Mitigating the Impacts of Secondary Trauma in K-12 Educators

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Abstract: Given the prevalence of adversity experienced by students attending K-12 schools, educator roles have evolved to include supporting student mental health through trauma-informed practice. What remains largely unaddressed are the impacts of student trauma on the educators who support them, as well as best practices for alleviating this stress in school personnel, as part of a trauma-informed approach. With secondary trauma being an understudied construct as applied to educators, this systematic literature review provides an overview of the scholarship on the impact of secondary trauma on educators, as well as approaches to supporting educator mental health following indirect trauma exposure. Qualitative data analysis resulted in the identification of themes surrounding secondary trauma impacts, including emotional and psychological affects, burnout and compassion fatigue, educator attrition, and effects on student outcomes. Themes related to mitigation strategies included individual and organizational approaches. Although best practices for mitigating secondary trauma in educators include a combination of interventions, organizational practices were more often referenced and superseded those required of individuals alone. Thus, this review also calls for greater attention from administrators and educational policymakers to invest in further research and management of secondary trauma at an organizational level

Keywords: Secondary Trauma, Educators, School Personnel, Mental Health, Organizational Practices

Introduction

orking with diverse groups of students and supporting them through the acquisition of academic, social, and emotional skill development can be incredibly rewarding for educators such as teachers, administrators, school counsellors, and educational assistants. The rewarding work of educators is why many choose to enter a profession where they can make a positive contribution to the life of a child (See et al., 2022; Zhao, 2011). Students attending school also bring with them many challenges, including childhood trauma. Adverse Childhood Experiences (ACEs), such as abuse, neglect, or household dysfunction (Felitti et al., 1998), as well as other forms of trauma, including illness or critical injury, can significantly impact a child's physical and mental wellbeing. Nearly 62% of older Canadians have experienced at least one ACE (Joshi et al., 2021), and approximately 61% of individuals in the U.S. report at least one ACE before the age of 18 (Centre for Disease Control and Prevention, 2022). The emotional vulnerability and distress caused by trauma often accompany students to school (Fowler, 2015), and this can inadvertently impact K-12 educators resulting in the unintended consequence of secondary trauma.

Secondary Trauma and Related Constructs

Sometimes referred to as secondary traumatic stress (STS), the term "secondary trauma" was coined by Charles Figley (1995) to indicate "the natural consequent behaviors and emotions resulting from knowing about a traumatizing event experienced by a significant other—the stress resulting from helping or wanting to help a traumatized or suffering person" (p. 10). This is different from other related constructs, including compassion fatigue, vicarious trauma, and burnout, which are often confused and conflated with secondary trauma in the literature (Ormiston et al., 2022). Secondary trauma differs from burnout, which has to do with the stress and frustration caused by the workplace itself, not the exposure to someone else's trauma (Mathieu, 2012). Compassion fatigue is typically conceptualized as secondary trauma combined with burnout, and it underscores one's diminished ability to empathize with those in their care (Nimmo & Huggard, 2013). Both burnout and compassion fatigue can develop from secondary trauma (Koenig et al., 2018). Vicarious trauma emphasizes the transformation in one's belief system or worldview after exposure to someone else's trauma (Bride et al., 2007). Generally, secondary trauma and the related constructs "are used to describe the same phenomena, however, the differences are identifiable through their symptoms or through historical context" (Steen, 2019, p. 21). Although overlap exists, consistent and distinct use of these constructs will allow more research to be conducted to inform organizational policies and programs to mitigate the impacts of this stress (Ormiston et al., 2022).

Every school staff member who interacts with traumatized children and youth is vulnerable to secondary trauma (Lawson, et al., 2019). If left unaddressed, secondary trauma has the potential to significantly impair an individual's functioning (Hydon et al., 2015), including one's professional performance in the school

setting, such as the ability to maintain effective relationships with students (Simon et al., 2022). School personnel who spend a significant portion of their day with traumatized youth require a better understanding of the psychological and emotional consequences of secondary trauma on educator functioning, as well as how to effectively maintain their own well-being from indirect exposure to students' trauma (Fleckman et al., 2022).

Statement of the Research Problem

Research surrounding secondary trauma in educators is still germinal and it constitutes an understudied aspect of educator well-being (Caringi et al., 2015; Motta, 2012; Ormiston et al., 2022; Simon, et al., 2022). Although research is scarce, most studies have focused on the identification and prevalence of secondary trauma in educators, its impact on school staff, mitigating and contributing factors, and responses to secondary trauma in school personnel. The research also clearly calls for further study of these concepts, including the replication of studies to validate existing information, for an empirical base is lacking (Borntrager et al., 2012; Caringi et al., 2015; Hydon et al., 2015). While this review does not contribute empirical data, it provides a comprehensive examination of the existing literature on secondary trauma impacts and empirically-supported ways to respond to this stress in K-12 schools. Only one other similar literature review was identified, published by Ormiston et al. (2022), which examined how secondary traumatic stress and compassion fatigue have been studied with teachers. The current review supplements the work of Ormiston et al. (2022) by answering different research questions, specifically highlighting the impacts and mitigating factors of secondary trauma in educators.

