate to teachers' beliefs about the importance of proactive support in response to behavioural challenges (i.e. offering empathy), and factors outside the classroom that teachers felt impacted upon their ability to support CYP (e.g. lack of professional development, the need for parental engagement). Teachers in the study described the stressors which arose as a result of teaching children who had experienced trauma. Generally, they described their commitment to proactively supporting the CYP that they knew had experienced a traumatic event, so that they could be successful learners at school. A possible limitation of this piece of research is that it excluded CYP who had experienced trauma in their earlier years. However, despite participants only being sought if they have worked with children affected by trauma in the past year, the findings were similar to those of other studies that had wider inclusion criteria.

2.5 Literature Review One: Summary

Key themes across this literature review relate to teachers' feelings of unpreparedness following initial teacher training and lack of experience, knowledge and confidence in supporting children who have experienced trauma, and in particular, a lack of practical strategies. This highlights the importance of ongoing

professional development opportunities for teachers related to understanding DT and strategies for supporting CYP. Some of the research also highlights the need for emotional support for teachers themselves due to the challenging and emotive nature of working with this vulnerable group. One of the main, overarching limitations of this research is a lack of clarity of teacher knowledge and understanding of childhood trauma and thus their ability to accurately identify CYP within their classrooms who have been exposed to DT. As identified in much of the existing literature, the lack of teacher training and professional development opportunities regarding childhood trauma is a concern. Therefore, it is somewhat unclear if the accounts given by teachers in the research set out above really do capture their experiences of supporting CYP who have been exposed to trauma, or whether they also include accounts and experiences of supporting other vulnerable groups, or those with other special educational needs. This research also contains a variety of methodological limitations, such as a lack of discrimination between teachers who teach different age groups. All research presented was carried out in the USA and all sources were research theses. It should be noted that by taking such a narrow focus, there are limitations in the process used to conduct this literature view (e.g. excluding research with a more specific focus on topics such as teacher preparedness may have meant that some relevant literature was missed). It is also possible that published research emanating from countries such as Ireland, Australia and New Zealand may have been missed. However, this literature review does highlight the lack of peer-reviewed, published research carried out in the UK context.

Fortunately, there is a growing trend within the professional practice of educational psychology to promote and deliver whole-school trauma-informed training and school development programmes. More recent research has evaluated the impact of trauma-informed training within schools. Such research tends to focus mainly on teachers' perceptions of, and attitudes towards, trauma-informed practice following relevant professional development opportunities (e.g. Parker et al., 2020; Venderburg, 2017). The Attitudes Related to Trauma-Informed Care (ARTIC) Scale, a psychometrically valid measure of professionals' attitudes towards trauma-informed care, is commonly used in such research as a quantitative measure of teachers' attitude change over time (e.g. Baker et al., 2016; Maclochlainn et al., 2022;

Williams, 2022). However, as the present research also focuses on the experiences of teachers who have undergone trauma-informed training and therefore, the next section of this chapter will review the qualitative literature around teachers' experiences of implementing trauma-informed practice.

2.6 Literature Review Two

Following on from the first literature review which explored teachers' experiences of working with CYP who have been exposed to trauma, this literature review will explore the current literature around teachers' experiences of implementing trauma-informed practice.

2.7 Search Strategy: Literature Review Two

PsychINFO, PROQUEST, EBSCO and Web of Science were searched, using the terms teacher* AND experience* or implement* or appl* AND "trauma-informed" OR "trauma-informed practice*" OR "trauma-informed approach*" OR "trauma-informed care" OR "trauma-informed school" OR "attachment aware". As in the first review presented earlier in this chapter, initial scoping of the literature revealed that the majority of the relevant literature arose from the US. A wealth of literature on teachers' attitudes towards and perceptions of trauma-informed approaches, which pertained to the qualitative research base, was found. However, this research did not align with the specific focus of the review. Again, this literature review takes a narrow focus and scoping sought to find existing literature that mirrored the focus of the present research. Initial scoping revealed some literature which focused on initial teacher training. However, this was excluded from this literature search to focus more narrowly on additional training and professional development opportunities. Similarly, research that acted as an evaluation of individual training programmes was excluded. Due to the scarcity of literature in this specific area, research involving teachers of any age group was included. The literature in this review is dated between 2019 and 2022. In order to mirror the first literature review, and to capture recent research, a search of the previous ten years was completed (i.e. between 2012 and 2022). The inclusion and exclusion criteria of the literature review are displayed in Table 2.

Table 2*Inclusion and Exclusion Criteria for Literature Review Two*

Study Parameters	Inclusion Criteria	Exclusion Criteria
Type of publication	Published and unpublished literature, including research theses	Published in other sources e.g. books
Language	Published in English	Not available in English
Availability	Full text available	Only partial text available e.g. abstract only
Date of publication	Published between 2012 and present	Published prior to 2012
Location	Conducted in the UK or US	Conducted in any other country
Research Design	Qualitative or mixed methods	Quantitative
Sample	Study includes teachers in the UK or US	Teachers in training
Focus of research	Explores teachers experiences of implementing trauma-informed practice in mainstream school settings	Training evaluation studies
Research outcome measure	Teachers' experiences presented thematically	n/a

2.7.1 The Importance of Relationships

As in literature search one, the current literature exploring teachers' experiences of implementing trauma-informed practice also highlights the importance of relationships. Teachers in the research outlined below described the importance of building positive, trusting relationships with CYP who have experienced trauma.

Ellison and Walton-Fisette (2022) explored physical education P-12 (Pre-Kindergarten to Grade 12) teachers' experiences of trauma-informed practice. Although participants were not recruited to take part in interviews following whole-school training and had minimal experience or professional training related to trauma and trauma-informed practice, several key themes relevant to the current topic were identified, and so this paper has been included in this literature review. Participants revealed that teachers used trauma-informed approaches, which were categorised under four dimensions including creating physically and emotionally safe spaces, forming positive relationships with pupils, developing pupils' responsibility and developing their self-regulation skills. The authors suggest that the practical strategies identified by the participants align with the Souer and Hall (2016) theoretical framework of fostering resilient learners. This research is limited by its inclusion of P-12 children, the largest age range of pupils being taught by the participants in this literature review. The implications of this are discussed in more detail in the literature summary.

However, there is research which focuses on narrower pupil age ranges. Stegall (2020) explored the experiences of pre-school teachers and Ganigan (2021) explored the experience of secondary school teachers. Despite the use of age grouping labels (i.e. pre-school, secondary) more commonly found in the UK, both pieces of research were carried out in the USA. Interestingly, Stegall's (2020) research highlights the difficulties teachers face in dealing with behaviour. With its focus in the early years, Stegall's (2020) doctoral research explored teachers' experiences of implementing trauma-informed practice and behaviour management strategies for pre-school children exposed to trauma. Thematic analysis of the 13 teacher interviews revealed four overarching themes. Firstly, teachers described the education, experience and background knowledge they felt was required to effectively teach children who had been exposed to trauma. Generally, trauma-

specific input during teacher training was reportedly scarce. The second theme pertained to building trusting relationships with pupils and creating safe classroom climates to promote academic gains. Theme three described teachers' self-efficacy and its link to increased academic attainment. Participants expressed feelings of low self-efficacy when supporting children from traumatic backgrounds. Theme four described the importance of working with other educational professionals to support difficulties with behaviour.

Ganigan's (2021) research described the implementation of trauma-informed approaches within the secondary school environment. Ganigan's (2021) research thesis used a case study design to explore secondary school teachers' experiences of teaching within a trauma-informed school. The main limitation of this research design was that all participants were from one school site. This possibly reduced the breadth of experience that was explored, and thus scope for the generalisability of findings. In contrast to themes of dealing with challenging behaviour in pre-school classrooms, interviews with six participants revealed positive experiences of implementing trauma-informed approaches, and also highlighted challenges. Teachers also spoke about the importance of building positive relationships with students and supporting the development of students' life skills. The main challenges of implementation identified by participants were the capacity to build and maintain cultural understanding and empathy due to lack of teacher consistency, and access to adequate professional development and support.

2.7.2 Teacher Well-Being

Another salient theme in the existing literature is teachers' perceptions about the importance of their own well-being. Following trauma-informed training, teachers identified the importance of managing their own self-care as a priority. Focussing on the physical, emotional and psychological impact of working with CYP who have experienced trauma, Peterson's (2019) thesis investigated the experiences of teachers working within a trauma-informed school, and their experiences with compassion fatigue. Overall, participants reported that working within a trauma-sensitive setting meant that they felt well equipped to working with CYP who had experienced trauma and they felt confident in their ability to implement trauma-

informed approaches in their daily practice. Their understanding of trauma and regular practice of self-care, following both trauma-informed training and ongoing professional development, led participants to believe teaching to be a sustainable profession.

Focusing on both elementary teacher and pupil perception, Padak's (2019) research thesis investigated the implementation of trauma-informed practice. Interviews highlighted the shift in teachers viewing pupils and parents through a trauma-informed lens, and the importance of this shift in building understanding and empathy. Teachers also identified the role of building positive relationships with pupils in the creation of a trauma-sensitive classroom environment. Teachers also highlighted the need to care for their own emotional well-being by collaborating with colleagues and receiving regular support. Teacher well-being was perceived as needing to be a priority in a trauma-informed setting.

As in literature mentioned previously, the research by Peterson (2019) and Padak (2019) is limited in terms of its breadth of data collection and the implications this has for possible generalisability, as a result of collecting data from participants within one school setting only.

2.7.3 Increased Awareness and Understanding

Across the literature exploring teachers' experiences following whole-school trauma-informed training, teachers who participated in the research expressed increased awareness and understanding of themes related to trauma experiences and trauma-informed practice. Fleming's (2019) research thesis used a mixed methods multiple case study design to explore the implementation of a trauma-informed school model across an elementary and middle school. Part of this exploration involved understanding teachers' experiences of implementing trauma-informed practice. Data was gathered from teachers through interviews and focus groups. Findings highlighted the intentionality of teachers in their supportive, preventative, and interventionist efforts. The concept of intentionality was centred on the idea that educators must 'meet students where they are' and aim to understand the underlying factors that influence behavioural, academic and social-emotional difficulties. Similarly, teachers highlighted awareness as being essential in

implementing a trauma-informed model. Participants spoke about the importance of being aware of past experiences, contextual factors and individual challenges of all students. Teachers identified that by 'meeting students where they are' and by being aware, approaches to discipline could be trauma-sensitive in nature.

Hinton-Pollard's (2020) research thesis explored teachers' experiences of implementing trauma-informed practices following professional development. Interview data from eight middle school teachers was analysed using IPA. All participants described the 'strategic integration' of trauma-informed approaches into their current teaching practices and reflected on the positive impact that the approaches had on the children they worked with. They also described their increased awareness of students' past experiences after learning about the impacts of trauma. Participants suggested that a whole-school approach to trauma-informed practice is necessary for it to be effective and impactful. They highlighted the importance of high quality, culturally aware, professional developmental opportunities, for educators on the topic of trauma and trauma-informed practice and described the need for ongoing development opportunities. Finally, participants highlighted the necessity of social and emotional support for educators themselves. Generally, Hinton-Pollard's (2020) research suggests that increased awareness of these themes leads to an acceptance and understanding of a whole-school trauma-informed approach, and to systemic change. This further highlights the importance of such training at a whole-school level.

2.8 Literature Review Two: Summary

The literature discussed in this review demonstrates that generally, teachers describe trauma-informed practices as key for the development of positive learning environments, decreasing challenging behaviours and increasing academic achievement (Ganigan, 2021). Several studies also identified the key role that relationships play, again supporting the idea that relational approaches are key when supporting CYP who have been exposed to trauma (e.g. Ellison & Walton-Fisette, 2022). As discussed in Chapter One, teachers play a key role in buffering the negative effects of DT on a young person's development. However, overall, the literature suggests that the level of teacher preparedness related to supporting and

teaching CYP who have experienced DT, is low. The research demonstrates a clear need for trauma-informed training, and for ongoing support in order to support teachers' well-being and increase their self-efficacy. Following trauma-informed training, the research suggests that teachers are able to identify key themes within trauma-informed practice (e.g. the importance of building positive relationships). Interestingly, where settings were described in the research as trauma-informed, teachers tended to describe more positive experiences of implementation and their confidence in doing so (e.g. Peterson, 2019). This is suggestive of the importance of not only trauma-informed training for teachers, but also consideration of how a setting can become trauma-informed through policy change and culture shift.

However, several methodological and conceptual limitations within the existing research have been identified. Several studies gathered their data from participants working within one school site only (Ganigan, 2021; Peterson, 2019; Padak, 2019). The limitation of this relates to the breadth of experiences that were gathered. It is possible that the findings emphasise particular within-school factors. As highlighted previously, some existing literature explores the experiences of teachers of a broad range of pupil age groups and does not disentangle this within the findings (e.g. Ellison & Walton-Fisette, 2022). It is likely that teachers of pre-school children have distinctly different experiences to teachers of teenage children, related to the young peoples' presentation within the school settings, and in terms of which trauma-informed approaches are appropriate and successful. The difference in findings in the research by Stegall (2020) and Ganigan (2021), which explores the experiences of pre-school and secondary school teachers respectively, adds weight to the idea that this is an important distinction.

Almost all the research presented was carried out in the USA and almost all sources were research theses. As with the first literature review, it should be noted that there are limitations to taking such a narrow focus (e.g. excluding evaluation studies would have missed those that may have included a qualitative arm related to teachers' experiences). It is plausible that published research emanating from other countries may have been missed. However, thus far, the existing research has not explored teachers' experiences of implementing trauma-informed practice in the UK

context, and less is known about the distinct experiences of teachers' implementation of trauma-informed approaches in primary school settings.

2.9 Research Rationale

Within the practice of Educational Psychology, there are many services offering trauma-informed training opportunities for school staff, and support for systemic trauma-informed change (e.g. revising behaviour policies). The research detailed in this literature review has begun to build a picture of teachers' experiences of implementing trauma-informed practice, and of supporting children who have experienced trauma. It is important to continue to develop our understanding in this area because if external professionals are to continue advocating for trauma-informed practice, they need to know how best to support educators as they implement these approaches. Across the research reviewed in this chapter, there are several methodological limitations that the present research aims to address. Firstly, to take into account the need for the exploration of experiences in both breadth and depth, this research will gather data from individual teachers, across a range of school settings. This will ensure that a range of experiences, across more than one setting, is captured.

As DT is likely to affect CYP in different ways as they develop, the experiences of teachers of different age groups are likely to vary. The research rationale holds that understanding the distinct experiences of primary educators is important in understanding the full picture of trauma-informed practice implementation. Primary school teachers are in a unique position as they spend large proportions of the day with CYP and often have close relationships with family and community systems. As a result they are able to play a role in identification of CYP who may have experienced trauma or may be at risk of experiencing trauma, and also in promoting protective factors (Sciaraffa et al., 2018). They will also support CYP in age-appropriate ways, which are likely to be different to approaches and strategies used to support their younger and older peer. Thus, this research will focus on primary school teachers as a distinct group from pre-school teachers and secondary school teachers researched by Stegall (2020) and Ganigan (2021) respectively.

The current literature on this topic within the UK context is currently lacking, and so it is hoped that conducting this research within the UK will add to the national understanding and international narrative of teachers' experiences. This may go some way to improving understanding of how teachers could be supported to cope with demands of managing complex difficulties within the classroom. Addressing these questions is particularly salient for educational psychologists (EPs), who are often responsible for both delivering trauma-informed training and helping schools to support vulnerable populations through individual casework and consultation. Thus this research specifically aims to answer the following research questions:

1. What are teachers' experiences of supporting children who have been exposed to DT?
2. What are teachers' experiences of implementing trauma-informed approaches following whole-school training?

2.10 Chapter Summary

Following an overview of the theoretical background and national context in relation to DT in Chapter One, this chapter has explored more specifically the current literature around teachers' experiences of supporting children who have been exposed to DT, and their experiences of implementing trauma-informed approaches. This links directly to the research questions that will be explored throughout the following chapters of this thesis.

CHAPTER THREE: METHODOLOGY

3.1 Overview of Chapter

This chapter will outline the methodology and methods used to address the research questions as introduced in Chapter Two. This will begin with a discussion of my ontological and epistemological position and is followed by a detailed description of the processes of both data collection and analysis. This chapter also provides a rationale for the use of semi-structured interviews and Reflexive Thematic Analysis (RTA; Braun & Clarke, 2022), with consideration given to alternative approaches.

3.2 Research Philosophy

All research is underpinned by the researcher's ontological and epistemological position (Braun & Clarke, 2022). In this section, I will outline the main research paradigms and then describe my own ontological and epistemological positions, and how they relate to this research.

3.2.1 *Ontology*

Ontology refers to the theories about what exists in the social world (Thomas, 2017). Ontology can be understood along a continuum from realism to relativism. These strikingly different ways of understanding social reality are underpinned by contrasting assumptions (Cohen et al., 2017). A realist ontology conceptualises a knowable reality that can be understood in an objective way where objects within the social world exist independent of the researcher (Cohen et al., 2017). A relativist ontology holds that the social world is the product of human consciousness, cognition and language where there is no independently accessible reality (Cohen et al., 2017).

3.2.2 *Epistemology*

Epistemology refers to the theories about the nature of knowledge, and how we can know about the world that we have defined ontologically (Braun & Clarke, 2022). Positivism and interpretivism represent the two opposing poles of epistemology (Thomas, 2017).

Positivists hold that knowledge about the social world can be obtained objectively through scientific study (Thomas, 2017). Positivism strives for objectivity, replicability and measurability with the goal of uncovering patterns and rules of behaviour with the ascription of causality (Cohen et al., 2017). Ontological realism typically gives rise to epistemological positivism (Cohen et al., 2017).

Interpretivism aims to understand the meaning that people attach to their experiences (Cohen et al., 2017). For interpretivists the social world is bound by societal, cultural and individual context (Della Porta & Keating, 2008). An interpretivist epistemology stems typically from a relativist ontology (Cohen et al., 2017).

3.2.3 Critical Realism

Between the polar extremes, there are many intermediate theories that attempt to bridge the philosophical gap. The essential characteristic of critical realism is that it holds ontological realism and epistemological interpretivism, and thus it collapses the traditional link between ontological and epistemological standpoints (Braun & Clarke, 2022). It could be argued that this contradiction is a flaw, however critical realists hold that the two positions are not only consistent, but that they effectively define our understanding of the social world and how we come to know about it (Maxwell, 2015). Critical realists do not seek to uncover causal mechanisms as would be the goal for traditional realists. Instead they seek to infer possible explanations for the observed phenomena within any given context (Maxwell, 2015).

3.2.4 Rationale for Critical Realism

Critical realism avoids the ontological and epistemological dichotomies outlined above by accepting both objectivity and subjectivity. In this balanced view, critical realism recognises the imperfect nature of empirical evidence and the complexity of the social world, whilst also believing in the existence of an objective, independent reality. This philosophical position fits my own world-view about the nature of knowledge and how we can find out about the social world, whilst also best serving this research. I believe there to be an objective reality in which the social objects exist of DT and trauma-informed practice exist independent of me as a

researcher. However, I also believe that these social objects are best understood through the subjective interpretations of those who are primarily involved in experiencing them. I am not seeking to understand direct causal mechanisms that are generalisable. Instead, I am hoping to understand these experiences within the cultural context of both the participants that took part in this research, and myself as a researcher.

3.3 Method

In this section of the methodology, the processes used to collect and analyse the data will be discussed. Details of the local context within which the research was carried out, the recruitment of participants, and the ethical considerations made, are included.

3.3.1 Qualitative Research

Qualitative research is a broad term used to capture a range of research types, which draw directly on experiences, attitudes and behaviours with the purpose of description, explanation and theory generation (Cohen et al., 2017). Qualitative research gives voice to its participants and seeks to understand the meaning beneath presenting and observable action (Cohen et al., 2017). The social and educational world are complex and bound within context and thus, I believe that qualitative research is best suited to exploring and understanding the experiences, beliefs and behaviours of primary school teachers.

3.3.2 Local Context

This research took place within the local authority educational psychology service that I am completing my doctoral training. The local authority is one of the largest by population size in England, and the most densely populated in the region (ONS, 2022). Areas of the local authority also have high child poverty rates (Action for Children, 2022).

As part of a service wide initiative to share information on attachment, developmental trauma and trauma-informed approaches, the service offers a training package to all educational settings in the local authority. The package of support is

centrally held within the service and has been developed by a small team of EPs. The package is part funded by the Local Authority's Virtual School for children in care. This means that all schools receive a discount of 50% of the typical cost of the full training and support package, and those with a looked after children in attendance at their setting receive a discount of 80%.

Typically, the training package is offered by EPs in their usual patterns of working such as during planning meetings, as a recommendation following specific casework or requests for more systemic support from the SENCOs they work with. The first step for a setting that is interested in the programme is for the Head Teacher to attend one of the scheduled 'Head Teacher Briefings', which are held virtually and delivered by the trauma-informed EP team to introduce the programme in more depth.

Prior to the training sessions themselves, the visiting EP of the setting guides the senior leadership team through several activities. This begins with a whole-school audit which is carried out by the senior leadership team at the setting. Following this, the visiting EP then carries out a 'pre-training consultation' which aims to highlight areas of strength and areas for development, related to existing trauma-informed practice. During the consultation, key outcomes related to the audit are identified, as well as key indicators of performance. The discussion can also guide aspects of the content of the whole-school training.

