



Abstract

In returning to school in-person since the onset of the COVID-19 pandemic, supporting the social and emotional needs of students, educators, and staff has become more crucial than ever. Graduate programs in school psychology are uniquely qualified for partnerships with local school districts. These partnerships have been demonstrated to be most efficacious when both school district leaders and faculty from university training programs engage in sustained collaboration and joint public problem-solving (Sgoutas-Emch & Guerrieri, 2020; Ohmer et al., 2022; Meyers et al., 2012). This poster will describe how faculty and students within the school psychology program at Nova Southeastern University (NSU) partnered with a local school district to address the social and emotional needs of students, teachers, and staff in response to the stressors of the COVID-19 pandemic. Best practices, as well as lessons learned from facilitating this partnership will also be discussed.

Objectives

Participants will be able to:

1. List the challenges and resources needed in developing a partnership between a school psychology program and a local school district
2. Discuss strategies to assess the individual social and emotional needs of students, teachers, and staff within a local school district
3. Describe challenges and best practices in facilitating conversations between administrators, school mental-health staff, and educators regarding the need of the school
4. Describe the themes that emerged based on qualitative feedback from local school district administrators and educators regarding the prevalence of trauma-informed care practices at their school

Introduction

University and school district partnerships allow for generating and disseminating research findings to improve educational practice, engage in professional development, and provide clinical practice opportunities for graduate students (Whitcomb et al., 2021; McKeivitt et al., 2022). There are two ways that University-school partnerships tend to be initiated. One way is when a stakeholder (a university faculty member or principal) reaches out to potential partners for a project-oriented, time-limited collaboration (Walsh & Backe, 2013). The other form of university-school partnership typically seeks to address a systemic issue, initiated from an official representative of the university or the school district (Walsh & Backe, 2013). Partnerships that address systemic need have been favored during the COVID-19 pandemic, as they allow for widespread implementation of interventions and long-term outcomes (Ohmer et al., 2022; Walsh & Backe, 2013).

The COVID-19 pandemic has challenged many universities in changing the way they engage with members of the community, particularly regarding their relationship with school districts. A problem-solving, collaborative approach allows for mutual benefit for all stakeholders. This is the suggested model to address the systemic needs of school districts both during the height of the pandemic and as we resumed in person activity (Hodges et al., 2020; Ohmer et al., 2022). The trauma experienced by both students and educators during and in the return to in-person instruction following the onset of COVID-19 continues to effect the mental health, emotional stability, and academic outcomes of students. This trauma increased the need for evidence-based, trauma-informed, and social-emotional (SEL) supports in the school system (Hodges et al., 2020; Ohmer et al., 2022). NSU was approached by a neighboring school district to identify supports to address the systemic issue of mental health challenges, academic gaps, vicarious trauma, and emotional instability of students, in the wake of the COVID-19 pandemic.

Partnership Initiation

Nova Southeastern University (NSU) was approached by administrative leadership in a local school district who received funding through a CARES (Coronavirus Aid, Relief, and Economic Security) grant. Funding was provided to offer teachers the tools to understand and address trauma experienced by their students, as well as address the secondary trauma experienced by educators in response to the COVID-19 pandemic. Students and educators experienced a lack of feeling safe, elevated stress, disruption of their daily lives, and an increased risk of being exposed to illness, abuse, poverty, and the death of a loved one (Absher et al., 2021). NSU school psychology faculty created focus group questions for leaders and other stakeholders (i.e., administrators, teachers, school psychologists, school counselors, and school social workers) from 20 schools within the school district to guide the pilot program. The questions included items that explored the importance of each of the following in making a difference in their schools: providing psychoeducation about trauma, the impact of trauma on learning, behavior, emotional, and physical health, providing support for teachers when the cost of caring takes its toll, educating on the signs of compassion fatigue, and providing tools and education for engaging in self-care.

