

Quality of Life and Perceptions of Student Functioning Among Educators Implementing Trauma-Informed Care Within Underserved, High-Needs Elementary Schools

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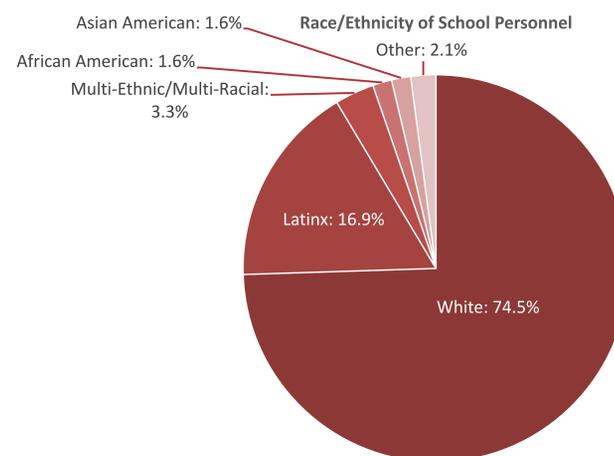
Introduction

- Research suggests that 60-70% of children experience at least one traumatic event by age 17 (e.g., Briggs-Gowan et al., 2010; Copeland et al., 2007; Langley et al., 2015), which place them at risk for negative physical and mental health as well as educational and occupational sequelae.
- In academic settings specifically, trauma exposure is linked to difficulties with emotion regulation, executive functioning, impulse control, attention, and retention of material (Alisic, 2012; Báez et al., 2019; Jaycox et al., 2009).
- Incorporating trauma-informed care (TIC) into schools has been suggested as a way to provide students impacted by trauma with an additional level of support and increase the accessibility and equitability of education (Plumb et al., 2016).
- However, as helping professionals, school staff are at heightened risk for experiencing occupational burnout as well as secondary traumatic stress (Figley, 2013), which may complicate implementation of TIC.
- To date, limited research has examined TIC in schools.
- Thus, in the present study, we explored school staff's opinions regarding changes in students' emotional and behavioral functioning after the implementation of TIC into their district in relation to their professional quality of life (i.e., compassion satisfaction and compassion fatigue).

Methods

Participants:

254 elementary school staff members (teachers, aides, administrative staff; $M = 41.54$, $SD = 11.44$ years; 87.6% female) employed in an underserved, economically disadvantaged school district in the Pacific Northwest serving a high percentage of Latinx students.



Procedure:

School staff members were invited through their district emails during January of 2020 to complete an anonymous online survey consisting of the Trauma Informed Care Survey and the Professional Quality of Life Scale (ProQOL 5).

Measures:

Trauma Informed Care Survey. The TIC Survey was developed for the present study and includes 19 questions (15 Likert-scale; 5 are open-ended). The quantitative items used for the purpose of analysis within the present study assess the degree to which educators perceived improvements in various domains (i.e., emotional awareness, emotional communication, emotion regulation, impulse control, and aggression) following the implementation of the TIC program.

Professional Quality of Life Scale (ProQOL 5; Stamm, 2009). The ProQOL 5 is a 30-item, Likert-scale self-report measure that assesses negative and positive effects of helping others. The ProQOL 5 has two scales: Compassion Satisfaction and Compassion Fatigue. Compassion Fatigue has subscales of Burnout and Secondary Traumatic Stress.

Results

- Higher levels of compassion satisfaction among school staff was significantly and positively correlated to reporting greater improvements in students' emotional and behavioral functioning, including emotional awareness, emotional communication, emotion regulation, impulse control, and aggression.
- Compassion fatigue was not found to be significantly associated with perceptions of improvements in students' emotional awareness, emotional communication, or emotion regulation
- However, there were significant negative correlations between compassion fatigue and perceptions of improvements in students' impulse control and aggression.

Table 1. Correlations between school personnel's compassion satisfaction, compassion fatigue, and perceived improvements in student functioning.

	Compassion Fatigue	Emotional Awareness	Emotional Communication	Emotion Regulation	Impulse Control	Aggression
Compassion Satisfaction	-.59**	.28**	.31**	.34**	.39**	.28**
Compassion Fatigue	--	-.05	-.11	-.14	-.20*	-.24**

* $p < .05$, ** $p < .001$

Discussion

Implications of Findings:

- Overall, results of our study suggest that school staff who experience a greater sense of fulfillment and satisfaction from their work as helping professionals are more likely to observe positive changes in students' functioning in response to implementation of TIC, while burnout and secondary traumatic stress may make staff less likely to notice changes or be more likely to perceive the worsening of functioning in some domains.
- Given that school staff are the ones implementing TIC, our results emphasize the importance of bolstering staff's compassion satisfaction, as well as addressing burnout and secondary traumatic stress.

Future Directions:

- Further research is necessary to understand how school staff-level variables, such as quality of life, impact their perceptions of TIC effectiveness.
- Incorporating other measures of TIC effectiveness in future research, such as academic outcomes, caregiver perceptions of child functioning, and school-level factors (e.g., rates of referrals) will also aid in enhancing our understanding of best practices for TIC programs.
- Ultimately, such research could help address the major public health threat that childhood trauma poses.