Following the pre-training activities, each setting receives approximately two full days of trauma-informed and attachment-aware training, which is delivered to all staff, typically by the visiting EP. The training generally consists of one full day of training, which begins with the training attendees completing the ARTIC questionnaire (discussed in Chapter One). Three further twilight sessions are delivered across the school year. The first day of training is the most consistent across schools in terms of content, with the twilight sessions being more flexible and driven by the pre-training audit and consultation. The training itself is accredited by The Attachment Research Community (ARC) which ensures a level of consistency across the training delivery, whilst allowing for flexibility in the recommendation of practical strategies in each individual setting.

Often, Emotion Coaching is a focus of at least one twilight session. Emotion Coaching is a universal strategy which “helps to create nurturing relationships that scaffold the development of effective stress management skills, develop capacities to promote emotional and behavioural self-regulation and support pro-social behaviours” (Gus et al., 2015; p. 31). Gottman et al. (1997) identified five steps that Emotion Coaching adults use with children to build empathy and understanding and thereby model prosocial emotional skills. These key steps provide adults with a practical framework for supporting CYP ‘in the moment’ and during times of challenge, such as when CYP experience emotional dysregulation, particularly when their behavioural response may be inappropriate or unproductive. Research suggests that emotion coaching improves adult regulation in response to difficult situations, thus having a positive impact on their overall well-being (Rose et al., 2015). The approach can also be used as an integrative tool to support the development of relationships between teachers and CYP (Gus et al., 2015).

Following the training, an allocated lead within the school is invited to attend monthly network meetings and is encouraged to share information with school staff through team meetings or additional training sessions. The visiting EP then works with the allocated lead in the school to further develop and sustain the initiative. The nature of this work is flexible and is led by the needs of the school but can include additional support from the EP through refresher training, parent workshops or staff supervision. Currently, the impact of the trauma-informed and attachment aware training package is measured using the ARTIC scale. The ARTIC scale is completed by attendees at the beginning of the first training session, and then one year later to capture attitude change over time. Prior to this research, there had been no formal collation of qualitative feedback on the impact of the programme.

Participants in the present research worked in mainstream primary schools who had followed the process detailed above. More information on the participants is presented in section 3.3.3.

3.3.3 Participants

Purposive sampling allowed me to seek participants who met the pre-defined inclusion criteria (Thomas, 2017). The inclusion criteria for participants are listed

Table 3. Personal characteristics such as age or gender did not form part of the inclusion/exclusion criteria.

Table 3

Inclusion Criteria for Participants in this Study

Inclusion Criteria	Reason for Inclusion
The teachers work in mainstream primary schools	To provide an insight into this specific group (primary school teachers) which is currently unresearched
The teachers work within the placement LA	To provide understanding of the local social context of the LA, and link to within-service agendas
The teachers do not work at any of my linked schools	To reduce ethical concerns and the possibility of researcher bias
The teachers have received all trauma-informed training sessions	To ensure that they have a consistent understanding of DT and trauma-informed approaches
The teachers have worked within the LA for at least one year	To ensure that they have a breadth of experience to draw upon in the interview

Recruitment was carried out between June 2022 and January 2023. I shared the information sheet with EPs within the trauma-informed training team and asked them to share it with primary schools where they had delivered the training. The information sheet contained details on the research process and contact details for me and my university tutor (Appendix A). Following this, I sent emails to the SENCOs of primary schools who had received the trauma-informed training. Due to difficulties recruiting participants in this way, I then distributed details of my research, along with the information sheet, to other EPs within the service. It is therefore difficult to know how many SENCOs were contacted regarding participation, however I estimate that approximately 40 schools received information about my research. Generally, I had

more success recruiting participants when the SENCo was contacted by their visiting EP in the first instance. In total, seven participants were successfully recruited. Of the participants, all seven were female. Information on each participant's job role and years of teaching experience at the time of interview is displayed in Table 4. All participants have been assigned a pseudonym.

Table 4

Participants' Job Roles and Teaching Experience

Participant	Job Role	Teaching Experience
Anisha	Class teacher	20 years
Jo	Class teacher, SENCo	10 years
Iris	SENCo, trauma-informed training lead	3 years
Hema	Class teacher, SENCo	9 years
Sarah	Class teacher	4 years
Erin	SENCo, trauma-informed training lead	17 years
Connie	SENCo, trauma-informed training lead	9 years

3.4 Data Collection

Previous research that investigated teachers' experiences of implementing trauma-informed approaches, tended to use interviews to gather data, with some also incorporating survey data. In qualitative research, interviewing is one of the most common methods of generating data for research purposes (King et al., 2019). Interviews were deemed to be the most appropriate way to gather the depth and breadth of information required to answer my research questions. Although focus groups were also considered, it was thought that this may threaten the extent to which participants would feel able to explore their individual experiences (Thomas, 2017). Section 3.5 below explains how the potential risks associated with this research were managed within the interview process.

Throughout the data collection process, which included sharing information about this research and carrying out the interview, the term developmental trauma was used. The aim of this research is to capture the experiences of teachers implementing trauma-informed approaches at a universal level. The decision to use the term developmental trauma in this research not only aligns with the terminology used in the professional development activities and training that they will have taken part in, but also aims to capture the experiences of supporting a range of children and young people with a range of trauma experiences, not only those which have been clinically diagnosed.

3.4.1 Semi-Structured Interviews

To gather data about teachers' experiences of supporting CYP exposed to trauma, and their experiences of implementing trauma-informed approaches, I used semi-structured interviews (Cohen et al., 2017). As well as a means of gathering data, an interview is an intersubjective social interaction and as such, the interviews were also guided by the responses of the participants, the interests of the researcher and the purpose of the interview (Cohen et al., 2017).

I chose to take an 'interview guide' approach to the interview schedule which meant that the topics and issues to be covered were specified in advance (Cohen et al., 2017). The aim of this was to increase the comprehensiveness of the data and provide a system for data collection which was similar across participants whilst still allowing for flexibility within each interview (Cohen et al., 2017). I decided to include full questions on the interview schedule as opposed to topic prompts alone to aid my confidence in guiding the interview (Appendix B; Thomas, 2017). I also anticipated possible follow up questions and probes to encourage participants to proceed with or extend their answers to questions (Thomas, 2017). I used the interview schedule flexibly and devised individual probes over the course of each interview. I did not always ask each question in the same order as I found that some participants provided answers for some topic areas before I had asked related questions on the interview schedule. I also asked additional questions based upon each individual's responses. This is to be expected in qualitative research using semi-structured

interviewing, as the interview schedule should only act as a prompt for the interview in terms of topics that the researcher intends to cover (Thomas, 2017).

I began each interview by asking the participants about their current role and teaching experience. I then asked participants to engage in a card ranking activity (Appendix C). Section 3.4.2 provides further detail on the ranking activity. The interviews varied in length from 30 – 90 minutes.

3.4.2 Ranking Activity

To begin the ranking activity, I provided each participant with a series of 10 statements related to DT and asked them questions such as, 'please can you rank the following statements in order of how well they describe your understanding of DT?'. The items included in the ranking activity were based on my own understanding of developmental trauma, however I also used the ARTIC scale as guidance in compiling the set of statements.

Some interviews were held in-person, and some online. For the interviews held in-person I printed and cut out the statements to share with the participant. For the interviews held virtually, I shared the statements on the screen. I did not intend to analyse the participants' response to the activity, rather the task was intended to orientate them to the topic of the interview. Recent research highlights a trend towards identifying less extreme phenomena as traumas in academic literature, related to the theory of concept creep outlined in section 1.2 of this thesis (e.g. using 'trauma' to describe a challenging exam; Baes et al., 2023). The interview aimed to facilitate discussion about participants' experiences, rather than to investigate their understanding of theory. Thus, the ranking activity aimed to open the discussion about developmental trauma. This helped me, as a researcher, to gain an initial understanding of the participant's conceptualisation of developmental trauma, without having to ask them directly about their knowledge. In each interview, I explained the purpose of the activity and that there was no correct or incorrect response.

3.4.3 Pilot Interview

The aim of the pilot interview in this research was to allow for revision of the interview schedule and techniques, as is generally advisable in qualitative research

(King et al., 2019). In the present research, the first interview was treated as a pilot interview. Following this I deemed that the interview questions were appropriate and elicited relevant discussion. As such, no changes were made to the interview schedule.

3.4.4 Remote and In-Person Interviews

I offered participants the choice of an in-person or online interview. I felt that given the job role of the participants, they would likely be familiar with video conferencing platforms and may find it easier to find the time for a virtual meeting, thus increasing the participants' overall enjoyment and satisfaction in the interview process (Archibald et al., 2019). Out of a total of seven participants, five opted for remote interviews. This shows that for this group, the virtual meetings were the preferred option.

Building rapport with participants is widely seen as an important step in successful qualitative interviewing (King et al., 2019). The goal of building rapport with participants is to develop trust, so that they feel comfortable sharing their experiences and views with the researcher (King et al., 2019). I aimed to build rapport through positive email tone when organising interviews, and then at the start of each interview by clearly explaining the research process and reinforcing confidentiality practices. Recent research has shown that rapport between a researcher and participant can be built relatively easily over video conferencing platforms during online interviews (Archibald et al., 2019). In this research, I did not perceive any difficulties in building rapport or in interacting across the virtual platform.

3.5 Ethical Considerations

One key aspect of social research is that of ethical practice. Ethical approval for the current study was granted by the University of Birmingham's College of Social Sciences Ethical Review Committee on 13th March 2022. The ethical considerations made in the study were guided by the Code of Human Research Ethics (British Psychological Society, 2021). The information sheet is presented in Appendix A, and the consent form in Appendix E.

3.5.1 Informed consent

The principle of informed consent arises from the necessity to allow participants autonomy and freedom (Cohen et al., 2017). Consent to take part in any given piece of research thus protects and respects an individual's right for self-determination. Informed consent enables participants to weigh up the risks and benefits for taking part in a piece of research, before agreeing to participate. As part of this research, participants were provided with full information about the study on an information sheet that was emailed as part of the initial invitation to participate (Appendix A). This gave participants time to digest the information and formulate any questions they may have (Cohen et al., 2017). Participants were also given the opportunity to ask further questions about the research prior to interview. Participants signed a consent form which also asked them to confirm that they understood what the research was about, what taking part entailed and how their data would be shared and stored (Appendix B). Participants were not incentivised or rewarded for their participation, which helped to ensure that the decision to take part was genuinely free (Cohen et al., 2017).

3.5.2 Right to Withdraw

Within research studies, participants must be given the option to refuse to participate, or withdraw from the research entirely, up until a date specified by the researcher (BPS, 2021). Participants were reminded of their right to withdraw at any point up until two weeks after their interview, at the start of each interview. On all written communication to participants, my contact details, and those of my academic supervisor, were provided, should the participant wish to withdraw.

3.5.3 Debriefing

In the study, each participant was verbally debriefed at the end of their interview. At this stage, participants were thanked for their time and participation, and indications were made about the next steps for the research. Participants were also given the opportunity to ask any further questions.

3.5.4 Confidentiality

Participants in psychological research have the right to assume that all the information they provide will be kept confidential (BPS, 2021). Participants were reminded of this fact when they provided consent to take part in the research. All data was treated as confidential and any identifying information, such as names and places, was removed during transcription. Codes used by the researcher to organise and identify the data were stored in separate files to the data itself, and all data was kept on a password protected computer in password protected files. The final write up of the research contains no information that could be used to identify the participants.

3.5.5 Risks

The risk to participants is an important consideration in psychological research. It was felt that the risks in the current study were low, however a small number of possible negative impacts of the research were identified, and appropriate management strategies were outlined in the study's application for ethical review. Firstly, there was a possible risk that discussion of developmental trauma and trauma informed practice could evoke feelings of distress in participants if they had experienced trauma related challenges in their personal lives. It is also possible that the participants could discuss stressful or upsetting experiences which may evoke such feelings. Therefore, I ensured to pay attention to any non-verbal signs that the participant was experiencing discomfort or heightened emotion and planned to offer them a break in the interview, reminding them of their right to withdraw at any time.

There was also a risk that the participants could have felt as though their teaching practice was being judged, or that their understanding or views on developmental trauma and trauma informed practice did not align with that of the interviewer. To avoid this, participants were reminded of the purpose of the research, the position of the interviewer, and processes regarding confidentiality, prior to their interview.

3.5.6 Data management

All data was stored on a password-protected computer. All files were uploaded into password-protected folders so that the transcription of the audio files could be completed. Each participant was assigned a numerical code that was used throughout data collection and analysis which helped to organise the data.

3.6 Data Analysis

RTA is considered to be a robust method for analysing qualitative data and was deemed to be the most appropriate method of data analysis for the current study (Braun & Clarke, 2022). As well as RTA, there are a wide variety of phenomenological approaches to research. IPA was also considered. Section 3.6.2 below provides a rationale for the use of RTA in this research.

3.6.1 Reflexive Thematic Analysis

RTA is a flexible approach that can be applied across a range of research paradigms involving qualitative research, providing a framework for researchers to address their research questions (Braun & Clarke, 2022). Although there are several versions Thematic Analysis, they all share an interest in patterns of meaning which are established through the process of coding and thematic development. Braun and Clarke (2022) outline RTA as a six-phase process. Each phase, and how it was carried out in this study is described in Table 5. During phase-six of the write up, which includes discussion of the analysis, Bronfenbrenner's (2005) ecological systems theory is used to help explain aspects of the findings. Bronfenbrenner's theory views childhood development as occurring within a complex system of interrelating components at multiple levels of their surrounding environment. The theory emphasises the primacy of human relationships at all levels of a child's development (Bronfenbrenner, 2005). Appendix F displays an example of codes and how they were reorganised during Phase 2 of the RTA process to support the initial generation of themes.

Table 5

Outline of Reflexive Thematic Analysis and Process (Adapted from Braun & Clarke, 2022)

Phase of RTA	Purpose	Description of Process
Phase One: Familiarisation	Immersion into the dataset to support the analytic process.	<ul style="list-style-type: none"> • Transcriptions were made of all interviews by listening to the audio recording and typing them by hand. • These transcriptions were then re-read whilst listening to the audio recordings for a second time to ensure accuracy. • Initial thoughts, questions and reflections were noted in the research journal.
Phase Two: Coding	To condense the data.	<ul style="list-style-type: none"> • Transcriptions were imported to NVivo. • Each transcription was worked through systemically to identify interesting segments of the data which were coded based upon meaning. • Codes were reviewed and those with similar meanings were condensed or combined.
Phase Three: Generating Initial Themes	To use initial coding to identify patterns of meaning across the dataset.	<ul style="list-style-type: none"> • Codes across the dataset were analysed, considering their relationship to one another. • Vivid excerpts were noted down to be revisited during Phase 6. Candidate themes were initially recorded in the research journal. All coded data was collated relevant to each candidate theme.

Phase Four: Developing and Reviewing Themes	To assess the initial fit of candidate themes in relationship to the research themes and the dataset as a whole.	<ul style="list-style-type: none">• Data extracts with each candidate theme were reviewed to ensure that it described a coherent pattern within the data.• Some initial candidate themes were removed/collapsed/renamed.• A thematic map was created to describe the relationship between themes.
Phase Five: Refining and Naming Themes	To draw conclusions regarding the analysis.	<ul style="list-style-type: none">• Themes were refined and rearranged within the thematic map to produce a coherent and complete summary.• Each theme was given an informative name which was built around a core concept.
Phase Six: Writing Up	To prove a clear written account of the research process and findings	<ul style="list-style-type: none">• Excerpts which exemplified the themes were selected.• The thematic map was finalised and formatted.• Participants were assigned a random pseudonym for the purposes of reporting.• The final themes were reported in a narrative style with reference to the research questions made in the conclusive stage of the write up.

RTA can take an inductive orientation to the data where analysis is driven by the data content, or a deductive orientation where analysis is shaped by theoretical constructs of interest (Braun & Clarke, 2022). As this study sought to explore the individual, context-specific experiences of the participants, the decision was made to analyse the data inductively. This approach ensured that the research was exploratory in nature and that themes were developed actively and organically. It should be considered however that the interview schedule itself was created based on my existing knowledge of the topic area, and therefore my lens as a researcher will have exerted some influence on the identification of themes.

A further consideration in RTA is the level at which the researcher codes meaning. RTA can capture meaning at a semantic level, which is mainly descriptive and driven by participant responses, or at the latent level, which is more conceptual and driven by the researcher's implicit understanding of the data. The decision about the nature of coding should be determined by what is most relevant to the research and its aims (Braun & Clarke, 2022). This study aims to capture meaning at the semantic level in the early stages of analysis, with any analysis at the latent level linking to wider applications of the research and actionable outcomes towards the final stages.

3.6.2 Rationale for Reflexive Thematic Analysis

Although RTA was decided upon as the best method to analyse data in the present study, other approaches were considered, including IPA. IPA "is a qualitative research approach committed to the examination of how people make sense of their major life experiences" (Smith et al., 2009; p. 1). IPA research is particularly focussed on the everyday lived experiences that take on particular significance (Smith et al., 2009). The main difference between RTA and IPA, is IPA's dual focus on both thematic development whilst holding the importance of idiographic meaning. In line with these aims, the procedures of IPA differ from that of RTA, in that IPA looks deeply at each case, focusing on the language used to convey meaning (Braun & Clarke, 2021). This approach encourages a focus of the unique qualities of each participant. As I aimed to explore patterns in meaning across the experiences of primary school teachers in relation to trauma-informed theory and approaches, I felt

that RTA could best support this process, whilst considering the social context within which the research was carried out. I also thought that RTA better suited my research questions which aimed to explore teachers' experiences of general practice, rather than focussing on a particularly significant event.

RTA can also be used for research that hopes to result in 'actionable outcomes' with implications for future practice (Sandelowski & Leeman, 2012). As this research was carried out in the context of a local authority educational psychology service and their trauma-informed training, I hoped that my research would contribute to understanding about teachers experiences and ongoing development work.

A researcher's use of RTA must also be located in relation to their ontological and epistemological position (Braun & Clarke, 2022). When realism informs RTA, it is assumed that the information uncovered is a representation of a true reality. When RTA research is focused on experiences and sense-making, the realist researcher would argue that they aim to capture individual subjective accounts related to an objective reality where social phenomena exist externally. A critical realist viewpoint conceptualises different interpretations of an independent reality, that are mediated through culture and language, and can be explored through RTA research. When considering the assumptions embedded in Thematic Analysis, and particularly in RTA, critical realism is the most appropriate philosophical position.

3.7 Evaluation of Research Quality

3.7.1 Trustworthiness

For qualitative research to be accepted as trustworthy, data analysis must be "conducted in a precise, consistent and exhaustive manner" (Nowell et al., 2017, p. 1). This means that researchers must disclose their methods of data analysis in enough detail for others to determine whether the analytic process is credible (Nowell et al., 2017). Although a term often reserved for quantitative research, Cohen et al. (2017) claims that validity is key to all research. Validity in qualitative research pertains to the appropriateness of tools, processes, and findings from the data and has several principles such as:

- Research is bound in context with the natural setting being the principal source of data.
- The researcher is part of the researched world and they are the key instrument of the research.
- There is concern for research processes as well as research outcomes.
- Data is analysed inductively.
- Data is presented in terms of respondents and aim to be reported 'through their eyes'.

Lincon and Guba (1985) suggest that the key criteria for establishing validity in qualitative research are:

- **Credibility:** the research findings are credible and trustworthy.
- **Dependability:** there is consistency within the research such that the findings could be replicated in a similar context.
- **Confirmability:** there is a clear link between the data and the findings.
- **Transferability:** the findings could be transferred to another context.

Nowell et al. (2017) apply similar principles to those described by Lincon and Guba (1985) to each phase of RTA. Table 6 outlines the means taken to establish trustworthiness in the analytic process of this research.

Table 6

Means of Establishing Trustworthiness During Each Phase of Reflexive Thematic Analysis (Nowell et al., 2017)

Phase of RTA	Means of Establishing Trustworthiness
Phase One: Familiarisation	<ul style="list-style-type: none"> • Interviews were audio recorded on a dictaphone and transcribed verbatim through several cycles to ensure accuracy. • Prolonged engagement with the data which included listening to the audio recording of each interview more than once. • Documenting thoughts, comments, and reflections in reflexive journal (see section 3.7.2). • Storage of all raw data and related files in archives (participants assigned numerical codes)
Phase Two: Coding	<ul style="list-style-type: none"> • Coding completed systematically (i.e. each interview coded and then revisited again sequentially). • Audit trails of code generation saved in NVivo (i.e. phase 1 – initial coding and phase 2 – initial merging and reorganising of codes). • Grounding the findings in the data by using an inductive method of analysis. • Extracts coded as many times as deemed relevant. • Reflexive journaling which included notes on initial ideas for theme development (see section 3.7.2). • Discussion and debriefing with peers about coding process.

Phase Three: Generating Initial Themes	<ul style="list-style-type: none">• Diagramming of initial theme ideas (at first by hand and then on the online software MindMup).• Keeping detailed notes throughout this process to aid theme development in research journal (see section 3.7.2).
Phase Four: Developing and Reviewing Themes	<ul style="list-style-type: none">• Researcher triangulation (i.e. peer supervision to discuss initial theme generation)• Returning to raw data to check that coded extracts fitted with themes and sub-themes.• Process of thematic map development archived.
Phase Five: Refining and Naming Themes	<ul style="list-style-type: none">• Documentation of theme naming captured by thematic mapping.• Further researcher triangulation (i.e. peer supervision to discuss refined themes and sub-themes).
Phase Six: Writing Up	<ul style="list-style-type: none">• Process of coding and analysis described in detail.• Themes and theme names not considered final until write up stage complete (e.g. sub-theme 3b was re-named during the write up to better capture participants narratives).• Description of context of research provided.• Rationale provided for methodological and analytical choices made.• All quotations accompanied with participant pseudonym to demonstrate that various participants were represented across each theme/ sub-theme. Additional quotations also appended.• Analysis discussed in terms of existing literature.