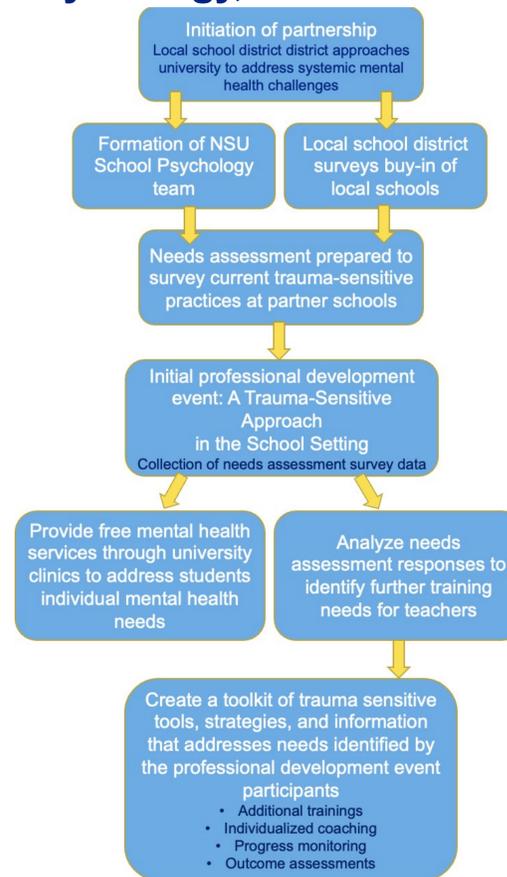


Figure 1: Flow chart of initiation and progression of NSU-BCPS partnership

Measures

A modified version of *The Trauma Sensitive Schools Checklist* (Lesley University & Massachusetts Advocates for Children, 2012) was used to understand the perspectives of educational stakeholders regarding whether trauma-informed practices were in place within their schools. The assessment is divided into categories which evaluate the extent of trauma-informed practices in such areas as foundational knowledge and skills, school-wide policies and procedures, collaboration and community links, family partnerships, as well as classroom strategies and techniques. Items were measured on a Likert scale where each participant assessed their school on a scale from 1 (element not in place at all) to 4 (element is fully in place). Open-ended follow-up questions were provided following completion of the modified version of the *Trauma Sensitive Schools Checklist* (See Figure 2).

| Foundational Knowledge and Skills | 1- Not | 2- Partially | 3- Mostly | 4- Fully |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| 1. Teachers can recognize the warning signs of trauma in children and adults. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| School-wide Policies and Practices | 1- Not | 2- Partially | 3- Mostly | 4- Fully |
| 4. General and special educators consider the role trauma may be playing in learning, behavior, and social-emotional difficulties at school. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Collaborations and Community Links | 1- Not | 2- Partially | 3- Mostly | 4- Fully |
| 6. Staff have regular opportunities to refer families for assistance from mental health providers. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Family Partnerships | 1- Not | 2- Partially | 3- Mostly | 4- Fully |
| 8. Teachers use a repertoire of skills to actively engage and to build positive relationships with families. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Classroom Strategies and Techniques | 1- Not | 2- Partially | 3- Mostly | 4- Fully |
| 11. Expectations are communicated in clear, concise, and positive ways, and goals for achievement of students affected by traumatic experiences are consistent with the rest of the class. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Figure 2: Example of modified *Trauma Sensitive Schools Checklist* Likert scale questions from each category and an open-ended follow-up question used following didactic portion of professional development pilot event

Based on your answers to the survey:
- What areas would you like to improve at your school?

Professional Development Pilot Event

Childhood Trauma vs. Acute Trauma

Overview of ACEs

Effects of Childhood Trauma and the Brain

Trauma-Sensitive Approach Introduction

How to Incorporate into the Classroom

Figure 3: Outline used for the "A Trauma-Sensitive Approach in the School Setting" presentation presented by NSU school psychology faculty and a behavior management guest speaker from a neighboring school district

To initiate this collaborative partnership, a professional development event was created to provide psychoeducation to administrators and teachers regarding adverse childhood experiences, childhood trauma, and how childhood trauma affects the brain. The topics presented in the professional development provided content knowledge regarding what trauma is, how the experience of trauma effects children, and an introduction to what trauma-sensitive practices are and how they can be incorporated into the classroom. These topics of building knowledge of trauma-informed practices and awareness of the severity of trauma that students may have experienced during COVID-19 were chosen to increase acceptability of a trauma-sensitive program to administrators and educators in the local school district (Han & Weiss, 2004). The professional development program was divided into two events: one addressing school administrators (principals and vice principals) and another addressing the teachers and district student support representatives. The latter discussion was crucial, as teacher's perception of a program can be affected by their administrator's approval and support (Walsh & Backe, 2013, Hans & Weiss, 2004). Presenting to the school administrators separate from teachers allowed for the building of support from school administrators while also allowing for teachers to express opinions without the influences of their school leaders. Both administrators and teachers were compensated for participating with a stipend through the CARES grant to attend the event, to increase participation in and engagement with the program (Walsh & Backe, 2013)

All participants were asked to complete the modified *Trauma-Sensitive Schools Checklist* in breakout groups following the didactic presentations. During both events, open-ended follow-up questions were facilitated following completion of the Trauma-Sensitive School Checklist. The checklist was completed in groups which were organized by school. NSU faculty and graduate students monitored these group to answer participant questions as needed. The responses were collected by NSU faculty facilitators and graduate student assistants following both events for future analysis.

Future Directions

- ❖ Analyze data from administrator, teacher, and district student support representative participants who completed the modified *Trauma Sensitive Schools Checklist*. The average score for each area will be calculated and utilized to guide future program implementation and services provided.
- ❖ Identify components of trauma-sensitive practices teachers and staff require further training on by identifying themes from teacher responses to the modified *Trauma Sensitive Schools Checklist* and open-ended feedback.
- ❖ Provide free university clinic mental health services to students from the 20 partner schools of the local school district to address the mental health challenges of individual students.
- ❖ Provide additional trainings based on the requested need for training by teachers, a repeated theme in the preliminary review of teacher responses from to the modified *Trauma Sensitive Schools Checklist* and open-ended feedback.
- ❖ Create a toolkit of trauma sensitive tools, strategies, and information that addresses the identified needs reported by the pilot professional development event participants. Individualized coaching for school teams based on the created trauma-sensitive practices toolkit will also be coordinated.
- ❖ Prepare progress monitoring and outcome assessments to evaluate teacher implementation of trauma-sensitive practices following attendance of trainings and use of the trauma-sensitive toolkit.