3.7.2 Reflexivity

A fundamental characteristic of RTA is the reflexivity of the researcher (Braun & Clarke, 2022). Jamieson et al. (2022) state that “If positionality refers to what we know and believe, then reflexivity is about what we do with this knowledge” (p. 2). Thus, reflexivity is the process of engaging in continual, critical reflection about oneself as a researcher, how one’s biases interact with the research process, and how our world-view is shaped by and shapes the research (Jamieson et al., 2022). Reflexivity differs from reflection. The reflexive process occurs before, during and after the research process, whereas reflection typically occurs following an activity and identifies retrospective insights and understanding (Jamieson et al., 2022). Therefore, reflexivity has a greater capacity to guide the researcher and the research process (Jamieson et al., 2022). Reflexivity can take many different forms in practice, such as record keeping and journaling on thoughts about the research process, encounters with participants, and personal reactions towards research-related experiences (Olukotun et al., 2021).

Reflexive research values subjectivity and acknowledging the researcher’s position in relation to their research. Braun and Clarke (2022) hold that knowledge is situated within and shaped by research practices and thus they state that “researcher subjectivity, and the aligned practice of reflexivity, is the *key* to successful reflexive TA” (p. 12). Similarly, others argue that reflexivity is the central tenet of insightful and successful qualitative research (Olukotun et al., 2021).

Reflexivity in This Study. In the current study, a research journal recorded the research journey and captured my thoughts, ideas and reflections at various stages of the research process. The journal included notes on topics such as:

- Initial thoughts related to the scope of the research (Appendix G)
- Details and comments on existing research that I had read (Appendix H).
- Notes taken during supervision (Appendix I).
- Reflections throughout each stage of the research process (Appendix J).
- Notes taken during university-based research workshops (Appendix K).

An illustrative example of how I used reflexive journaling during the research process was when I began to engage with the process of RTA and found myself with

questions around my decision to use this method of analysis over another. During a research workshop at university a peer recommended a research paper discussing the similarities and differences between RTA and IPA, so I made a note of this to return to (Appendix K). Following a discussion with peers and some further reading I had clarified my thoughts regarding the rationale for my decision and was able to include the reasons I had chosen RTA in my final write up (see section 3.6.2).

3.8 Chapter Summary

This chapter has outlined the philosophical principles, methodological approaches and ethical considerations relevant to this study. Chapter Four presents the findings and discussion, where the results of the RTA are presented and discussed in reference to the existing literature in the field.

CHAPTER FOUR: ANALYSIS AND DISCUSSION

4.1 Overview of Chapter

This chapter presents and discusses the findings from this research which aimed to elicit primary school teachers' experiences of supporting CYP who have been exposed to trauma and implementing trauma-informed approaches following whole-school training. To analyse the data gathered via semi-structured interviews, the phases of RTA, as described by Braun and Clarke (2022), were followed. Each interview transcript was analysed inductively to ensure that themes were developed in an active and organic way. The six phases of RTA are distinct and yet recursive. Coding initially produced a vast number of codes. However these individual codes typically captured small differences in wording and could be clustered together. These clusters began to form the basis of themes, and so at this point I moved from NVivo to an online mapping tool called MindMup. I used this editable mapping tool to work and rework my codes into possible themes, until I felt comfortable that the thematic map represented the key messages in the data. I revisited NVivo throughout this process to check that the meaning of the codes (and individual quotations) aligned with the central organising concept of the themes. To develop my thinking, I engaged in peer supervision and discussions with my academic supervisor. The process of writing this chapter also contributed to the process of analysis. RTA describes a process of interpreting the patterns of meaning within a dataset. In this section I use direct quotations to evidence the nuance of each subtheme and how it related to each major theme. Each quotation is linked to its source by referencing each participant by their pseudonym. In some cases, very similar quotations were given by multiple participants in the same context, in this case an example quotation is provided in the text. Appendix L comprises a wider selection of quotations, linked to each sub-theme. I will also discuss the analysis with regards to the existing scholarly work within the field.

4.2 Presentation of Themes and Sub-Themes

A total of five major themes, displayed in Figure 1, were identified during data analysis. Appropriate sub-themes were also developed for each of the five major

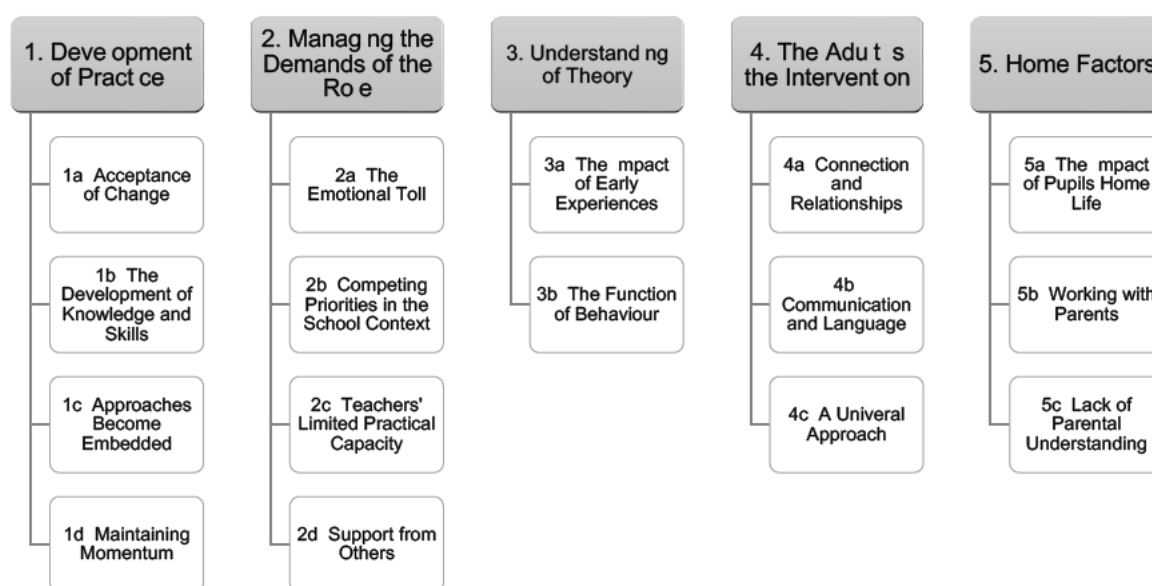
themes; these are also displayed in Figure 1. Discussion how each of the research questions are addressed by the themes is discussed more specifically in sections 5.2 and 5.3 of the following chapter. The research questions are:

1. What are teachers' experiences of supporting children who have been exposed to DT?
2. What are teachers' experiences of implementing trauma-informed approaches following whole-school training?

The following sections of this chapter will present each theme and its related subthemes in more detail.

Figure 1

Thematic Map



4.3 Theme 1: Development of Practice

During analysis, a significant theme was identified which focussed on how individual and whole-school practice changes and develops following whole-school trauma-informed training. Generally, participants gave an account of how their own practice developed following whole-school trauma training and identified resistance or a lack of readiness to change in others.

4.3.1 Sub-theme 1a: Acceptance of Change

The ideas of readiness to change amongst school staff was reported by most participants. Generally, the change process was described as varying across individuals in terms of their acceptance of new ways of practicing. Participants generally described acceptance for change as a process that takes time and described how for some this process takes longer (e.g. *“Different people embrace it at different speeds.”* [Anisha]). Participants described a range of initial staff responses to trauma-informed approaches. Jo described how amongst school staff, there was an initial sense of resistance (*“Not so much now, but there was an undercurrent of ‘oh, here comes the latest fad that we are going to have to do’.”*). Whereas Connie described a positive initial response but highlighted that some colleagues require ongoing support and reminders:

I feel like initially we had a really good response from it [trauma-informed training], and I feel like a lot of people have adopted it [trauma-informed practice], but I still feel like there's some teachers that still need to be reminded. Still need to be consistently taught the way. So it's, it will be a journey to get there with that one.

Some participants attributed the degree of readiness to change to their colleagues' age or experience. Generally, older, more experienced teachers who participants considered might be accustomed to more authoritarian or traditional teaching styles were described as more resistant (e.g. *“Some staff, it has been much harder. I think especially if they've been raised quite authoritarian.”* [Iris]) and as needing to make significant shifts in their practice:

I feel that some of the teachers that have got to make a significant shift in more traditional ways of teaching that's going to take a little bit more time, so which is fine, and we'll keep drip feeding, keep going, keep working alongside with them, and hopefully that will start to resonate. [Connie]

This group of more experienced colleagues was described as the minority, distinct from much of the workforce who were more likely to be accepting of change. Participants described that a change of practice might be more challenging for this group as it was a bigger shift from their norm, and perhaps easier for their newer,

less experienced colleagues (e.g. *“Not to [...] be ageist, but I think, you know, when you're younger, maybe you've got more energy to kind of take on board all these things.”* [Anisha]). No participant described themselves as being resistant or not ready to change.

In the existing literature, studies that included teachers who had received trauma-informed training generally identified trauma-informed practice as important and effective (e.g. Hinton-Pollard, 2020). Generally, teachers who participate in research about trauma-informed practice reportedly feel confident in supporting CYP who have experienced trauma and in implementing trauma-informed approaches following whole-school trauma-informed training (Peterson, 2019). A primary challenge in gaining whole-school buy-in relates to the existing organisational culture and norms of current teaching practice, which can act as a barrier to fully incorporating a trauma-informed approach (Chafouleas et al., 2016). Thus, the early stages of the implementation of trauma-informed practice involves building consensus and developing staff confidence and competence (Chafouleas et al., 2016).

In this research study, several participants were SENCOs and/or held a trauma-informed lead role within their settings. It appears that this gave them a distinct perspective on the acceptance and implementation of trauma-informed approaches by their colleagues. As a result, participants in this study reflected on the practice of a minority of their colleagues who they perceived to have found the change process, from what they viewed as traditional ways of teaching and managing behaviour, to that of a whole-school trauma-informed approach. Hema also commented that time was a factor for them in putting change into practice (*“Personally for me, I think it just took me a little bit of time to just change the way I was talking to the children.”*).

4.3.2 Sub-theme 1b: The Development of Knowledge and Skills

Participants described the development of their knowledge and skills following trauma-informed training (e.g. *“Just learned loads and loads.”* [Erin]; *“We have got a lot better in our [...] understanding.”* [Connie]). The development of knowledge and skills was discussed at the individual and whole-school level. The idea that the

development of practice is an ongoing evolution is captured in Anisha's comment *"Well, I'm kind of thinking that the way we've evolved as a school, and I've evolved as a practitioner."*

At the individual level, participants made links between learning new information and developing their skills in practice (e.g. *"It's just about developing your practice and once you've done that you know it's just, it's really easy."* [Hema]). Participants expressed that the development of their knowledge and skills occurs with practice over time (e.g. *"I think that you learn over time [...] I'm building on strategies and the more I've had the training, or I refreshed the training."*).

When discussing the development of their school's behaviour policy to align with trauma-informed approaches, Iris described that this was an ongoing process that would always be in review (*"Yeah, and I think with our behaviour policy, we've always said that it's just ongoing, it's always in review, it's never done because it never will be done because children's needs change."*). Participants also spoke about building on existing practice, again relating this process to the idea that the development of practice is ongoing (e.g. *"I feel like we're moving in the right direction"; "We'll just hopefully keep building and building and building."* [Connie]).

Existing research has also highlighted the development of teachers' understanding of trauma-informed practice. Participants in the existing literature describe feeling well equipped to working with CYP who have experienced trauma following whole-school trauma-informed training (Peterson, 2019). Research has highlighted teachers' beliefs about the importance of trauma-informed training in helping them to manage the challenges of supporting vulnerable pupils (Campbell, 2022).

Within the literature, self-efficacy is also highlighted as a factor in teachers' perceived ability to support CYP who have been exposed to trauma (e.g. Campbell, 2022). Although not mentioned explicitly by participants, through their description of the development of their knowledge and how this related to their skill development in practice, it appears that following whole-school training, individuals who subscribe to trauma-informed theory have the perceived confidence and ability to put trauma-informed approaches into practice. Although, it was acknowledged by Anisha that the development of their skills in practice was *"A real steep learning curve."*

4.3.3 Sub-theme 1c: Approaches Become Embedded

The fact that trauma-informed approaches become embedded within daily practice over time was discussed or inferred by all participants. Participants highlighted that the more embedded trauma-informed approaches become within their practice and within school culture, the easier they become to implement (e.g. *“The more embedded it becomes, the easier it is.”* [Jo]; *“It just became natural.”* [Sarah]). Again referring to the implementation of trauma-informed approaches, Iris commented *“You use it so much that you don’t even think about it anymore, it just becomes second nature.”* This reflects the idea that when trauma-informed approaches are embedded, they become easier to implement as they become a normal way of practicing. This echoes the findings of Peterson (2019), where participants reported feelings of confidence in embedding trauma-informed approaches into their daily practice.

Participants also discussed the frequency with which they implement trauma-informed approaches once they become embedded into their practice. Generally participants described using the approaches on a daily basis (*“Yeah, [trauma-informed practice] definitely used as part of daily practice.”* [Hema]; *“It’s [Emotion Coaching] an everyday teaching strategy to use.”* [Connie]).

Embedded practice was also related to the idea that trauma-informed approaches can be implemented alongside existing practice. Trauma-informed practice was described as forming part of a toolkit that brings all approaches together (e.g. *“It’s [trauma-informed practice] a tool isn’t it. It’s one of the many tools that we use.”* [Anisha]; *“Everything kind of goes hand in hand and works together.”* [Iris]; *“It [trauma-informed practice] encompasses everything, kind of brings everything together.”* [Connie]). This aligns with the notion that trauma-informed approaches describe a framework for practice that is both universal and flexible to the individual context. This reflects Hinton-Pollard’s (2020) findings in which all participants in their study described the successful ‘strategic integration’ of trauma-informed approaches into the existing teaching practice. Hinton-Pollard (2020) found that the most commonly reported strategy carried out strategically by teachers in their practice was

building connections and relationships with CYP. This idea is captured in more depth in sub-theme 4a of this study.

4.3.4 Sub-theme 1d: Maintaining Momentum

Most participants discussed the idea of maintaining momentum for change and for the continued implementation of trauma-informed approaches over time. In this research, participants valued opportunities for follow-up and refresher training (e.g. *“It [refresher training] is good because it really does make you think about your practice really again. So it's quite good to have [...] the refresher sessions as well.”* [Hema]). This included larger refresher events delivered by the Educational Psychology Service, reminders of trauma-related information shared during staff meetings and regular reflective tasks. Participants felt that a proactive approach to CPD helped to keep approaches current and sustain the implementation of developed practice (*“I think it helps for everyone to see that it's not just the latest fad, or the next thing we've got funding for. It's actually much deeper than that. [Jo]; “So it [additional support for using Emotion Coaching] has been really useful in, just in keeping it [Emotion Coaching] current [...] because it's so easy to have that training and then it fall off a cliff isn't it, especially with summer holidays and things.”* [Iris]). Refresher events were seen to be important for existing staff, new staff and agency staff (*“I've been here for such a long time. There are new to school staff, new to year group, we've got agency staff as well. So it's been good to kind of keep having the training.”* [Anisha]).

Jo related the idea of maintaining momentum to the importance of the role of a training lead within the setting, describing that without a lead, the momentum for embedded trauma-informed approaches across the school would be lost (*“I think that wouldn't happen, if you didn't sort of, lead by example [...] the minute I'm not doing, I think, it [a whole-school approach to trauma-informed practice] would all fall apart.”*). Connie described how they would continue to take responsibility for promoting trauma-informed approaches within their setting (e.g. *“I just want to keep, in every staff meeting throughout the week, always talking about it [trauma-informed practice] so it's always present. So we're being active.”*).

The perspective of the trauma-informed practice leads in this research provided a distinct perspective on the challenges to maintaining momentum for trauma-informed practice in their setting and their role related to this. In Ganigan's (2021) research into teachers' experience of working within a trauma-informed setting, all participants shared the difficulty they experience in maintaining cultural awareness and empathy, regardless of their individual knowledge. Participants in Ganigan's (2021) research felt that it can be difficult for new members of staff to show genuine understanding and empathy and commented that a lack of established cultural empathy can lead to high teacher turnover, thus exacerbating the issue. Ganigan (2021) highlighted the need for enhanced professional development with a continual approach to training and implementation. Ganigan (2021) concluded that learning and reflection must take place as an ongoing cycle to ensure that teachers are supported to implement trauma-informed approaches in the most effective way. In line with this view, Metz et al. (2015) claim that trauma-informed training alone is not sufficient to ensure effective implementation of trauma-informed approaches. To be successful, initial trauma-informed training must be established through further training opportunities on specific practical strategies and through individual coaching for teachers to allow them to develop their capacity to implement trauma-informed skills and strategies, thus increasing the effectiveness and sustainability of the initial training (Metz et al., 2015).

Support from a school's senior leadership team is also key to maintaining momentum for the implementation of any new approach and to facilitate buy-in within the existing school system (Chafouleas et al., 2016). Commitment to trauma-informed practice requires supporting infrastructure within the organisation, such as policy review, to ensure that expectations for practice are clear and changes to practice are sustained (Berger & Martin, 2021). This systems level work helps to provide a consistent narrative from the senior leadership team that trauma-informed approaches are to be adopted and implemented by all (Metz et al., 2015).

4.3.5 Overall Discussion of Theme 1: Development of Practice

Following whole-school trauma training, participants in this study were generally confident in their descriptions of the development of their knowledge, skills

and practice. Although it was acknowledged that change is a process that takes time, participants felt that with practice, their skills in implementing trauma-informed approaches become embedded within their daily practice. This provides implicit evidence of the potential success and impact of trauma-related training for teachers (Riley, 2013). In their evaluative research, McIntyre et al. (2019) found that there was a significant increase in teachers' knowledge of trauma immediately following trauma-informed training. As well as this, for teachers who perceived that trauma-informed approaches aligned with existing school norms, knowledge growth was associated with an increased acceptability of trauma-informed approaches. However, in teachers who do not perceive that trauma-informed approaches fit with current practices, knowledge growth was associated with decreased acceptability (McIntyre et al., 2019). This highlights the importance of demonstrating how trauma-informed approaches align with existing practice in order to gain acceptance and buy-in from all staff.

Within the theme, participants also discussed the resistance they observed in a minority of their colleagues. For some participants, this linked to the idea that in their role as the trauma-informed lead at the setting, they were required to keep the trauma-informed conversation alive. Overall, this theme highlights the importance of whole-school trauma-informed practice, and the importance of ongoing professional development opportunities for school staff to support their confidence in implementing effective trauma-informed strategies and to support the continual development of their practice.

4.4 Theme 2: Managing the Demands of the Role

The second main theme relates to teachers' perceptions of their ability and capacity to manage the demands of their role, particularly when supporting CYP who have experienced trauma. Participants discussed both the difficulties of managing the multiple demands of their role, and the supports that facilitated them in being able to do so.

4.4.1 Sub-theme 2a: The Emotional Toll

Almost all participants discussed the emotional toll that they experienced as a result of supporting children who have been exposed to trauma. Generally, participants felt that they (and their colleagues) are impacted on an emotional level as they are invested in supporting this vulnerable group:

I think the teachers that do buy in are emotionally affected in a compassionate way, for the children, as in 'what more can I do to help them? I wish I could take them home and give them a meal'. [Erin]

The emotional toll experienced by participants was often expressed as being routed in feelings of compassion (e.g. *"It's always what you want to support and fix and repair and make a difference."* [Connie]). Participants often used the term 'drained' to express how they felt (e.g. *"It's [supporting children who have experienced trauma] really intense and I think you feel so drained afterwards."* [Anisha]; *"It's [supporting children who have experienced trauma] really hard. It's really draining."* [Jo]). Connie related this feeling of being 'drained' to the physical intensity of supporting the emotional needs of CYP:

I find it massively emotionally involved and emotionally invested in all of parents, child and the teachers well-being. And yeah, you can see like teachers do get drained consistently when you've got consistent regulation of behaviour and real emotional needs it's very, very draining for teachers.

In some cases, it appeared that emotional strains arose from understanding the young person, their trauma experiences and their difficulties. Erin described their experience of the emotional toll as shared by colleagues and expressed physically (*"We sat and cry sometimes for certain children who've, you know, who've been brought to us... you sit and you weep for them really."*).

The mental toll of this work was also expressed by Connie in their comment *"I did find it quite overwhelming at first and then, it's just because you can't switch off cause it's always on your head. It's always in your head. It's always what you're talking about."* As a result of this, participants expressed reaching capacity, which results in a lack of patience and tolerance in their personal lives, sharing that they *"don't know how to switch off"* [Connie] when they get home:

At a certain point in the autumn term, where it was difficult, where we said, you know, 'we feel like we're done like, when we get home, we don't have the patience now, and we've just done emotionally' and I certainly felt that my tolerance with my children. [Anisha]

This suggests that the intensity of supporting CYP who have experienced trauma can have a negative impact on teachers' well-being which extends to their lives beyond the classroom. The emotional toll that teachers' experience was expressed as being a challenging aspect of their role which is compounded by the feelings of responsibility:

I think when you're in the middle of it feels really hard [...]. I suppose the position you have in the classroom as a teacher, you're the one that's ultimately responsible, and you're keeping it together. So I think you have to embrace it [trauma-informed practice]. And I think, you know, the teachers generally have, but I think it's difficult. [Anisha]

Despite this, Sarah commented that one of the strengths of the trauma-informed training was that it highlighted the need for teachers to recognise when they are experiencing heightening emotion or stress and to practice self-care:

Sometimes things come to you, and you get, like, overwhelmed with it [supporting children who have experienced trauma] and I do think that it [the training] was actually quite helpful for me personally understanding that sometimes I need to take a step back. Sometimes when it gets too much [...] If you're stressed, you're not gonna be the best teacher to those children.

A salient theme within the existing literature relates to teachers' well-being and their experiences of emotional fatigue and stress (Gallagher, 2014; Padak, 2019; Peterson, 2019; Hinton-Pollard, 2020; Broussard, 2021; Ladhawala, 2021; Campbell 2022). This sub-theme, related to the emotional toll of working with CYP who have experienced trauma, reinforces Peterson's (2019) research into teachers' experience of secondary trauma (also termed vicarious trauma) which was perceived and described by participants in various ways. There was a consistent narrative in

Peterson's (2019) research that working within a trauma-informed setting increases secondary trauma. This sense of an emotional residue that is carried following the exposure to the traumatic stories of others was also evident in the emotive narratives of the participants in this study. This adds weight to the account in the existing literature that teaching professionals should receive practical support to manage the emotional impact of trauma-informed work as part of standard practice (Gallagher, 2014). Though the emotional impact of increased and ongoing exposure to trauma as a result of working closely with CYP could be viewed as a disadvantage of working in a trauma-informed way, educators can buffer themselves against these effects by ensuring that they are confident in their ability to practice and distancing themselves when required (Peterson, 2019). In fact, research suggests that when working within a setting where self-care is part of universal trauma-informed practice, teachers feel equipped to manage the emotional demands of the role and this leads to feelings of job satisfaction and sustainability (Peterson, 2019).

4.4.2 Subtheme 2b: Competing Priorities in the School Context

Managing the range of competing priorities in the school context was identified as a sub-theme as all participants discussed the conflict they experience when attempting to meet the individual needs of pupils who have experienced trauma. Participants described the tension between facilitating social and emotional learning and learning that relates to the academic curriculum:

We become conflicted really between managing those needs and, you know the expectations of what a school is for, [...] it's to educate, and at what point do you say we're going to completely rule out the curriculum because your social and emotional needs have to take precedence. [Erin]

Participants also identified that CYP with disrupted development, as a result of early trauma, often lack early skills necessary for learning and expressed that providing opportunities in which pupils could gain these missed skills was a vital part of supporting that young person's development and providing them skills for life (*"If they don't have those skills, they won't be able to self-regulate or to discuss their emotions."* [Hema]; *"I think that's how you get children ready for learning and until*

you have that, I think those are the basic needs that need to be met for children to be able to learn." [Erin]). Iris labelled this as the 'hidden curriculum' which in their description was something distinct from the academic curriculum (*"It's that hidden curriculum isn't it, that there's so much pressure with all of the rest of the curriculum."* [Iris]). This suggests that social and emotional learning is perceived to be separate and distinct from learning within the national curriculum, but also that social and emotional skills are a vital prerequisite of a young person's ability to engage with academic learning and thus the development of academic skills. In these cases, participants felt it was their role to adapt the curriculum to teach these fundamental skills.

Generally, social and emotional development was seen as essential (e.g. *"That's learning as well, the emotion side is learning how, for how to deal with stuff in life."* [Sarah]). Trauma-informed practices help to ensure that the emotional and social development of CYP who have experienced trauma is addressed as a priority. Thus, trauma-informed approaches could promote academic achievement, as a focus on social and emotional skills ultimately enables a young person to actively engage with learning tasks (Stokes & Brunzell, 2019).

Participants often spoke about CYPs' lack of readiness to learn, particularly when they were not yet able to regulate effectively (e.g. *"If they can't actually regulate and form new attachments and feel safe then they won't be able to learn yet because they're constantly in that state of anxiety, that fight or flight."* [Connie]). The ability to regulate was seen at the most important first step in helping children who have been exposed to trauma to be ready to learn (e.g. *"It's all about that behaviour. Which is where the learning difficulties are. You're not going to learn anything, if you're not regulated."* [Anisha]). This is in line with the existing literature in which participants describe CYPs' difficulties with emotional and behavioural regulation, and how these difficulties act as a barrier to learning (e.g. Abell, 2021; Ellison & Walton-Fisette, 2022; Wiley, 2021).

Difficulties with learning were perceived by participants to be a direct result of pupils' social and emotional difficulties. Difficulties with learning were described as impacting on a pupil's ability to demonstrate their academic potential at any given time, related to previous or current trauma experiences at home:

The learning difficulties are just as a result of the behaviour and not being able to regulate. So the learning difficulties are secondary, really, because it's more the pastoral side and the emotional side that we need to deal with first, I think.

[Anisha]

Although not a specific research aim in this study, participants discussed their experiences of the link between trauma experiences and pupils' lack of readiness to learn. This reinforces the literature, which documents the link between DT and poor academic outcomes, with real-world examples of pupils' difficulties with accessing curriculum-related learning activities if they lack basic, regulatory and cognitive skills (e.g. Anda et al., 2006). Schore and Schore (2008) hold that without supported bottom-up integration (i.e. multiple opportunities across the day to co-regulate through attachment relationships), CYP who have experienced trauma are not likely to be able to employ the top-down strategies necessarily for learning (i.e. self-talk, reframing challenge). By combining bottom-up and top-down strategies as part of the everyday curriculum, teachers can support effective learning in the classroom for all (Stokes & Brunzell, 2019). As well as this, the existing research also suggests that high self-efficacy in teachers promotes academic gains, suggesting that this should be a focus of ensuring successful implementation of trauma-informed practice (Perera et al., 2019; Stegall, 2020).

4.4.3 Subtheme 2c: Teachers' Limited Practical Capacity

As well as managing the competing priorities of working within the school, participants also discussed the practical capacity issues they face in their role. Teachers' feelings of limited capacity were primarily related to having a large group to support (*"You've got 29 other children, haven't you, and you don't get that opportunity all of the time."* [Hema]; *"Sometimes it's very difficult because you just, you're one teacher with 32 or so."* [Sarah]). This results in a lack of time to focus on individual support and implement trauma-informed approaches (e.g. *"The time restriction thing is always... you can't leave the room where you've got 30 children"* [Jo]). Jo attributed times when trauma-informed approaches weren't successful to practical capacity issues including lack of time and managing other demands:

I think times when it [Emotion Coaching] doesn't work, there have been loads, but they all come down to, not having the time and usually in the school environment being interrupted, because you need to be somewhere else, or there is no one looking after these children or there is another emergency and you can't follow through [...] what you would like to be able to do. You can't always be 1:1 with children.

This suggests that teachers' experiences of capacity difficulties act as a barrier to the effective implementation of trauma-informed approaches. Connie described their experience of the limited resources available in a mainstream setting (*"It's yeah, dealing with that with the staff that we have and within a mainstream environment."* [Connie]). In contrast to this perspective, Iris commented that one benefit of trauma-informed approaches are that they don't necessarily require dedicated time to implement across the school day, as another intervention or approach may (*"Having this kind of approach that weaves through everything works really well because you're not having to give dedicate time."*).

Participants described the challenge they face in meeting demands within the classroom as a result of their limited capacity. This sense of juggling a high workload was shared by participants both in terms of demands of the school day (e.g. *"I think for me, the challenge is trying to stay on top of it when there's so much work to do, like in the class, maths, English or science."* [Sarah]) and the demands of supporting multiple children with equally complex difficulties (e.g. *"There are probably four children in there who it's like, whack a mole, you know, one's bubbling away another one's popping up."* [Erin]).

This sub-theme extends beyond the trauma-informed literature and reflects the professional demands of the teacher role more widely. Within the trauma-informed literature, it is suggested that challenge and stress can arise regarding teachers' perceived ability to manage safety issues as a result of challenging behaviour in the classroom (Campbell, 2022).

4.4.4 Subtheme 2d: Support from Others

One way in which participants described managing the demands of the role was in the support they received from others. Participants described a wide range of supports available. Participants described feeling supported by their colleagues with a 'change of adult' strategy during challenging situations. Anisha described using a system within their setting called 'help hands' to request support from others. The idea that adults could request support or swap out, appeared to be grounded within a school culture where asking for support from any colleagues (from other teachers to members of the senior leadership team) was accepted as part of usual practice and responded to appropriately (e.g. *"We've got to tag team each other sometimes, because it's [supporting children who have experienced trauma] really intense. So I think that's what's helped, and I think the change of adult, which is again another one if things get challenging."* [Anisha]; *"Everybody can ask for help."* [Jo]). Support from others can provide teachers with support when managing challenging behaviour (Stegall, 2020).

Following challenging or stressful situations, participants expressed how helpful they found it to debrief with colleagues (e.g. *"It's making sure that they're having that debrief after when stuffs happened, that they're not being overwhelmed, that they're not taking it personally, so it's not on a personal attack on them."* [Connie]). Erin described that being able to debrief with colleagues has the biggest impact on helping them to manage challenges (*"It's a debrief and that sort of discussion afterwards I think that has the biggest impact."* [Erin]). Similarly, in Padak's (2019) research, teachers cited support from others as a way to support their well-being. Opportunities for debriefing and de-compressing with colleagues are highlighted both in this research and the existing research as important in helping teachers manage stress and heightened emotions when working with CYP who have experienced trauma (Ladhawala, 2021). This not only serves to protect the well-being of teachers themselves, but also means that they will be effective in the support they provide in the classroom (Ladhawala, 2021).

Participants also described the range of support they receive from professionals external to the school. Participants cited EPs as being supportive in offering opportunities to debrief in confidential spaces. Anisha commented on the

value of having debriefing opportunities without a member of senior leadership present. Connie commented on their setting's offer of counselling to support staff manage personal difficulties or traumas:

We've also got an outside agency that they can go for counselling if needed, but that's if they're, you know, have personal trauma as well if they need to, you know, talk to someone. They're really good. So yeah, we do have that outlet.

Jo and Hema also discussed the supportive role of external professionals working directly with CYP who have experienced adversity.

4.4.5 Overall Discussion of Theme 2: Managing the Demands of the Role

The theme of managing the demands of the role is captured in the following quotation from Connie, *“Teachers are under a lot of time constraints and curriculum demands and lots of things that they have to do, and assessment data and the stress, they are naturally stressed working in the environment that they are.”*

This theme is in line with existing research which highlights the obstacles that teachers face given the range of competing needs in the classroom, and the demands of the profession in meeting academic standards to a prescribed schedule (Gallagher, 2014). As well as this, it is well documented that teachers experience an impact to their emotional well-being as a result of supporting CYP who have experienced trauma. Therefore, with the aim of supporting teachers' well-being, trauma-informed training must include strategies for self-care and stress management (Gallagher, 2014).

Peterson's (2019) research linked participants feeling of responsibility to manage the pupils' emotional difficulties, whilst also providing academic input, to compassion fatigue amongst teachers. Therefore, providing teaching professionals with an appropriate level of support, in varied forms, could help them to manage the demands of the role and buffer them from feelings of compassion fatigue. In addition, as teacher-self efficacy is linked to academic gains, a topic that the participants in this study highlighted as a concern for CYP who have been exposed to trauma due to their lack of readiness to learn, promoting teacher self-efficacy should be a focus support for those who are supporting CYP who have experienced adversity (Perera

et al., 2019; Stegall, 2020). Overall, this theme highlights the importance of prioritising teacher well-being, and ensuring that teachers see their well-being as a priority so that proactive steps can be taken.

4.5 Theme 3: Understanding of Theory

Throughout the existing literature exploring teachers' experiences of implementing trauma-informed approaches following whole-school training, there is a consensus that participants increase their awareness and understanding of trauma-informed theory and how this is applied in practice. Professional development is a vital component of fostering trauma-informed schools as it helps to build understanding of and consensus for the implementation of trauma-informed theory (Chafouleas et al., 2016).

4.5.1 Sub-theme 3a: The Impact of Early Experiences

Throughout the interviews, participants shared their understanding of the impact of challenging early life experiences. Trauma in an individual's early years was seen by participants as being pivotal. Often, participants described these experiences as being the starting point for a young person's difficulties (e.g. *"Those early experiences have shaped where they are now."* [Anisha]). Current difficulties with behavioural and emotional regulation were describe as linked to, and often caused by, difficult early life experiences (*"They have learnt to adapt... so their behaviour is absolutely down to their early needs and how consistently those needs were met, or not met."* [Jo]; *"Those children who have had very difficult start to life are... you could definitely see why they're behaving the way they are."* [Hema]).

Sarah commented:

Whatever situation that they've had, whatever, so students relate to others based on their early experience, so like however their parents or carers or whatever the situation was, they've been dealt with, they're kind of mirror that and they show that.

Whilst discussing the impact of early trauma experienced by CYP, participants shared how trauma affects the child's developing brain, leading to a range of

difficulties such as the ability to regulate emotions and relate to others. Participants described differences in brain development in terms of activation of the fight/flight response and later difficulties with executive functioning skills. This aligns with existing literature which holds that executive functioning difficulties resulting from experiences of trauma are a contributing factor in academic underachievement (Perry, 2007). As well as this, existing research has highlighted teachers' awareness that DT affects the developing brain, which impacts important skills for learning (e.g. attention and memory) and a child's world-view (Gallagher, 2014).

Generally, there was a sense amongst the participants that children were not to blame for the difficulties they experience as a result of their trauma. Having an understanding of the impact of trauma on the brain appeared to support participants' understanding of why a young person who has experienced trauma may behave in a certain way and helped them to separate the individual from the behaviour (e.g. *"They often don't know, especially if it has happened at a point when they were preverbal. They have no idea why they behave in certain ways, do they. It is just that fight or flight response takes over."* [Jo]). This idea is captured as a main theme in Padak's (2019) research which described teachers' encounters of challenging behaviour and how participants related this to differences in early brain development.

It is important to highlight that participants' understanding of the impact of trauma on the brain was not entirely deterministic; they could find exceptions in their experiences of working with CYP who had been exposed to trauma, and Hema described the buffering impact of the school environment (*"I just think it's things that you can... as a school you can sort of counteract or can overcome. Yes, they might have a difficult starting point, but if you kind of work on them in school."*). This understanding of the buffering impact of positive experiences and nurturing relationships during childhood is evident in the existing literature (e.g. Bethell et al., 2019). In practice the applied notion that schools and school staff can provide PCEs is based on a good understanding and positive attitude towards trauma-informed practice. Overall, participants' understanding of the effects of trauma on a young person was seen to facilitate their understanding of trauma-informed approaches and commitment to implementing them in practice. Having an awareness of pupils' past

experiences has been described in the existing research as being essential in implementing a trauma-informed model (Fleming, 2019).

4.5.2 Sub-theme 3b: The Function of Behaviour

Throughout the interviews, all participants shared examples of the types of behaviour that CYP who have experienced trauma present with at school. Generally, participants spoke about externalising behaviours (e.g. *“things being thrown around the classroom”* [Anisha]). Participants’ descriptions of challenging behaviour (e.g. *“emotional outbursts”* [Anisha]; *“screaming and shouting”* [Iris]) were often linked to CYP who had difficulty regulating (e.g. *“He was quite dysregulated during the day.”* [Hema]). Iris commented *“The ones that have had very significant trauma, you see them straight away.”* Although cited less often, there was also mentioned of internalising behaviours linked to experiences of trauma (e.g. *“being withdrawn, and not wanting to engage and being really introverted”* [Anisha]).

All participants described behaviour as a form of communication which was linked to pupils’ early experiences of not getting their needs met (e.g. *“That’s what we see, is that how pupils have learned to get their needs met and we see it in inappropriate ways.”* [Jo]). Viewing behaviour as communicative appeared to support participants understanding of the young person and help them to manage challenging behaviour:

Once you’re interpreting the behaviour as... this child is shouting at me because they need me to hear something, they’re not shouting at me because of the thing that they’re saying. I think when you can start to divide the behaviour away from the incident and you can use it as a... what is this child trying to tell me? [Erin]

Participants consistently expressed the importance of interpreting behaviour to understand the child’s perspective (e.g. *“We know now that all behaviour is communication and it’s unpicking all of that.”* [Connie]). Making the link between behaviour and underlying emotions supported teachers’ curiosity and acceptance of what a young person may be experiencing when they display behaviour that challenges (*“The iceberg really resonates with a lot of the teachers as well, that knowing that this is what it’s showing, but all of this could be happening underneath.”*

[Connie]). Sarah also described how behaviour can be learnt (*“It's not like they've meant to be aggressive, or they've meant to hurt someone. It's based on sort of how they've seen maybe someone deal with it or whatever they've sort of seen from other people.”*).

Some research suggests that teachers can interpret challenging behaviour (i.e. behaviour that is often labelled attention-seeking) as a choice that a young person makes, perhaps to assert themselves in the classroom (Stokes & Brunzell, 2019). However, trauma-informed perspectives ask teachers to reflect on the underlying cause and function of behaviour. Often, a young person's behaviour is meeting a need for them (i.e. they are receiving adult attention), however the behaviour is maladaptive and at times, risky (Stokes & Brunzell, 2019). Fleming (2019) described the concept of 'meeting students where they are'. This links to the views of the participants in this study, that behaviour is communicative and they must try to understand the factors that lay beneath behaviour to meet that young person's needs.

Behaviour also has a social function. Riley (2013) suggests that teachers can initially react negatively when they feel rejected by a young person who may find it difficult to make and maintain relationships as a result of their prior experiences. However, following trauma-informed training teachers may be more likely to understand the function of behaviour and so may be better able to respond when they feel rejected (Riley, 2013).

4.5.3 Overall Discussion of Theme 3: Understanding of Theory

Teachers' awareness of trauma-informed theory and the factors that influence behavioural, academic, and social-emotional difficulties at school is believed to be essential in the implementation of a trauma-informed practice (Fleming, 2019). By understanding trauma-informed theory, teachers can adopt approaches to managing challenging behaviour which are trauma-sensitive (Fleming, 2019). Increasing teachers' knowledge of a young person's early experiences and the underlying causes of their behaviour can strengthen practice (Stokes & Brunzell, 2019).

Souers and Hall (2016) suggest that there are five key principles for fostering resilience in learning: (1) trauma is real, (2) trauma is prevalent, (3) trauma can affect

development in many ways, (4) educators must be prepared to support pupils affected by trauma even if it is not clear who they are, and (5) children are resilient and can succeed within positive learning environments. Ultimately, trauma-informed approaches rely on shifting adult perceptions of CYP and their behaviour based on their understanding of the impact of DT (Souers & Hall, 2016; Padak, 2019). In Padak's (2019) research, participants' development of knowledge and skills was discussed in terms of a shift in perception in the way that they viewed pupils. This "philosophical switch" (Padak, 2019; p.61) of viewing pupils through a trauma lens was described as the most important trauma-informed strategy. In doing so, participants appear to increase their empathy for CYP who have experienced trauma (Henderson, 2022).

It is hypothesised that concept creep, discussed in section 1.2 of this thesis, is affected by concept frequency. This means that as a term, such as trauma, becomes popular, it is more likely to be applied across varying contexts (Baes et al., 2023). In this way, the work of EPs may influence a rise in the use of the term 'trauma', leading to concept creep (Baes et al., 2023). However, the understanding of DT shared by the participants in this research is very much in keeping with the idea that traumatic experiences are catastrophic and affect the course of typical development in children. It is possible that this understanding was supported by the trauma-informed training, and this focused training resulted in a clearer understanding of trauma, as opposed to any concept creep that could otherwise occur.

4.6 Theme 4: The Adult is the Intervention

This theme captures participants' understanding of their role as the adult in supporting CYP who have been exposed to trauma. Two main strategies were identified at analysis: building positive connections and relationships, and using communication and language intentionally. Participants suggested that both strategies should be implemented at a universal level.

4.6.1 Sub-theme 4a: Connection and Relationships

All participants discussed the importance of building positive relationships with CYP who have experienced trauma (e.g. *"We have to connect with the pupils and*

stuff as well, that connection's really substantial." [Connie]). This aligned with participants' understanding that CYP who have experienced adversity in their early years are often connection seeking:

I think a lot of it is, not in a bad way, but it is attention seeking from the adults. So, you know, whether that's, they're doing it in sort of a good or bad way. It's just that idea that [...] they need to get some sort of, some form of, sort of like, 1:1 attention from the adult in the classrooms. [Hema]

Relational approaches were consistently described by participants as an investment of time (e.g. *"But it was just chipping away, chipping away, you know, little bits of connection over the day.* [Anisha]; *"It's [trauma-informed practice] not a magic wand"* [Jo]). Connie described that relationship building can be challenging as *"you will get a bit of resistance at first with them"*. In order to build relationships, participants described *"being there and forming those attachments"* [Connie] and helping the young person build a sense of belonging at school (*"I do want it to feel like she belongs. So like giving her tasks. I don't know if that makes her feel like she belongs to my class then."* [Sarah]). Several participants also spoke about the necessity of knowing children and understanding their experiences in order to connect with them and support them effectively (*"It's about knowing the child"* [Erin] *"Knowing the child holistically in order to connect with them"* [Connie]). Knowing each individual pupil means that teachers are more able to pick up on behavioural cues and provides the opportunity to implement trauma-informed approaches as appropriate (*"When you know your children then you are best placed to notice changes and you are best placed to know how to support them through anything and generally"* [Erin]). Previous research identified taking the time to get to know individual pupils as a core component of the successful implementation of trauma-informed approaches (Ganigan, 2021). Participants described this holistic approach as a core element of their approach to supporting all CYP which was contrasted with behavioural approaches (*"It's kind of a really holistic approach we take so it's not necessarily a behavioural approach."* [Anisha]). Similarly, relational approaches were contrasted with 'traditional' approaches to managing behaviour (*"That's the thing about their relational approach is that it's never a quick fix. You can't do it sometimes*

in 2 minutes, whereas yes, a big old shout might be the old school way.” [Erin]). This suggests that for participants, the focus of support is on understanding the young person and their difficulties, rather than focusing on their behaviour.

Participants were positive in their descriptions of the impact of relational approaches. Linked to the idea that relational approaches take time to implement successfully, Anisha commented, *“the positives come after many many months of chipping away and keeping at it.”* When exploring the power of relationships in managing behaviour, participants shared how positive relationships facilitate the use of high boundaries:

I could be quite stern with some children, quite firm with some children that used to escalate rapidly, but because I've invested time in those relationships, I can be quite sort of firm and direct with them [...] because actually they built the trust in me. [Erin]

In fact, trusting relationships were viewed as critical in managing behaviour (e.g. *“I couldn't have been Mrs. Supply Teacher walking down the road, it was nothing about authority and force and power. It was about the relationship that actually, they didn't want to upset me.” [Erin]). A caring relationship with a consistent and predictable adult is the number one protective factor for pupils who have experienced adversity or trauma (Sciaraffa et al., 2018). Overall, current research supports the importance of positive interpersonal relationships and connection between teachers and CYP who have experienced trauma (e.g. Alisic et al., 2012). This topic is consistently highlighted in research exploring teachers' experiences of implementing trauma-informed approaches following training (e.g. Padak, 2019, Stegall, 2020; Ganigan, 2021; Ellison & Walton-Fisette, 2022). As schools are considered to offer consistency and safety, they may also be appropriate spaces for CYP to develop a secure base with a key member of teaching staff, building on the concept that CYP can form valuable attachments with others, in addition to their primary caregiver (Howe, 2011).*

The existing research suggests that relational approaches are an effective teaching strategy and can help to buffer against the impact of adverse experiences and provide a learning environment for pupils in which they feel able to address

social, emotional and academic difficulties (Stegall, 2020). Similarly, recent research has linked the importance of positive relationships in the classroom to establishing effective communication and safe spaces for CYP who have been exposed to trauma (Ganigan, 2021).

Positive relationships are also deemed to be a precursor to academic success (Ganigan, 2021). Research investigating the relationships between students' perceptions of the school social environment and student outcomes (i.e. engagement at school and academic performance) suggests that supportive teacher-pupil relationships are related to both pupils' behavioural and emotional engagement, and to reading performance (Lee, 2012). Although not discussed by participants in this research, existing research has identified that some teachers perceive having similar characteristics to pupils is a facilitator of building connection (e.g. being younger or the same race; Broussard, 2021).

4.6.2 Subtheme 4b: Communication and Language

Another way in which participants saw adults as a key component of the intervention required to support CYP who have been exposed to trauma was through their use of communication and language. Linked to the sub-theme 4a above, positive relationships allow for effective communication in the classroom (Ganigan, 2021).

Participants described the positive impact of using communication in intentional ways (e.g. *"It's just you and it's just the way that you communicate so it's something that's really effective."* [Hema]; *"Being present with them and going through them and changing our questions, and it is really, it is really having that impact, so we're seeing the impact with the de-escalation of behaviour."* [Connie]).

Emotion Coaching was frequently cited as a specific approach introduced through the trauma-informed training that supported the development of practice:

We needed to move on to, is changing our language, changing how we're using that with the children and stuff. So definitely yeah. Emotion coaching has worked so much, so much. so much wonders, it has, it really has for us. Yeah, that is, definitely, we've moved forward. [Connie]

Having a model to follow was also reported to support teachers' confidence in implementing trauma-informed approaches (e.g. *"I think this is something that you can rely on. So you're not trying to find words."* [Anisha]). Erin commented that with frequent and consistent implementation, the steps of Emotion Coaching had become part of standard teaching practice:

Those four steps of emotion coaching are quite internalised to people to the fact, I think they wouldn't know they do it anymore and it's become quite, you know, emotion coaching is a phrase that's just kind of in their everyday life.

Strategies such as Emotion Coaching are reportedly lacking for teachers who do not receive trauma-informed training in addition to their initial teacher training (e.g. Abell, 2021).

Iris commented on the importance of timing. Adding language to a situation where an individual is dysregulated can be overwhelming. Iris reflected on the importance of intervening early or supporting a pupil's regulation using alternative forms of communication and then using language once they are regulated (e.g. *"It is getting in really early or giving them time to ride through the storm and then helping when they have that collapse after."*). This revealed the skill in which teaching professionals are using communication and language to support across a variety of complex and changing situations.

Throughout the interviews, participants also spoke about using language in specific ways to support children to understand and regulate their emotions as not only supportive during times of dysregulation, but also supportive in teaching CYP key skills for life. Iris shared an anecdote of a pupil applying the principles of Emotion Coaching herself, when working through a conflict with a peer, to demonstrate the learning that can take place through the modelling of language related to emotions and regulation:

I think, honestly, it has been amazing the impact it's had here, because a lot of our children they don't use those language terms at home, they don't understand their emotions, it's, "I'm mad" or "I'm sad", and that's it. Whereas giving them those, the vocabulary to explain themselves it's actually really empowering, and then they will use it with each other, it's amazing.

This was a powerful example of the way that the consistent use of appropriate language can be used to support the development of life-long social and emotional skills. Jo described the learning of key skills for emotional regulation as a “breakthrough” for some pupils. The opportunity for pupils to develop their regulatory skills as a result of trauma-informed practice has been highlighted as a benefit of the approach in existing research (Ganigan, 2021).

4.6.3 Sub-theme 4c: A Universal Approach

In line with the idea that the adult is the intervention, participants discussed how trauma-informed approaches should and can be applied on a whole-school universal level:

Yeah, we're very much in it together or not in it at all at this school because we're so small. It's not, well the infants can do this, and the juniors can do that. It's very much everyone's from early years to year 6. [Jo]

The flexibility of trauma-informed approaches, depending on the individual and the context, means that the strategies can be adopted by all practitioners who have a range of experiences and personal values:

I think the main thing is obviously it [trauma-informed practice] being flexible. I think that's a really good approach, that it's flexible, that it can be used by all and adopted by all. An approach that we can have throughout the whole school.” [Connie]

Participants also commented on the inclusivity of trauma-informed practice (“*I think it's [trauma-informed practice] quite inclusive. It supports all of the children in general.*” [Hema]; “*The way you can level the playing field is by that you use the same approach for everybody.*” [Erin]). Generally, trauma-informed approaches were described as being successful for supporting a range of people, including children, family and friends (e.g. “*I think they [trauma-informed approaches] work generally, you know, I think one of the, one of the things about it is it's, you think about relationships beyond the classroom. So it's not just with the children.*” [Anisha]; “*Yeh,*

it [Emotion Coaching] works for all children, and adults." [Iris]). In this sense, participants expressed that the approaches were suitable for everyone, not only those who were known to have experienced trauma. Trauma-informed approaches can also support CYP who have not necessarily experienced trauma but are learning to manage their emotions or deal with challenging experiences ("*Well, yeah, because the thing is, every day, even children that come from backgrounds that they feel happy with, sometimes you can just come in and not feel as happy.*" [Sarah]). The benefit of universal practice is that the approaches support CYP who teachers may not necessarily know have experiences of trauma ("*You don't have to have a special educational need to be... to have trauma, and it's making sure that we're picking up those children that do go under the radar that are missed sometimes*" [Connie]).

The emphasis on the importance of a universal trauma-informed approach in this study aligns with existing research which claims a whole-school approach is necessary for effective and impactful practice (Hinton-Pollard, 2020). As all teachers could be working with CYP who have experienced trauma, all teachers must be equipped to implement trauma-informed teaching practices at a universal level. A consistent approach in which CYP are supported by boundaries, promotes feelings of safety and predictability for all (Sciaraffa et al., 2018). This is pertinent given the fact that such strategies can avoid the re-traumatisation of CYP (Alisic et al., 2012). Thus, every staff member in a school setting should have the opportunities to learn about the impacts of DT and apply their understanding as a whole-school strategy to supporting those who have experienced trauma, with the aim of creating a consistent and predictable learning environment (Stokes & Brunzell, 2019). Providing trauma-informed training for all school staff helps to ensure that CYP are met with a consistent approach and thus all adults at the setting have the knowledge and skills to positively impact all pupils (Hinton-Pollard, 2020).

4.6.4 Overall Discussion of Theme 4: The Adult is the Intervention

Participants emphasised best practice as a universal approach to building positive relationships and using intentional communication strategies to support emotional regulation. The buffering impact of nurturing relationships following DT is well-documented within the literature (e.g. Jaffee et al., 2017). Positive experiences

during childhood have a cumulative impact of later mental health and relational outcomes (Bethell et al., 2019). This research highlights the importance and impact of emphasising theory related to the buffering effects of positive experiences during whole-school trauma-informed training. However, an awareness of trauma-theory is not sufficient in practice (Metz et al., 2015). Existing research suggests that teachers who do not receive trauma-informed training in addition to their initial teacher training, report having a lack of practical strategies to support CYP, particularly when they experience emotional dysregulation (Abell, 2021). Thus, teachers require practical training which emphasises the importance of implementing relational approaches (e.g. Jones, 2019).

The trauma-informed training received by the participants in this research demonstrates that when theoretical understanding and practical strategies, linked to relational approaches, are provided, teachers feel equipped to offer support and manage challenging situations. Though there were slight variations in participants' descriptions, they shared a similar understanding of the core pillars of trauma-informed practice that constitute working within a trauma-informed setting.

4.7 Theme 5: Home Factors

The final theme was developed as a result of participants' comments regarding the home-related factors that they believe to impact on their role in supporting CYP who have experienced trauma.

4.7.1 Sub-theme 5a: The Impact of Pupils' Home Life

One of the main topics discussed by participants was their experience of how pupils' home lives impact on their presentation at school. Participants felt that a young person's presentation at school was affected by both the trauma they experienced in their early life, and by instability or challenging environments in their current home life. Participants described how they could see a direct causation between events at home and events at school (*"If they are not feeling safe at home, we see the worst behaviours and then they are model children at home because they know that is how to keep safe."* [Iris]; *"We can see the direct correlation when things are good at home, his level of work improves, his level of attendance improves, level*

concentration improves.” [Erin]). Generally, participants felt that they had limited control over pupils’ home lives and at times, expressed their frustration that home factors limit the impact of the support they are able to provide (*“It’s a really tricky one because we have no control over his home experiences.”* [Erin]).

Participants made a clear link between a stable and supportive home environment and improved outcomes at school. They felt that consistent support across the home and school contexts is required for children to succeed, and thus supporting the family network was seen as vital (*“So it’s also supporting the family network because if that’s not supported then how will the children flourish, if they’re still going back home to that.”* [Connie]). Sarah commented on the need for stability and consistency at school, particularly for those children who have experienced, or are experiencing trauma (*“I know at home it’s, she’s unsure in home, but at least at school she has a routine. And I think if she comes in and we’ve changed things, it could really sort of set her off.”*).

As presented in the existing literature, the home environment plays a significant role in pupil success at school (Broussard, 2021). In situations where the home and school systems collaborate, teachers and parents serve as allies to support the young person. This provides an interconnected environment which is consistent in its approach and where learning can be shared. In contrast, a lack of parental involvement in understanding their child’s difficulties, makes it more difficult for a teacher to provide support both within and outside of the context of the classroom (Broussard, 2021).

Understanding the impact of pupils’ home life also means having an awareness of community influences. This is consistent with the idea in the existing research that in order to appropriately support CYP who have experienced trauma, teachers must be culturally responsive to the trauma that may be present within the community (Blitz et al., 2016). This links to an earlier finding that teachers play a role in teaching children life skills so that they are able to overcome the difficulties they face as a result of the trauma that they may continue to be emersed in, whatever the support they receive at home.

4.7.2 Sub-theme 5b: Working with Parents

Working with the parents and carers of children who have experienced trauma was discussed by most participants. This sub-theme primarily highlights participants' perceptions of the importance of working with the families of CYP who have experienced trauma.

Firstly, participants described the importance of building supportive relationships with parents and carers in order to help them feel safe and contained enough to share their experiences, and to support them to develop their practice with their children (e.g. *"It's that relationship with parents as well. So we need to keep at it and keep having that dialogue with them that this is what we're doing."* [Anisha]). Generally, participants viewed families as individual, bringing with them their own past experiences and being reluctant to share (e.g. *"It's like bringing things up from the past that they don't want to share to be honest, and they don't want to talk about."* [Connie]). Participants shared their understanding that the parents of children who have experienced trauma may have also experienced trauma themselves and expressed that this means they must be sensitive and proactive. Erin commented that they often applied trauma-informed strategies to interactions with parents (*"We're forever Emotion Coaching parents [...] because you know, different parents have different needs as well."*).

Participants shared that they are keen to get parents involved and to share their understanding of trauma and trauma-informed practice (e.g. *"What was coming up next in our action plan was targeting certain parents for coffee mornings and introducing them to the trauma-informed attachment aware idea."* [Jo]). Participants who had offered parent training sessions shared a mixed response. For some, the impact has been positive (*"It has been really amazing the impact that it [trauma-informed training] has had and our parents, the parents that attended the training, lunchtime supervisors saying "uh, it's really interesting, I would never have thought that".* [Iris]). Whereas for others, there had been limited parental attendance which acted as an early barrier in the sharing of practice.

A whole-school approach to trauma-informed practice includes the provision of professional development for teachers, and support for parents and carers (Berger & Martin, 2021). Families must be seen as key stakeholders (Chafouleas et al., 2016).

As a result of their developing knowledge and understanding of trauma, participants strived to view parents through a trauma-informed lens through their interactions. Cited as an important theme in existing research, the importance of relationships extends from pupils to parents (Padak, 2019). When implementing trauma-informed approaches at the systems level, the partnership between the community and the school is critical. By understanding the experiences of the community, teachers increase their empathy for the families of CYP who have experienced trauma (Henderson, 2022).

This sub-theme relates to Bronfenbrenner's (2005) ecological systems theory which views childhood development as occurring within a complex system of interrelating components at multiple levels of their surrounding environment. The theory emphasises the primacy of human relationships at all levels of a child's development. The interactions within the mesosystem, which is essentially a system of microsystems, must be considered in order to understand childhood development (Bronfenbrenner, 2005). The interactions between parents and teachers are captured within this tier. According to the ecological systems theory, positive teacher-parent relationships have a positive effect on a young person's development, the opposite of which is also true (Bronfenbrenner, 2005).

4.7.3 Sub-theme 5c: Lack of Parental Understanding

This sub-theme includes participants' perception that many parents and carers have a lack of understanding of DT and trauma-informed approaches (*"You need to make space for this at home as well. Which doesn't always happen. And I don't think they always quite understand it."* [Anisha]). As discussed in sub-theme 5b, participants tended to attribute this to parents' and carers' own experiences, however they did so without attributing blame (*"They're trying to be good parents. All of them. It's just some of it seems misguided."* [Jo]). Participants generally perceived that parents and carers have a lack of understanding about the types of experiences that could be traumatic for their children:

Yeh and I think some of the things that we would consider trauma, parents don't even consider. So we had a little boy that left us last year who was diagnosed with ADHD and Autism, but he had almost died from meningitis at

twelve months old... and actually, a lot of his behaviours pointed more towards attachment and trauma, rather than ADHD or ASD, but Mum hadn't even considered that it could be something else. [Iris]

This appeared to lead to a lack of acceptance of advice from teachers linked to relational approaches. The perception of Erin was that some parents want a diagnosis or a cure for their child's difficulties, rather than to be told that DT could be the cause of their child's difficulties and that relational approaches will be the best form of support (*"They still don't want to hear that the effort comes from the parent, they want a cure. They want a pill. They want a diagnosis because then that will excuse everything else."* [Erin]). Erin described their experience of a lack of parental acceptance and adoption of trauma-informed approaches (*"They do not want that to be the advice and that's the really sad part."* [Erin]). Connie described a range of parental responses to the idea of DT, and again attributed this difference to parents' own prior experiences:

So it all depends on the parents, so it could take a longer time to sit with them and drip feed it in with them. Or it could be straight away because they have got a general good understanding, good understanding of their child and understanding at school. Happy with school. Content in their attachments. They haven't had as much traumas, yeah it's very dependent on the adult and the history and the child so you just kind of have to read it how it is.

The literature on parental understanding of trauma-informed approaches and their engagement is lacking. Current research focuses on adoptive or foster carers' response to a range of trauma-informed parenting programmes (e.g. Gigengack et al., 2019; Stenason & Romano, 2022; Strolin-Goltzman et al., 2018; Sullivan et al., 2016). Linked to sub-theme 5c above, supporting the development of parental understanding of trauma-informed approaches may be facilitated by first developing positive and trusting relationships and effective means of communication.

4.7.4 Overall Discussion of Theme 5: Home Factors

The findings of this research echo that of the existing research which suggests that the home and community environments play an important role in pupil success at school (Broussard, 2021). Parental involvement with the trauma-informed approaches implemented by their child's school falls within the mesosystem of Bronfenbrenner's (2005) ecological systems theory. Parental engagement relies on interactions between parents and school staff. The ecological systems theory suggests that these relationships impact upon a child's experience of school, and thus influences their development (Bronfenbrenner, 2005).

Although not specially focussing on children who have experienced DT, in their study evaluating teachers' perceptions of parental involvement, Herman and Reinke (2017) stated that "For children with the most serious and persistent academic and behaviour problems, parent involvement in education, particularly teacher perceptions of involvement, is essential to avert their expected long-term negative outcomes." (p. 89). In their research, they also claim that teachers of pupils with significant behavioural and academic difficulties often develop negative perceptions towards both the pupils themselves and their families (Herman & Reinke, 2017). Teachers' perception of parental involvements, typically measured by the amount of contact parents have with school staff and the quality of the parent-teacher relationship as perceived by the teacher, is a predictor of pupil outcomes (Herman & Reinke, 2017). This research suggests that following trauma-informed training, teachers' awareness of trauma and its impacts extends to their perception of the families that they work with and the communities that they work within. It is important for successful relationships to be built and for teachers working with CYP who have experienced trauma to view parents through a trauma-informed lens (Padak, 2019). Teachers' perceptions are important given that teachers' beliefs about parents, regardless of their accuracy, may influence parent-teacher interactions and thus, impact upon pupil development and outcomes (Herman & Reinke, 2017).

4.8 Chapter Summary

Following on from Chapter Three which set out the methods relevant to this research, this chapter has outlined the findings of the RTA. The findings have also

been discussed in relation to existing research. The next chapter will detail how the findings address each of the research questions.

CHAPTER FIVE: CONCLUSION

5.1 Overview of Chapter

In this chapter, I will first outline how the findings of this research address the two research questions. Following this I will consider the implications of the findings to educational psychology practice. Finally I will outline the study's limitations and provide recommendations for future research.

5.2 Addressing Research Question One

The first research question in this study was: what are teachers' experiences of supporting children who have been exposed to DT? The findings of this research and of existing research suggest that supporting CYP who have experienced trauma is challenging. Throughout the interviews, participants provided descriptive accounts of their experiences of the challenges they face in their role. A major theme around managing the demands of the role was identified during analysis. In this theme, teachers described the impact of supporting CYP who have been exposed to trauma on their own well-being. They also described the challenge of supporting a young person with complex difficulties whilst meeting the other demands of their role related to the delivery of academic content. All participants shared examples of the challenging behaviour that CYP who have experienced trauma often display, which they often linked to CYP not learning emotional skills at an early age and current difficulties with emotional regulation. Overall, participants expressed that supporting the development of fundamental social and emotional skills was a priority. Support from other professionals, both in managing challenging behaviour and in supporting their well-being, was identified as a major form of support. This highlighted the importance of supporting teachers' well-being and promoting their self-efficacy in practice.

Another main factor in teachers' experiences of supporting CYP who have experienced trauma is captured by theme five which suggests that the home and community environment play an important role. Following whole-school trauma-informed training, participants became acutely aware of the impact of pupils' home experiences on their overall development and on their current presentation at school.

It is clear from this research that participants view working with the families of CYP who have experienced trauma as important. However, participants reported a disparity between their understanding and parental understanding of DT and trauma-informed approaches. Generally, a lack of parental understanding or willingness to adopt suggested approaches was seen as a barrier to successfully supporting CYP.

5.3 Addressing Research Question Two

The second research question in this study was: what are teachers' experiences of implementing trauma-informed approaches following whole-school training? Teachers' experiences of implementing trauma-informed practice in this research were relatively consistent with existing research exploring similar research questions in different participant groups and contexts.

Theme one captures the description of trauma-informed practice as a change process which results from the development of an individual's knowledge and skills following trauma-informed training. The findings suggest that this process takes time and can be a challenge for some, but that when the approaches are implemented consistently, they become embedded within everyday practice. Participants also discussed the challenges in maintaining the momentum for trauma-informed approaches. Two strategies that were identified as successful were opportunities for follow-up training and continued championing by a trauma-informed lead within the setting.

In sharing their experiences of implementing trauma-informed approaches, participants described their application of theory. Participants' understanding of the impact of DT on a young person facilitated their commitment to the proactive implementation of trauma-informed approaches. Viewing behaviour as communicative supported participants' understanding of the importance of looking at the function of challenging behaviour. For all participants, having a confident understanding of DT and the impact of trauma-informed practice was a key component of their successful implementation of the approaches, as they understood the theory underpinning the strategies and the underlying difficulties for the young person that they aim to address.

Overall, best practice when implementing a trauma-informed approach was based upon the idea that the adult must use relational approaches to help the young person feel safe and supported at school, and intentional communication to help them to understand and manage their emotions more effectively. Importantly, trauma-informed approaches should be universal. This means that the approaches can be applied by anyone, including SLT or young people themselves, to anyone, including colleagues and parents. The aim of a universal approach is that schools embody a trauma-informed culture where the well-being of teachers is prioritised.

5.4 Methodological Limitations

This research focused on the perspectives and experiences of primary school teachers. The research adopted a critical realist research philosophy and used semi-structured interviews to gather data which was then analysed using RTA. As such, the findings are content-rich and illuminate aspects of the participants' experiences which are important for the consideration of practical implications.

In line with epistemological interpretivism, this research does not aim to make objective claims about its applicability outside of the specific context in which the research took place. Instead, this research sought to understand the perspective and experiences of the participants, as mediated by the understanding of the researcher (Maxwell, 2015).

RTA was a useful and appropriate tool for examining the views of multiple research participants (Braun & Clarke, 2022). The process of RTA is reflexive, and the researcher is actively involved with coding and theme development. With theme development positioned as an active process in which the researcher purposely engages with the data in the search of commonality, themes are best conceptualised as an output. The researcher's active role in developing and reporting of themes is a strength of RTA. However this does require reflection on the part of the researcher. As part of this process, attempts have been made throughout to provide methodological clarity and transparency.

5.4.1 Data Collection

As a result of a relatively slow recruitment process, the final group of participants were less homogenous than originally desired. Just two (Anisha and Sarah) of the seven participants were full time teachers. Of the participants the remaining five also had a SENCo role. My experience of recruiting teachers is that they can very rarely take time out of the classroom during the working day to take part in an interview, whereas the more flexible role of the SENCo allowed them to schedule the interview into their week. Despite this, one participant who also had a role of SENCo chose to take part in the interview in their own time. It would be fair to suggest that the voluntary nature of participation in this research means that the individuals involved were likely to be interested and invested in trauma-informed practice, which may have biased the findings. However, this also means that participants were able to share positive experiences of what can be achieved when trauma-informed approaches are accepted and implemented.

It could be argued that the perceptions and experiences of teachers may be distinct to that of teachers with SENCo roles. At times, the teachers with SENCo roles shared perspectives of school-wide implementation of trauma-informed approaches that were unique from that in existing research. However, the high degree of conformity between all seven participants suggests that overall, the difference in role was not a significant factor in this research.

The time since each participant had received trauma-informed training did not form part of the inclusion or exclusion criteria. It could be argued that those who took part on the training a number of years ago may have a different experience to those who had received the training in the past year. Again, due to the consistency of common ideas and themes across all participants, this was not considered to have had a great impact on the interpretation of the findings.

During the recruitment process, I gave each participant the choice as to whether they would prefer to conduct their interview in-person or online. Out of a total of seven participants, five opted for remote interviews. It could be argued that my ability to build rapport with each participant, an important part of research interviewing, would be influenced by the medium in which the interview was conducted. In practice however, I found this not to be an issue. I ensured that at the

start of each interview, I made time for rapport building. This experience aligns with research that suggests that rapport can be successfully built with research participants via online video conferencing platforms (Archibald et al., 2019). The fact that the majority of participants opted to attend online interviews suggests that this was an attractive option, perhaps due to time and scheduling reasons.

5.5 Reflections as a Research Practitioner

My role as a trainee EP, working within the local authority where this research took place, provided a strong orientation of this research to a relevant topic. This affords both strengths and limitations to the design of the research and to the considerations of its findings. As a personal and professional area of interest, it is possible that my existing understanding of DT and trauma-informed approaches could have shaped my approach to the research design and the methodological and analytic processes.

Several steps were taken as part of the research process to limit the influence of my experiences on the study design, data collection and analysis. The interview schedule was carefully planned to include open-ended questions. This allowed participants to explore the interview topics in line with their personal perspectives and experiences. Following each interview, I listened back to the recording to reflect on my questioning and responses to participants answers. This helped me to develop my skills as a researcher, such as leaving additional space to ensure that participants gave full and complete responses and allowed me to ensure that I was not contributing unnecessary influence or guidance during the interview. During recruitment, I ensured that I had not worked with any of the participants, or the schools within which the participants worked, prior to the research interview. All participants had received trauma-informed training from an EP within the local authority service where this research took place. However, I was not aware before, during or after the interview of the identity of the EP(s) responsible for delivering the training, unless the participant shared this information with me voluntarily during the interview. This acted to minimise the threat towards the trustworthiness of the data.

During the data analysis stage, an inductive approach to data analysis was taken. I systematically checked themes and sub-themes against coded items across

the transcripts to ensure that there was sufficient evidence in the form of quotations. As such, direct quotations are used throughout the analysis and discussion chapter of this paper and further relevant quotations are presented in Appendix L.

Throughout the research process, a reflexive research journal was kept, a summary of which is presented earlier in this thesis in section 3.7.2. This ensured ongoing reflection on the research process and ensured that any underlying assumptions or prior experiences would not unduly impact on the research (Braun & Clarke, 2022).

5.6 Suggested Implications for Educational Practice

This research was geared towards identifying the benefits and challenges of using trauma-informed approaches within the primary school classroom and thus best practice for the delivery of trauma-informed training and ongoing support. The participants in this study were all very much in favour of trauma-informed practice and recounted mostly positive experiences of implementation and its effects. Based on the findings of this research, and the findings reported in previous research, there is a clear rationale for trauma-informed training in schools. The following section provides suggestions for how trauma-informed practice can be effectively facilitated in school settings. As a result of the critical realist approach of this research, the following points should be considered as potential suggestions for further discussion outside of the immediate context, rather than objective recommendations.

5.6.1 Suggestions for School Leadership Teams to Consider

For school leaders, I propose that the following is considered for discussion with regards to how to effectively implement and sustain trauma-informed practice with their individual settings.

- Consideration of how trauma-informed approaches align with existing practice and demonstration of this to the staff team.
- Consideration of how trauma-informed approaches differ from current practice and thus how challenges will be overcome, and support provided to teaching staff in order to make changes.
- Whole-school discussions to consider ways to implement change that is sustainable.

- Promotion of staff self-efficacy with regards to the practical implementation of trauma-informed approaches through regular professional development opportunities to equip them with the skills they require.
- Learning and reflection that take place as an ongoing cycle to ensure that staff are supported to implement trauma-informed approaches in the most effective way.
- Staff well-being considered a priority as part of a whole-school approach to trauma-informed practice.
- Recognition of the emotional impact of working with CYP who have experienced trauma and providing debriefing opportunities with colleagues as part of typical working practices.
- Providing consistent support from external professionals where appropriate to support staff well-being.
- Adopting a whole-school approach to relational practice, where connection building is prioritised as part of the curriculum, with the knowledge that relationships facilitate CYP engagement with the academic curriculum.
- Systems to promote effective communication across the school so that teachers can easily request support from others, within a school culture where this is accepted.
- Development and review of trauma-informed policy which accurately reflects expectations for practice.
- Fostering positive home-school relationships and providing families with clear means of communication to support their engagement.
- Working in partnership with agencies within the community to support family hardship.

5.6.2 Suggestions for Educational Psychologists to Consider

Participants' responses in this research also hold implications for EPs in determining how trauma-informed training can be impactful. I suggest that EPs can provide systemic support to assist with establishing and monitoring the school development initiatives outlined in section 5.6.1 which includes but is not limited to:

- Carry out audits of existing trauma-informed practice in schools to highlight areas of strength and areas for development. Such work can be used to guide further training and professional development opportunities for staff.
- Emphasise the necessity for staff well-being to be a priority and suggest practical ways that this can be supported e.g. regular debriefing sessions which was identified by the participants in this research as a helpful strategy.
- Facilitate effective communication and positive relationships between school staff and families by involving families in individual casework and using joint home-school consultation as part of usual practice (Dowling & Osborne, 1994).

As part of their wider work within schools, EPs can, where appropriate, deliver a parent-teacher model of consultation as part of standard practice to support the home-school relationship and provide a clear pathway for parental involvement where all parties feel empowered. In addition, the findings from this research suggest that trauma-informed training should:

- Be delivered to every staff member in a school setting so that they have opportunities to learn about the impacts of DT and apply their understanding of whole-school strategies to supporting those who have experienced trauma, aimed at creating a consistent and predictable learning environment.
- Providing training materials that outline relevant theory related to developmental trauma and then link this to practical strategies that can be implemented in schools.
- Make the link between behaviour and underlying emotions explicit to support staffs' curiosity and understanding of what a young person may be experiencing when they display heightened emotions or challenging behaviour.
- Emphasise the importance of connection building between CYP and adults as this is known to be a protective factor for those who have experienced trauma (Sciaraffa et al., 2018).

- Support staffs' understanding of how the family and community context can be impacted by trauma and address parental involvement, with the aim of altering existing attitudes and behaviours that might negatively impact the home-school relationship (Herman & Reinke, 2017).
- Be practical so as to provide teachers with the opportunity to practice trauma-informed approaches prior to implementing them in the classroom to enhance their confidence and skills.

5.7 Recommendations for Future Research

The focus of this research was to understand primary school teachers' experiences of supporting CYP who have been exposed to trauma, and in doing so was able to capture elements of sustained and successful trauma-informed practice. As mentioned previously, there is a lack of current research published in the UK. Therefore, to build a picture of teachers' experiences of implementing trauma-informed approaches across different educational settings there needs to be further research carried out. Further research could investigate whether there are differences in experiences according to factors such as type of setting or key-stage. The final theme in this research linked to home factors. I suggest that in addition to further exploration of teachers' experiences it would be valuable to investigate familial understanding and experiences of trauma-informed work. There could also be further research focusing more specially on the role of the EP in facilitating effective and sustained implementation of trauma-informed practice.

5.8 Closing Comments

This research has explored teachers' experiences of supporting children who have been exposed to trauma and of implementing trauma-informed approaches following whole-school training. The salient themes identified during analysis pertain to the development of practice at an individual and whole-school level, teachers' perceived ability to manage the demands of their role, teachers' understanding of trauma-related theory, the practical application of trauma-informed approaches where the adult is considered to be the key to effective intervention, and the influence of home factors on teachers' perceived ability to support CYP who have experienced trauma

and their families. This thesis provides an original contribution to the field not only because it investigates the experiences of primary school teachers in England, a participant group yet to be included in research, related to experiences of implementing trauma-informed practice, but also that it provides a unique qualitative account of the positive impact that trauma-informed approaches can have within the primary school context. The participants in this research described their accounts of how they were able to harness their knowledge of developmental trauma and skilfully implement trauma-informed approaches with ongoing support and development opportunities. Through their accounts, participants described the impact of trauma-informed practice on their everyday teaching practice and thus on the children and families they work with. This research demonstrates the success of trauma-informed work in primary schools when trauma-informed initiatives are driven by educational psychology services. The necessity of trauma-informed training for all school staff is clear. It is hoped this this research provides an insight into the experiences of primary school teachers when implementing recommended approaches, to inform those who deliver the training and provide them with direction towards the most effective support.

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APPENDIX A

Information Sheet

Participant Information

Teachers' experiences of supporting pupils exposed to trauma and of implementing trauma-informed approaches.

Who am I, and what is my role in school?

- My name is Charlotte May, and I am a trainee educational psychologist. Whilst on placement, I am working in Birmingham Educational Psychology Service. I am completing my doctoral training at the University of Birmingham.

Why am I contacting you?

- As part of my training, I am undertaking a research project. The project is exploring teachers' attitudes towards trauma-informed practice. I will be interviewing teachers in schools who have received TIASS (Trauma Informed Attachment Aware Schools) Training.

What is the research about?

- The aim of the research is to explore teachers' attitudes towards developmental trauma and trauma-informed practices.
- I am also interested in exploring teachers' experiences of implementing trauma-informed practice in the classroom.
- It is hoped that the findings from the project will help us to understand how we can better understand teachers' attitudes and experiences, leading to better support and training in this area.

What will taking part involve?

- Participation is voluntary and you will be asked to sign a consent form if you agree to take part.
- Your participation will involve an individual interview lasting between 40 minutes to an hour. This will take place during typical working hours. The interview can take place in-person or virtually via MS Teams or Zoom.
- The purpose of the discussion will be to discuss your thoughts and experiences around the topics of developmental trauma and trauma-informed practice.
- If you change your mind about taking part you can let me know before the interview, during or up to 2 weeks after the meeting.

What will happen to the data collected during the research?

- Your interview will either be audio-recorded (if held face to face) or video recorded (if held via a video conferencing platform). I will be the only person who hears the recording when I transcribe the discussions.
- In line with university policy, data will be preserved and accessible for 10 years after completing the project. After this time, all electronic data will be erased.

What will happen to the findings?

- I will not use your name, school or the local authority's details when I write up the findings from the interviews.
- The findings will also be written in a report which will be shared with the school and other Educational Psychologists that work in the local authority. I will also share what I have found with you in a summary report, if you wish.
- The findings from the research will be written and published as a doctoral thesis.
- The findings may also be used in future publications, conferences, or dissemination events.

If I agree to take part, can I change my mind?

Yes, you have the opportunity to withdraw:

- Your data before or during the interview
- Your data up to two weeks after the interview
- Specific information from the data at any time up until two weeks after the interview


How do I take part?

If you would like to take part in the research, please contact me directly via the details below.

Contact details:

Charlotte May

Trainee Educational Psychologist



Dr James Birchwood

Academic Tutor



APPENDIX B

Interview Schedule

Opening comments:

- Welcome and introductions
- Share purpose of the research
- Key points from consent, right to withdraw and confidentiality highlighted
- Provide opportunity for participants to ask questions

Discussion topics/ questions/ probes

Topic	Questions	Possible follow up questions	Probes
Professional Role	Can you tell me about your current role?	<p>What age group do you teach?</p> <p>What subject do you teach?</p> <p>How long have you been teaching?</p> <p>When did you receive TIAAS training?</p>	Is there anything else important about your job role that I have missed?
Conceptualisation	<p>Please can you rank the following statements in order of how well they describe your understanding of developmental trauma? There is no right or wrong answer.</p> <p><i>See ranking activity.</i></p>	<p>Can you tell me any more about your understanding of developmental trauma?</p> <p>What impact do you think it has on an individual's development?</p> <p>In your experience, how does developmental trauma manifest itself in the school environment?</p>	Can you give an example?

<p>Attitudes</p>	<p>How well do you think developmental trauma explains the development and behaviour of children?</p> <p>Do you think there are any other ways to better explain the development and behaviour of children?</p> <p>Do you think trauma-informed approaches support the children generally?</p> <p>Do you think trauma-informed approaches support specific children?</p> <p>Do you think there are any better approaches for supporting children generally, or for supporting specific children?</p>	<p>What are these?</p> <p>If yes,</p> <p>Who are these children?</p> <p>What are these?</p>	<p>Why do you think this?</p>
<p>Behaviour</p>	<p>What trauma-informed approaches do you use in your classroom?</p> <p>How do think these approaches affect the children in your classroom?</p> <p>How often do you use trauma-informed approaches?</p> <p>What are the main influences on the approaches you use in the classroom?</p>	<p>If yes,</p> <p>Why do you use these approaches?</p> <p>Positively?</p> <p>Negatively?</p> <p>Would you like to use them more or less?</p> <p>Personal?</p> <p>Professional?</p>	<p>Anything else?</p>

Experiences	<p>What are your experiences of implementing trauma-informed approaches?</p> <p>Can you think of an example of when these approaches worked?</p> <p>Can you think of an example of when these approaches didn't work?</p>	<p>Positive?</p> <p>Negative?</p> <p>Why do you think that was?</p> <p>Why do you think that was?</p>	<p>What was the outcome?</p> <p>How do you feel about that?</p>
Other	<p>Do you have any further comments that you would like to share about developmental trauma, trauma-informed approaches, or your experiences?</p>		

Closing comments

- Thank participants for their time and participation
- Gain consent to be contacted again to meet and share preliminary analysis of findings
- Remind participants of their rights to withdraw, provide contact details
- Remind participants they will receive feedback in the form of a summary report
- Provide opportunity for participants to ask questions.

APPENDIX C

Ranking Activity

Example questions:

- Please can you rank the following statements in order of how well they describe your understanding of developmental trauma? There is not right or wrong answer.
- Which of these statements do you think best describes your understanding of developmental trauma? Why?
- Which of these statements do you think least described your understanding of developmental trauma? Why?
- Are there any statements that you don't agree with?

<p>The way students relate to others is based on their early experiences of relationships.</p>
<p>Students' learning difficulties are a result of difficult events in their early life.</p>
<p>Students' behavioural difficulties are a result of difficult events in their early life.</p>
<p>Students are doing the best they can with the skills they have.</p>
<p>Without the opportunity to co-regulate their emotions during their early life, students have difficulty with self-regulation.</p>
<p>Students' behaviour can be inconsistent. This shows that they are doing the best they can at any time.</p>
<p>Students have had to learn how to get their needs met in ways which may been seen as difficult or challenging.</p>

APPENDIX D
Consent Form

**Teachers' experiences of supporting pupils exposed to trauma and of
implementing trauma-informed approaches.**

Please read each statement below and circle your answer. If you have any questions, please ask.

I would like to take part in the research project exploring Teachers' attitudes towards trauma-informed practice.	Yes	No
---	-----	----

I have read and understood the information sheet detailing what my participation will involve.	Yes	No
--	-----	----

I agree to the interview being recorded and understand that only the researcher will listen to/watch this.	Yes	No
--	-----	----

I understand that the interview will be transcribed and analysed by Charlotte May, and that this means that verbatim quotes may be included in the write up of findings. I understand that I will not be personally identifiable from any of these quotes.	Yes	No
--	-----	----

I understand that my information will be kept securely in line with university policy for 10 years after the completion of the project.	Yes	No
---	-----	----

I understand that I can leave the interview at any point if I would like to.	Yes	No
--	-----	----

I have had the opportunity to ask questions and I am happy that my questions have been answered.	Yes	No
--	-----	----

I understand that I can withdraw my information for up to two weeks after the interview, and if I do this my information will be removed from the study.	Yes	No
--	-----	----

I understand that the findings may be used anonymously in future publications, conferences, or dissemination events.	Yes	No
--	-----	----

I would like to be contacted with further information about the results of this study. This would include a summary of findings, and a copy of Charlotte May's thesis. I understand that this will involve the retention of my contact information (e.g. email address).	Yes	No
--	-----	----

Signed

Date

Name

If you have any questions, please contact:

Charlotte May

Trainee Educational Psychologist

████████████████████

If you have any concerns or any further questions, please contact:

Dr James Birchwood

Academic Tutor

████████████████████

APPENDIX E

Example of Coding in NVivo

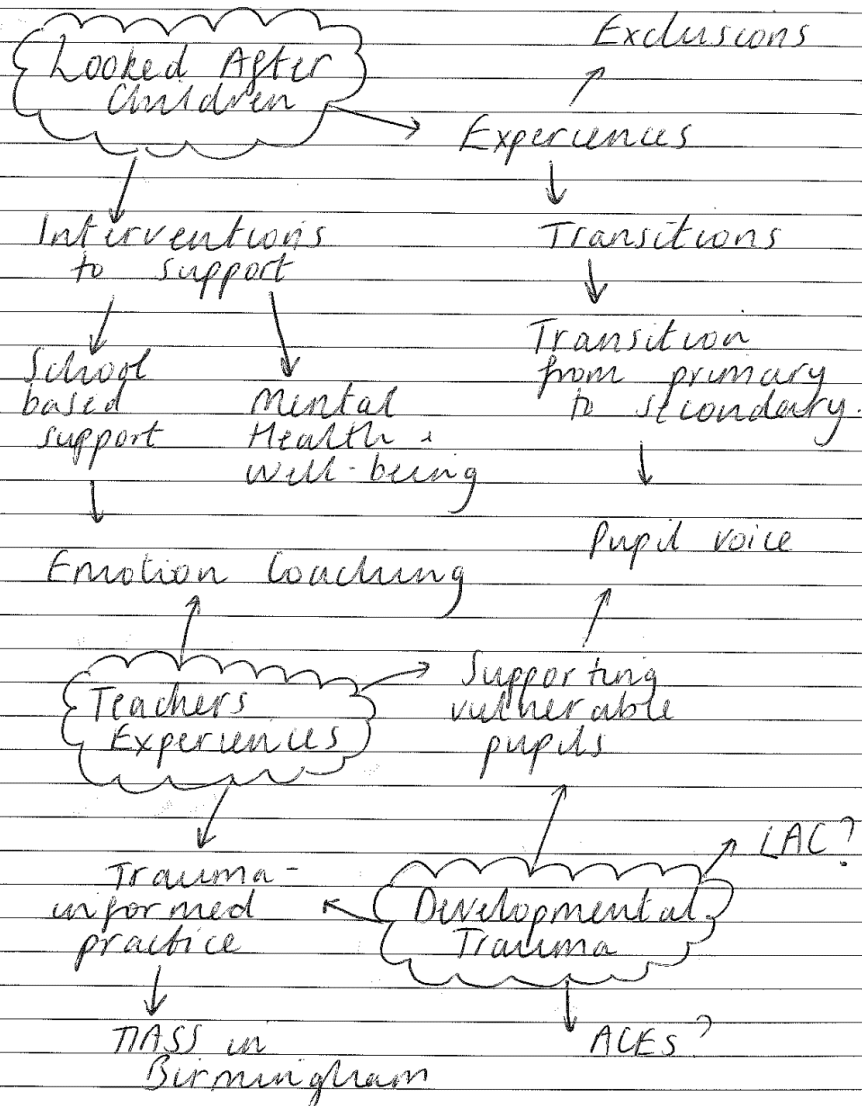
- ✓ ● Developing practice
 - Approaches take practice
 - Change occurs over time
 - Change of practice
 - Changing approach
 - Easy to implement
 - Evolution of practice
 - Evolved as a practitioner
 - Evolved as a school
 - Evolving practice
- ✓ ● Further application of approaches
 - Positive classroom culture
 - Safe spaces
 - Implementation is a journey
- ✓ ● Increased competence with practice
 - Becomes second nature
 - Easier with practice
 - Improving practice over time
- ✓ ● Initial training
 - ✓ ● Continuing CPD
 - Keeping approaches current
 - Keeping the conversation going
 - Lack of opportunities to rehearse skills
 - Lack of opportunity to learn from others
 - Reviewing training materials
 - Value of refresher training
 - ✓ ● Theory is important
 - Research base

- Science behind approaches
- Seeing theory in practice
- Theory based practice
- Understanding of theory helps with e...
- ✓ ● Training lead within the setting
 - Approaches modelled by training lead
 - Importance of training lead
 - Role of training lead
- Observed practice
- Reflecting on practice
- Shift from traditional ways of teaching
- Slow pace of implementation
- Speed of behaviour change
- Staff dealing with change
- Steep learning curve
- Teachers applying approaches
- Teachers learning over time

APPENDIX F

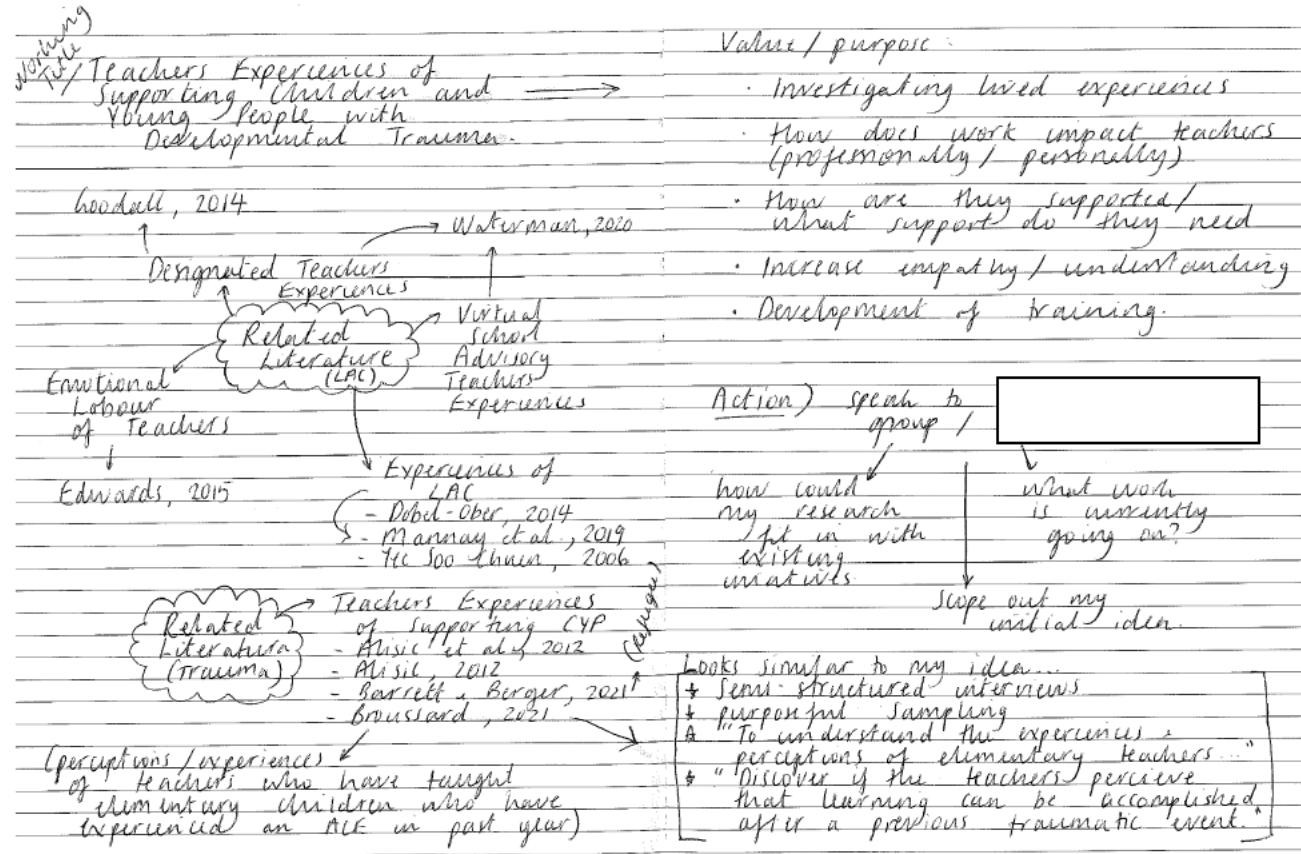
First Excerpt from Research Journal

Volume 1 : Initial Ideas.



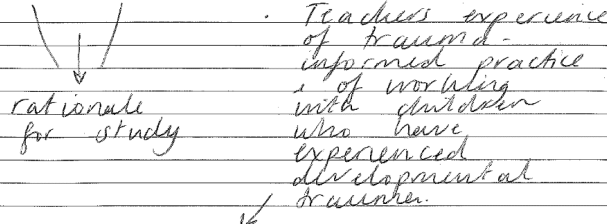
APPENDIX G

Second Excerpt from Research Journal



APPENDIX H

Third Excerpt from Research Journal

Supervision 19/07/22	Supervision 19/07/22
Structure - Planning	
CHAPTER 1 - Intro	CHAPTER 2 - Lit Review
- 'Setting the scene'	
- Define terms:	
- trauma	rationale for study
- developmental trauma	Teachers experience of trauma-informed practice of working with children who have experienced developmental trauma.
- trauma informed practice	How much existing literature is there on this topic?
- Facts: figures of CYP in UK who have experienced trauma	Run a systematic search on my topic (terms + related terms)
- Implications of experiencing trauma (i.e. how it holds on development)	- papers have done x = discuss
- AVEs	- but haven't done x =
	- important because
	→ If not much could look at research on other adults (e.g. social workers) or diff pupil criteria (e.g. SEMH)
	① social workers / parents experiences of supporting children who have experienced trauma.
	② teachers experiences of supporting vulnerable groups of CYP or CYP with SEMH difficulties.

APPENDIX I

Fourth Excerpt from Research Journal

<u>Notes / Thoughts During Transcription:</u>	<u>Limitations:</u>
<p>Interview 3</p> <ul style="list-style-type: none"> * Thinks about neurodiverse children <ul style="list-style-type: none"> → how does TIP fit in with all other areas/initiatives in school settings * Why did I talk so much/ keep interrupting <ul style="list-style-type: none"> → positive that I began transcribing before final 3 interviews as I would actively try to interrupt less * Why are these tips all very positive? What are features of these interviews because of success → can I identify these factors? <ul style="list-style-type: none"> eg weekly logs to keep missions co-ordinating fresh in staffs minds * Used theory and extended practical implementation beyond what was shared at the training to fit with what works in their setting <ul style="list-style-type: none"> eg framemakers 	<p><u>Limitations:</u></p> <ul style="list-style-type: none"> - Was able to build more rapport during in-person interviews - How/when for table did online participants feel sharing thoughts and experiences? <hr/> <p><u>Reflection</u></p> <p><u>Notes Thoughts During Transcription</u></p> <p>Interview 4:</p> <ul style="list-style-type: none"> * Distinct concept of children who have experienced trauma as distinct group <ul style="list-style-type: none"> ↓ * Are children who have experienced trauma a "SEN group" → do they have a "SEN need" as perceived by participants? <ul style="list-style-type: none"> ↓ ? Do I need to transcribe all umms - doesn't alter meaning?

APPENDIX J

Fifth Excerpt from Research Journal

Methodology

Research Workshop 19/01/23.

* Why TA not IPA

- see paper from [redacted]
- what is my purpose?
- Individual interviews to gather rich data in meaningful way
- ↓
- Focus groups - strengths in divisional narrative regarding own context.

Discussion

- Patterns in meaning consistent across the group considering some shared and some not.
- Still gap for research into hidden views / experiences?

* Note key decisions and justifications

↓ Intro

- Professional
- Local
- and
- naturally

* cross reference from 19 section

across with chapters in 19 section

see ethics before # 38

* consider for when describing participants

APPENDIX K

Additional Quotations for Sub-themes

Additional Quotations for Sub-theme 1a: Acceptance of Change

Participant	Quotation
Anisha	<i>I don't know whether it took me longer to kind of deal with it. Or, you know, if you're a parent, maybe, you know, that doesn't work at home.</i>
Erin	<i>Yeah, I think a bit of it is nagging.</i>
Erin	<i>In our school, it's going to be very short lived if somebody's not taking that approach for children who dysregulate regularly.</i>
Connie	<i>Teachers are adopting it, and so are [...] teaching assistants, but there's still a bit of a journey as we're going through. So yeah, we'll get there.</i>
Connie	<i>But then there's other teachers, and teaching assistants and dinner supervisors as well, I feel like is the way that we need to push a bit more with them.</i>
Connie	<i>Yes, because some teachers that have been teaching for a long time have specific ways that they like to teach, [...] we use it as a universal approach regardless of how long you've been teaching or how much experience you've had.</i>
Connie	<i>And making sure that all teachers that are on board, regardless of how long they've been teaching and what strategies they've been using, that they're open and they're, they're open and willing to accept the theory and the change that we want to make.</i>
Connie	<i>I would say about 90% of our teaching staff are really confident, on board with it.</i>

Additional Quotations for sub-theme 1b: The Development of Knowledge and Skills

Participants	Quotation
Anisha	<i>It's evolution in the approach. And, you know, we, we get better over time.</i>
Anisha	<i>It's definitely, you know, informed me as a person and how I deal with things, beyond just the classroom.</i>
Anisha	<i>That is kind of what I have had to learn over the years, and I just did not even, it probably didn't even occur to me.</i>
JO	<i>Yeah, it is about practice.</i>
Hema	<i>I think overall it really does help you develop your skills.</i>
Hema	<i>After I really thought about it and changed the practice, it just, it just became natural.</i>
Erin	<i>He did struggle with behaviour [...] what I've learned more and more about now was that was just a safety factor.</i>

Additional Quotations for Sub-theme 1c: Approaches Become Embedded

Participants	Quotation
Anisha	<i>It's kind of a quite a holistic approach here.</i>
Anisha	<i>We've got lots of models.</i>
Jo	<i>It's several times a day.</i>
Jo	<i>The more you embed it, the quicker it becomes to resolve problems.</i>
Jo	<i>I would say that although we're sort of behind our own action plan, and things moved very slowly for us with COVID. I'm not so sure that that's a bad thing because it was very pacey at the beginning, and I think actually having more time to embed what we're trying to do and more time for modelling,</i>

	<i>has probably helped because if we had gone through it at the pace we started at [...] I don't think it would be as effective as it is.</i>
Jo	<i>They [the different approaches] sort of go hand in hand almost.</i>
Iris	<i>And throw lots in the pot in the hope that it makes a difference.</i>
Hema	<i>It kind of married up to our behaviour policy and our, sort of PSHRE, like I said, we follow the jigsaw scheme of work, which is really emotion based anyway so it just tied in nicely with sort of, what we're doing in school.</i>
Hema	<i>You [...] just get used to kind of talking in a certain way or because you can see the impact it's having on the children.</i>
Hema	<i>I think the more you do it. [...] I feel like I use it a lot now.</i>
Hema	<i>After I really thought about it and changed the practice, it just, it just became natural.</i>
Connie	<i>There's always been that understanding of behaviour and emotions and some theory behind it. However, I feel like [the trauma-informed training] has kind of brought everything together and that it's all in one place.</i>

Additional Quotations for Sub-theme 1d: Maintaining Momentum

Participants	Quotation
Jo	<i>In this last sort of academic year, we planned it from the beginning and took chunks of the staff meeting, like 20 minutes at a time, but more often, rather than, you know, one big blast every half term. And I think that's really effective. But you know, maybe alternate weeks, you'll be spending 20</i>

	<i>minutes coming back to that. It's always fresh in everyone's mind, because you're dipping back in so often.</i>
Jo	<i>It's the expectation that you place on all the other adults around you, I think, you're expecting them to follow your lead.</i>
Iris	<i>And remembering, so what we do, cuz initially we were like, we have had this training, but we don't want it to just disappear. So we use logs, [...] where staff have to complete one log a week of where they have used emotion coaching and then we collect them. It was off one of the emotion coaching websites, but we collect them monthly and collate them and go through them, just to keep it fresh in staff's mind.</i>
Iris	<i>So I think it has had a real impact. If people know that next week, you're going to be asked, even just some very simple tasks like to give an example of a time when you've needed to calm someone down. You know, it's not involving another piece of homework, no written work, but you've got to think about it. You've got to come back to it the next week, and it's, it's a good cycle to get into.</i>

Additional Quotes for Sub-theme 2a: The Emotional Toll

Participants	Quotation
Anisha	<i>You know, if you've got a class that's got those needs, actually, you have to, like you said, you have to look after yourself as well.</i>
Anisha	<i>I think it can be really difficult and I found it hard.</i>
Anisha	<i>A human as a practitioner, you're also you also have your own personal, you know, stuff that's going on, you have your</i>

	<i>own ACEs, or you have your own need for emotion coaching. And actually, I always find, you know, certain times that I'm a bit more irritable, I'm a bit... my tolerance is less, and you feel it as a person.</i>
Anisha	<i>I think another thing is to know, when you're done, you know, when you're emotionally done.</i>
Anisha	<i>when you've swapped over or something's happened with you, and you've had something physical [...] you've still got to come in and teach. So actually, you've got to step away and whoever... might need to take a second because you know, you're carrying all that back in with you.</i>
Anisha	<i>I think it's, it's you just have to keep saying it's, but today was a better day. You know, yesterday was awful. Today's a little bit better. And it's kind of like you've got to talk about those margins, haven't you in those little pockets of success. And as much as it feels like you're walking on eggshells, sometimes they do lessen sometimes.</i>
Anisha	<i>We're just done when we get home.</i>
Anisha	<i>It's hard, though, I think when you're when you're going home, and you're it's been a really tough day.</i>
Anisha	<i>You know, what do we do with all this angst that we are absorbing? And then, but then you kind of think, well, actually, you then go to the senior leadership team, and they're absorbing. So it's all kind of that chain of that knock on effect, isn't it?</i>
Iris	<i>A lot of the strategies that are suggested work incredibly well as long as the adult is able to regulate their emotions.</i>
Iris	<i>So it is just like, ok, regulate yourself first, take yourself for a walk.</i>

Iris	<i>So sometimes, I know at home, I will go and lock myself in the bathroom and just *deep breathing*, because there is no way I will be able to regulate the children if I am not calm myself.</i>
Iris	<i>You've got no chance of calming a child if you are not calm yourself.</i>
Sarah	<i>Yeah, because sometimes we teach the children that, but I always say to myself, I don't implement it on myself, like, I can also feel that way and have those, erm, it was good personally, I think for me to hear someone say, it is ok if you're feeling that way.</i>
Connie	<i>Making sure it doesn't have an impact on your own family life at home. So but yeah, it is difficult to manage, but I have got better.</i>
Connie	<i>Every day is different, difficult and stuff, and I think even when I was just teaching, I wasn't even SENCo or pastoral or anything like that, still every day you're exposed to it.</i>
Connie	<i>Myself and pastoral and all the SLT, I feel like we've got it for teachers, but I feel like we need something more for the senior leadership team and like myself because who do we then talk to, like so who do we then offload to, who do we then share, you know, we've been probably dealing with some heavy safeguarding concerns and heavy traumas that we've been exposed to so it's having it consistently going up that there's always some support.</i>

Additional Quotations for Sub-theme 2b: Competing Priorities in the School Context

Participants	Quotation
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Anisha	<i>The learning is secondary, you know, for a lot of them, it's these skills and managing that behaviour first.</i>
Anisha	<i>So with me, it's very much, you know, that behavioural side of things and the pastoral side first.</i>
Anisha	<i>If there are those difficulties, which a lot of our children have, and continue to have, then they're not going to learn, they're not ready to learn.</i>
Anisha	<i>If someone isn't regulated, or they're not connecting with you, something's happened before school, or there's triggers all throughout the day for some of the children, they're just not going to learn anything.</i>
Anisha	<i>Sometimes they don't have the skills at all, or the skills are so basic, and so rudimentary.</i>
Anisha	<i>You're teaching them those skills and you're filling those gaps with that nurture.</i>
Jo	<i>How important is for us to help them develop their skills.</i>
Iris	<i>That's a life skill that will go with her forever, the fact that she was able to regulate herself and then help coregulate another pupil.</i>
Sarah	<i>Because you can't produce work or even learn [...] if you're not in a, your emotions aren't right.</i>
Sarah	<i>I'd rather her not do the work and her be happy than try to finish work off and then she's just really upset about something.</i>
Erin	<i>Fulfilling that academic potential [...] it was a real dilemma.</i>
Erin	<i>He wanted somebody that he could, you know determine what was going to happen all the time, you know, but school isn't like that at the end of the day, and we have that</i>

	<i>obligation for learning, you know, and it can't be play all the time.</i>
Erin	<i>The ultimate goal is that child is regulated.</i>
Erin	<i>I think he's got social and emotional needs are completely impairing his ability to show you his academic potential at this moment in time.</i>

Additional Quotations for Sub-theme 2c: Teachers' Limited Practical Capacity

Participants	Quotation
Jo	<i>There are loads of instances where that sort of thing has happened, or you are part way through sorting something out and someone comes to fetch you, or there's first aid or there will always be something.</i>
Jo	<i>It is the biggest challenge in the mainstream. The feedback that we have had from meetings, is that's key, you know, a problem happens, it's always lunchtime, or when they are lining up to come in, or just before home time. Those are the key times of the day, and something happens, we have got to get everyone outside to go home, we've got to get down the stairs, you can't stop and discuss it now, you're on your own with the children. How can you do it?</i>
Sarah	<i>But I think the challenge I find is during the day finding that time so.</i>

Additional Quotations for Sub-theme 2d: Support from Others

Participants	Quotation
Anisha	<i>Yeah, you can talk to your team.</i>

	<i>I think we know that we've got that network around us. [...] So I think, you know, I certainly feel supported.</i>
Anisha	<i>It's always that network. You can always go to someone.</i>
Anisha	<i>It's almost like an emotion coaching session for us. So you know, where [EP] has come in, and we've had time after school without any, you know, senior leadership team, it's just, you know, the members of staff in the class, have sat with [EP]. And we've just, this is what's happening, this is how we feel, this is what we don't think that's working.</i>
Anisha	<i>It helps to kind of, you know, "okay, I'm going to take over now, you go and have a break, or you go and do something else". So that's definitely worked as well.</i>
Jo	<i>We have got a school therapist who's in three days a week who is really on board with the [trauma-informed practice] as well. [...] And she will follow it through with that consistent approach, not take them away and do something else, which is invaluable.</i>
Hema	<i>So we've had a few children that we actually have therapeutic mentoring for.</i>
Erin	<i>There's times so and so's not responding to me and then somebody else comes along. And I think that's the beauty of change of adult you know.</i>
Erin	<i>It's about the debrief afterwards and going, "well, you know", and then you almost find that you're all emotion coaching the staff.</i>
Erin	<i>We are a team and sometimes there'll be a time when it calls for, so and so to come and speak to somebody, or there'll be time to send in me. You know, and we very much do that</i>

	<i>sometimes we very strategically decide who's going to deal with something.</i>
Connie	<i>Yeah, so they'll always get support from SLT. There's also pastoral where we do lots of, they can have drop-in sessions with pastoral, or they can have mindfulness sessions with pastoral.</i>

Additional Quotations for Sub-theme 3a: The Impact of Early Experiences

Participants	Quotation
Anisha	<i>So the difficulties I think, are just as a result of that behaviour, and early experiences.</i>
Anisha	<i>So that all kind of feeds into, it's the starting point isn't it for a lot of these children.</i>
Jo	<i>That in utero experience of domestic violence... huge sensory issues.</i>
Jo	<i>There are children that haven't had difficult events in their early life, who are SEN. But some students' problems are exasperated by problems in their early life, and some of them are because of events in early life.</i>
Iris	<i>My daughter can tell you events from 10 months old, and you would never think that she would remember, but they do.</i>
Iris	<i>But it is not done for the child is it, it changes the way their brains are developing and, yeh, it's never finished unfortunately.</i>
Iris	<i>Digging right down, so starting right at, what was your pregnancy like? Were there any issues?</i>
Hema	<i>I can definitely see that... the correlation.</i>

Sarah	<i>However they behave, whatever they're struggling with, it can make it difficult for them, I guess, sort of, in the in the school and just generally in their experiences.</i>
Sarah	<i>Children that have that have behaviour that you can see how you know when we do the transition from reception, how that has affected them now, if there was anything that happened in nursery or reception or even earlier, how it still affects the children now, if it's not dealt with correctly.</i>
Erin	<i>It's that way of how a child felt really shapes how, how they relate to the rest of the world</i>
Erin	<i>So the understanding that the brains impaired by, you know the trauma and experience that certain connections aren't made, that you know that children's overdeveloped sense of fight and flight, you know, and those primitive responses. It just made a lot of sense.</i>
Erin	<i>The ability to retain and to the ability to organise. Can be a really big impact of developmental trauma and attachment, and it's overlooked.</i>
Erin	<i>We can reshape them. We can redirect them. We can patch over. We can bridge them, you know, and that all comes with a lot of nurture, with a lot of play with a lot of time.</i>
Erin	<i>Certainly the attachment is about the early, the early experiences in life.</i>
Connie	<i>Knowing the science behind it, really and the theory behind it and knowing why this is happening with the brain development and the traumas that they may have had... attachment issues.</i>

Additional Quotations for Sub-theme 3b: The Function of Behaviour

Participants	Quotation
Anisha	<i>The behaviour is inconsistent, and their needs haven't been met, but they're finding ways to meet their needs, and actually, the behaviour, which is, you know, sometimes it does spiral out of control, in a way that's them... 'Can you meet my needs?'</i>
Anisha	<i>So if they've, if they've crawled under the table, or if they're, you know, shouting and screaming, which, again, I do have, that's just, it's, you know... 'My needs aren't met, I'm really, I'm really struggling'.</i>
Anisha	<i>It's kind of really unpicking that behaviour all the time.</i>
Anisha	<i>And the difficult or challenging behaviour is a way of them meeting their needs. So definitely questioning what's it, what are they saying to you? What's what are they asking you for?</i>
Anisha	<i>It's how they're getting the attention.</i>
Jo	<i>As a school we wouldn't say 'behavioural difficulties' we would say 'means of communication'.</i>
Jo	<i>All behaviour is trying to tell you something.</i>
Jo	<i>The more you embed it, [...] the more the children are able to articulate what they're thinking. And they don't think they're being naughty. They know that trying to tell you something, and they're getting closer and closer to being able to tell you what it is.</i>
Hema	<i>It was almost sort of that was that child's way of getting attention I think more than, you know, getting the focus back on back on himself.</i>
Hema	<i>So with a lot of them it's very much, it's expressive, it comes across in sort of how they're behaving. So if they want certain things, they'll behave in a certain way.</i>

Sarah	<i>I do feel that children learn by copying.</i>
Erin	<i>What are they communicating, not how are they behaving, so you know, children that would shout out, or you know, actually there was just a need for them to feel seen, acknowledged, heard you know, that equally the children that were very, very quiet, you know they equally needed to be seen and heard, but they just weren't gonna do it very loud and vocally.</i>
Erin	<i>So I'm on the floor being defiant because actually, that's just me in control and if I'm in control I feel safe.</i>
Erin	<i>I do believe in that situation that actually what she's doing is she's saying, "I'm scared, get away from me".</i>
Erin	<i>I would say it's interpreting behaviour. Behaviour is communication. When you know your children, you know what they're trying to tell you by their behaviour.</i>
Erin	<i>it's what you buy into and whether you believe it and I think, there are people who don't buy into it still, who I think it's very chosen. It's very fixed. It's very deliberate. Those sorts of words and I think those are the pitfalls.</i>
Connie	<i>Knowing that behaviour is a communication of, is their communication, so knowing how to unpick that and how we change our perspective and questioning.</i>
Connie	<i>Then always bringing it back to, ok so, what, what, what happened? How were they feeling? What was, what did you observe? What was the emotion first, what, let's deal with that and then kind of peeling back the layer, the layers really in seeing what's going on so.</i>

Connie	<i>All the training that we had before was very specific to a need, so it was very specific to ASD, ADHD [...] but we've never really looked at the reasons why.</i>
Connie	<i>Those that are very subtle [in their behaviour] that we have to peel back the layers a little bit more [...] but it's underlying and it's not as, not as big of an outburst as the other children, that we know of yet, so it's just, we don't know yet so it's just picking back that and seeing how far and how we understand with that at the moment.</i>
Connie	<i>So for a particular boy that we do use it for, that would self-harm, we would say, you know, before we just need to get him regulated first [...] and then we talk about it and unpick it a little bit more after when he's regulated.</i>
Connie	<i>Being able to identify those as trauma, like knowing that there's a change in their behaviour. I wonder why that is. They're not normally like that. Knowing your children and then knowing what's happened</i>

Additional Quotations for Sub-theme 4a: Connection and Relationships

Participants	Quotation
Anisha	<i>As anxiety filling as it is when someone is having one of those episodes. It's okay, what is it that they need from me? What is it that I need to do?</i>
Anisha	<i>Getting down on their level, you know, sitting with them and it's that kind of nurture.</i>
Anisha	<i>Sometimes it's best to ignore it and that time and then address it afterwards because it's sometimes you need to kind of keep connecting and engaging rather than dealing with what's being said to you.</i>

Anisha	<i>We need to connect now and correct later.</i>
Anisha	<i>It's been months of chipping away at this.</i>
Anisha	<i>It's not going to be a quick fix.</i>
Anisha	<i>I've got to keep doing it. I've got to keep it up. It's not a quick fix and the positives come after many many months of chipping away and keeping at it.</i>
Jo	<i>They ask them what they actually think is a treat or what they would like to do with Mom or Dad. And it's usually something like playing football or going to the park, play a game with me, it's not "bring me sweets", or "let me play on their phone". It's never those things.</i>
Iris	<i>Generally it's just, it is that connection isn't it.</i>
Iris	<i>It is just making that connection.</i>
Hema	<i>It's something that's not hard to do. It's not an [...] intervention that you have to run or it's not like a like resources you have to get together. It's just you, isn't it?</i>
Erin	<i>That investment is really worth it.</i>
Erin	<i>But equally in in our school, it's going to be very short lived if somebody's not taking that approach for children who dysregulate regularly. They're going to be met with that at some point. They're gonna be met with the answer of, you know, build a relationship you know, and positive attention.</i>
Erin	<i>You can't just have the quick fix.</i>
Connie	<i>Everything that we do, our practice in order to facilitate the regulation and attachments.</i>
Connie	<i>I do feel that has, like the trust with me and generally other teachers has improved as well, where they're opening a little bit more.</i>

Connie	<i>You need to have knowledge of all of this before you but are able to work with the child and connect the child.</i>
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Additional Quotations for Sub-theme 4b: Communication and Language

Participants	Quotation
Anisha	<i>I think it's the dialogue that I use. So we have these on our lanyards that we use. So we've got a bit of a script that we go through, so "I can see that", "you are feeling". So again, we've kind of tied it up made it really visual. So we've got a model that we use. And it does work. And it does help some children to regulate.</i>
Anisha	<i>I know that these tools are there, but it's a safety thing as well for you that you know, you can rely on this.</i>
Anisha	<i>So we definitely have, you know, a model and a dialogue that we use.</i>
Jo	<i>The more you use it, the easier it is to think sideways, and be able to change the way you're phrasing something.</i>
Jo	<i>And then people see that when they come in on supply, visitors to school, they notice. And we've had a string of supply teachers, but the resource base... And a lot of them have commented on oh, I love the way that you talk to the children here. And it's been noticed.</i>
Jo	<i>It gives them another perspective. And instead of them having to shout back even to someone who shouted at them, they can start to say, well my Mum wasn't calm. And they tell you about things. And that's the language that they're using. And you think, this is a breakthrough.</i>
Jo	<i>And we've got a lot of children who are older siblings who sort of take on a parenting role almost at home. When you</i>

	<i>really model to them, how you could approach a problem then, it helps... So they are in that stage of just beginning to be able to apply what's being modelled at school. I mean, it's really useful.</i>
Iris	<i>Really powerful, and it just shows the, how important it is, and you see it in other, with other children that they'll use the terminology, it's helping them understand, just their emotions. I think, honestly, it has been amazing the impact it's had here, because a lot of our children they don't use those language terms at home, they don't understand their emotions, it's, "I'm mad" or "I'm sad", and that's it. Whereas giving them those, the vocabulary to explain themselves it's actually really empowering, and then they will use it with each other, it's amazing.</i>
Iris	<i>Generally it's about helping them work through that and understand their own responses. It's giving them those skills to be able to regulate and learn where to go next.</i>
Iris	<i>It is actually, how can we help that child to move forward, learn that that was inappropriate. Er, the emotion coaching has helped massively.</i>
Iris	<i>No, there's no chance if their thinking brains gone, absolutely gone, you're just gonna add more anxiety by adding lots of language in, so it's just stopping, and sometimes it is just sitting by them and waiting and knowing when's the right time to have that conversation.</i>
Iris	<i>I'd say the emotion coaching has probably been the best training that we've had in terms of social and emotional for the children.</i>
Iris	<i>It makes you think oh this is actually really powerful cuz you're giving them a skill for life.</i>

Iris	<i>I could not believe the conversation the girls had because she was saying, “well you did this and it made me feel like this, and I’m not sure what was going on in your head, were you feeling like this?”, and she was using all of the emotion coaching, literally like she had been on the training herself, because it’s been applied so consistently with her, but then she was able to use it with another child, and actually they got to the bottom of that with no drama, and left here as friends, it was amazing, it really was, and it makes you think oh this is actually really powerful cuz you’re giving them a skill for life.</i>
Iris	<i>But I think it’s always successful when it’s done at the right time. It’s just you using that right time, and that’s down to the adults to sort, isn’t it, that’s not the child’s issue.</i>
Iris	<i>So it is just waiting until they’re ready, but I think once they are ready, it always works.</i>
Iris	<i>Yeh, and something it is just try something else first, get them to the point where they can then access that, but it will always work.</i>
Iris	<i>But it is very much about giving children the skills to have those conversations and be able to deal with conflict.</i>
Hema	<i>Emotion coaching really helped with him. So that's what we sort of did to help him kind of talk about why he's feeling a certain way. How he feels internally when he feels angry. So there's a lot of, you know, “how does it physically make you feel?” and “how can you help kind of control those emotions”.</i>
Hema	<i>We really need to kind of talk to children about, sort of, how they're feeling, just to give them those skills later on in life. So I think in terms of developing the social, emotional, mental health it is a really good practice.</i>

Hema	<i>You just get used to it, yeah, you just get used to kind of talking in a certain way or because you can see the impact it's having on the children.</i>
Erin	<i>Yeah, I think the biggest difference from all the training is the emotion coaching approach.</i>
Erin	<i>"Yes, he is being defiant" and "no, we don't tolerate defiance". "However, I don't think giving another command or direction is going to improve that situation", and I think that's where people have to be a little bit brave and understand that it takes a bit more time.</i>
Erin	<i>You know and really just heard him and he just kind of spilled out all these things that had been going on that he hadn't said earlier in the day.</i>
Erin	<i>So actually hearing somebody and using the lang.... and we use this very "I can see you're feeling a bit... I wonder why you're feeling so angry" and you know and all your... "you might tell me you're fine, but your body is telling me such and such else". You know and just trying to, to not be confrontational about "you are doing this, and you are doing that, but I can see that... I can see from you... ohh I can hear in your voice how loud you're shouting you're really unhappy about something shall we go and have a little chat about it", you know, and I think that has been the turning point in terms of not having confrontation. It's not "stop". It's not "put that down". It's not bu bu bu bu bu, it's about noticing and it's about using that emotional literacy with them.</i>
Erin	<i>It didn't need a shout. It didn't need telling off. It didn't need a reward, or actually it just needed the adults take charge and to calm it down, and to emotion coach.</i>

Erin	<i>Everything that teacher tries to do, she talks through emotion coaching and “I think you need a little bit of time to go and regulate yourself, so go and have it some time in our quiet corner”, you know she's got everything in place.</i>
Erin	<i>I think all that non-confrontational language is really is really helpful.</i>
Erin	<i>I think the emotion coaching... because then you're not confronting, therefore you're not inducing shame and therefore you can start to have those conversations.</i>
Connie	<i>The use of like emotion coaching and PACE and stuff, that really works.</i>
Connie	<i>It's just because that's where [...] we needed to move on to is changing our language, changing how we're using that with the children and stuff. So definitely yeah. Emotion coaching has worked so much, so much so much wonders, it has it really has for us. Yeah, that is definitely, we've moved forward.</i>
Connie	<i>Because we validated his feelings and understood him, then it really deescalated straight away without that huge blow up that he would normally have.</i>
Connie	<i>It's really positive because it's you're identifying the emotion first and you're, you're you know you're being able to connect with them.</i>
Connie	<i>Supporting the emotional development of children and knowing that it's ok to feel like this, this feeling looks like this, this is how your body shows this, this is why it's doing that, and giving them, you know reasons for why they may be feeling like that.</i>

Connie	<i>And even if they're calling you every name under the sun, hitting, whatever you're still there and you're being consistent with them and you're not changing your language. You you're having that consistent approach.</i>
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Additional Quotations for Sub-theme 4c: A Universal Approach.

Participants	Quotation
Anisha	<i>But I also think about colleagues as well. So if you know somebody's having a difficult day, and it's something said, or it's said in a particular way, you do think ah is something... what's going on, you know, what's happening with them?</i>
Anisha	<i>Even with, you know, colleagues now and with friends.</i>
Jo	<i>I think they work for all of our children.</i>
Iris	<i>They work well with all children, they work with my husband!</i>
Iris	<i>Generally, it has had a really positive impact and they... most children do respond really well, most adults do as well.</i>
Iris	<i>Giving the children that consistent approach, as a whole-school approach has made a massive difference.</i>
Hema	<i>You've got like a general whole-school, whole-class approach. But then you've got it more targeted towards the children who need it, that bit more.</i>
Sarah	<i>The thing is, every day, even children that come from backgrounds that they feel happy with, sometimes you can just come in and not feel as happy.</i>
Erin	<i>I don't think it hurts because even if you're not thinking about deep rooted trauma from, you know the early years. I think if a child comes in and their pet cats just died in that moment, they're experiencing trauma. [...] So I think a lot of the</i>

	<i>approaches I think are just that that they should be universal, really.</i>
Erin	<i>You almost find that you're all emotion coaching the staff.</i>
Connie	<i>It's making sure that we know them and we know the children and it's picking up that, them children that need it, that wouldn't really normally be spotlighted on unless there was disclosures or there was an incident at home that we've been referred to from agencies or something like that that we would never really know of, but I do feel like that that's gave us that aspect, so it's gave us the trauma aspect, which really that all children can suffer from, at any point in their life so.</i>
Connie	<i>It's not just being a SEND specific need, it's all children, it's all trauma and I feel like that's what's the benefit of it really, and it has had an impact to be honest.</i>
Connie	<i>It's a really good universal approach that we've got.</i>
Connie	<i>It encompasses a lot of things, and it is a really good universal approach that you haven't got to have an intervention for, that you don't have to have data.</i>
Connie	<i>Use it as a universal approach regardless of how long you've been teaching or how much experience you've had.</i>
Connie	<i>So I feel like having the universal strategies you've got the theory and the universal strategies, you adopt it to how you need to for the school.</i>
Connie	<i>It's working, all management SLT are on board, they're really adopting it.</i>
Connie	<i>It's if you're being consistent with the wording, being consistent with the support and making them feel safe, making sure that they feel happy and safe and secure then that helps as well.</i>

Connie	<i>All management SLT are on board, they're really adopting it.</i>
Connie	<i>That's what I wanted it to be, I wanted TIAAS to be, not an added intervention where children are getting pulled out of the classroom and they're doing, I don't know work on friendships or whatever attachment. It's not about that. It's about a person, an individual's journey and having those strategies that you just generally universally speak with them.</i>

Additional Quotations for Sub-theme 5a: The Impact of Pupils' Home Life

Participants	Quotation
Iris	<i>We have had children where parents have been in prison, and they have been very traumatised by that.</i>
Iris	<i>But a lot of our children, there has been trauma, erm, for different reasons. So we have had quite a lot of parental deaths erm, lots of separations, erm, we have quite a few children that are on early help, erm, so there are chaotic lifestyles there.</i>
Iris	<i>So there was one little girl, who erm, is raised by Nan on a care order, very very traumatised. Erm, Dad came out of prison, had unsupervised contact, was quite physically abusive and mentally abusive so... let her watch things that she shouldn't have done, didn't really feed, she just didn't feel safe at all. So she was in absolute crisis and was just... she literally ruled the roost here! She was physically aggressive every day. She made fantastic progress. Dad went back into prison. Dad came back out, in the summer, she started, again, to wobble.</i>
Iris	<i>Everything is extreme reactions, but yeh it was, that day it was just she hadn't had breakfast, and she, she was really</i>

	<i>cross that she hadn't had a chance to have it, and didn't trust that she would be fed.</i>
Sarah	<i>She's adopted, so she's in my class and I know from last year that she would really struggle if anything at home changed. So I wouldn't always know but if something happened at home, you know, you'd see either should be either really excited or really angry, sort on an extreme emotion.</i>
Erin	<i>So clearly [...] that need for control, for whatever's gone on at home, whatever those experiences are, that that was still more important to his needs and wants than anything.</i>
Erin	<i>If you've, you know, witnessed your parents falling out and arguing to... you know you're gonna be distracted all the time.</i>
Erin	<i>I had a child that was in adoptive care, and other children that, you know, Dads were in prison and all that sort of thing.</i>
Erin	<i>I think if a child comes in and their pet cats just died in that moment, they're experiencing trauma.</i>

Additional Quotations for Sub-theme 5b: Working with Parents

Participants	Quotation
Anisha	<i>There's been workshops for parents.</i>
Anisha	<i>There's definitely been room for parents to be involved as well.</i>
Jo	<i>Being a resource base means that you have to work more closely with the families. And I've seen now, how important that is, and I don't think I appreciated that when I was a mainstream class teacher.</i>

Iris	<i>We also did training with our lunchtime supervisors and also parents to try and share those basics. There were only about 6 or 7 parents that turned up.</i>
Iris	<i>They don't share and you are reliant on the child saying something or other families.</i>
Iris	<i>I think it is a hard topic, because parents don't want to share.</i>
Iris	<i>They want to move forward, don't they, and pretend almost like it didn't happen.</i>
Iris	<i>Used it so much with the parents.</i>
Erin	<i>It's really sensitive. And where do we send them [parents] for help?</i>
Connie	<i>It's concrete, it's facts and it has supported me as well with my... with more difficult conversations with parents.</i>
Connie	<i>So when I am talking about the reasons why possibly he could be acting like this. Having that information and having all of that, you know, theory and research is really good to talk to parents with as well, because it gives them, "oh yeah, I didn't think of it like that".</i>
Connie	<i>It is very difficult to get that relationship intact with parents, but also to have an approach where... and an environment that they feel safe enough to be able to talk and communicate, which we are moving towards, and I feel like we are, we're having a bit more of a positive reception with it.</i>
Connie	<i>It depends on the parent, depends on the child, depends on their attachments and their upbringing. So if they've got obviously, some parents that I've spoke to, have got that wall with school because they've been through an experience at school that they're... is very negative. They were always in trouble. They were never understood. They was let down by</i>

	<i>system so you have to kind of get rid of past those stigmas and break down those barriers and then form attachments with the parents. So it all depends on the parents.</i>
Connie	<i>It's having that open, honest communication and environment that we really are striving to achieve with parents, teachers, pupils, staff.</i>
Connie	<i>It's also giving them the support that they... you know and giving them a safe environment where they can offload, where they can talk and get support if needed.</i>
Connie	<i>If you haven't got that with the parents and it's not a joint up approach, because they'll be feeding their children something completely different at home and then we're saying something different here, and it doesn't marry up and then they're in a state of conflict really and we don't want that, so it's making sure that we're all on the journey together and that we all have the same yeah, reasons and what we're doing and stuff.</i>
Connie	<i>If they're [parents] resistant to even talking about traumas, past events, or anything like that that's quite difficult to manage. And if they've got their own traumas of school, then they do bring that along. That's quite difficult.</i>

Additional Quotations for Sub-theme 5c: Lack of Parental Understanding

Participants	Quotation
Jo	<i>You can see, once you meet parents sometimes like, ah, and then you wonder what the parents' early childhood experiences were like, and so how are they going to parent, any better? You don't want to call anyone a bad parent but... There were more effective things that they could be doing, if only they knew about them.</i>

Jo	<i>So you see all age ranges, all levels of maturity, all different styles of parenting.</i>
Iris	<i>'Yeh, actually, I had an emergency c-section' and you start to see these patterns and it's crazy because parents don't think, because they just, 'well that's done'.</i>
Iris	<i>A lot of them [parents], especially like the dismissing, you do it quite naturally. Like, we have all been there and we dismiss and "oh you'll be fine, you'll be absolutely fine".</i>
Iris	<i>Yeah and I don't think they realise that damage that that can do actually, because you're just not meeting that need at all.</i>
Erin	<i>Well, you know there are a number of children whose parents come to us and they say, "so and so behaves like this I think they're autistic" and I've talked to them about, you know, well, "tell me about tell me about the early years. Tell me about life... born full term blah blah blah any..." you know, talk to them about trauma as an interruption rather than you know a whack to the head or any you know bad experiences and hey go "oh well, ohh his dad left when he was five months old".</i>
Erin	<i>We can redirect them. We can patch over. We can bridge them, you know, and that all comes with a lot of nurture, with a lot of play with a lot of time and "oh time and attention is it", "yeh", "oh I haven't got time and attention, I work. I've got three other children" Ok well, therein lies the problem, and I don't say that, but there is no authority who can back you up on that, whereas if it's "well, actually I'd rather just go for the autism diagnosis because then I am... I can push myself away of having any responsibility to this".</i>
Erin	<i>They only want your advice if it's what they want to hear.</i>
Erin	<i>Nobody wants to hear, "I'm sorry, the way to get through to your child and support them with this behaviour is to spend</i>

	<p><i>more time with them". No parent wants that. No parent wants that, they want a quick fix.</i></p>
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