In addition to their pedagogical responsibilities, educators are also called upon to attend to the mental health needs of students, and protect themselves and members of the school community from possible traumatic experiences. It is thus necessary for school personnel to understand how to prevent and deal with the impacts of secondary trauma in themselves and their colleagues (Fleckman et al., 2022; Luthar & Mendes, 2020). Along with emphasizing trauma-informed practices to address students' mental health needs, it becomes essential to address the complex nature of mental health issues resulting from traumatic experiences, and to address secondary trauma from a proactive and practical strategic perspective (Lawson et al., 2019). Thus, this inquiry aimed to investigate how schools can mitigate the impact of secondary trauma in K-12 educators who work with youth who have experienced trauma, using a systematic literature review. The following research questions were developed to further guide the exploration of the literature:

- 1. What are the impacts of secondary trauma on K-12 educators?
- 2. What practices are recommended to alleviate secondary trauma in K-12 educators?

Method

To address the research questions posed, a systematic literature review was conducted within a specified selection of sources, following a qualitative orientation through textual analysis (Efron & Ravid, 2018). Qualitative analysis was used to identify patterns and connections that emerged throughout the findings (Efron & Ravid, 2018), thereby contributing to the relevance and breadth of answering the research questions. The representative coverage of this review included both empirical and theoretical studies, integrating a diverse body of research that allowed for the formation of new conceptualizations (Efron & Ravid, 2018; Siddaway et al., 2019).

Literature Search and Selection

Quantitative and qualitative sources were sought to provide an original perspective of the main ideas surrounding secondary trauma in educators, while identifying areas that needed to be explored. Given that this study had multiple objectives, both quantitative and qualitative sources contributed to answer the research questions. Quantitative information helped to outline the measured impacts of secondary trauma in educators and the effectiveness of various interventions while qualitative information gave breadth, valuing the perspectives and experiences of those affected.

Relevant literature surrounding the notion of secondary trauma in educators was identified using a systematic keyword search in electronic databases including the University of Calgary library, Education Resources Information Centre (ERIC), OVID (APA PsychArticles, APA PsychInfo), and Google Scholar. A search of the National Child Traumatic Stress Network (NCTSN) was also conducted to obtain relevant grey literature, such as information briefs related to secondary trauma impacts and mitigation strategies. The targeted literature search used keyword terms and combinations of terms including (secondary trauma OR secondary traumatic stress OR compassion fatigue) AND (educators OR teachers OR school personnel). Filters within databases were adjusted to search for keywords within source titles and abstracts, but not the material's full text. Compassion fatigue was included as a search term, given that secondary trauma is a main component of its construct. To experience compassion fatigue, one must also be impacted by secondary trauma, and including it as a search term yielded literature that was crucial to the understanding of secondary trauma.

The preliminary literature search was conducted between January 2023 and February 2023 and resulted in a total of 700 sources which were reviewed based on inclusion and exclusion criteria. Upon applying inclusion and exclusion criteria and removing duplicates, 21 sources were deemed eligible for inclusion in the literature review. I used bibliographic branching to determine additional cited literature relevant to the present review. These works included further information on the impacts and mitigating factors of secondary trauma in educators or educators as part of a larger group of helping professionals who could feel the effects of secondary trauma. I obtained five additional sources from the examination of reference lists through the University of Calgary library electronic database, resulting in a total of 26 sources reviewed.

Inclusion and Exclusion Criteria

I developed predetermined inclusion and exclusion criteria to evaluate the validity and credibility of findings from a broad array of literature (Efron & Ravid, 2018) related to secondary trauma and educators. Specifically, scholarly articles, book chapters, and government reports were included if they referred to some combination of keywords within their title, abstract, or subjects. Upon further inspection of sources through the exploration of reference lists, I retained articles if they discussed secondary trauma in relation to educational staff or discussed the challenges associated with supporting traumatized youth in schools which could result in secondary trauma. I included studies if they were in English and the full text was accessible. While most sources were obtained from peer-reviewed literature, I also accessed published government reports and book chapters to gain further contextual understanding and improve validity.

I excluded sources that did not discuss secondary trauma or secondary traumatic stress or compassion fatigue in relation to educators or that did not mention school staff and the challenges working with traumatized youth which could result in secondary trauma. I excluded sources that did not discuss the key terms in relation to K-12 settings, such as early childhood educators or post-secondary institutions, as they were beyond the focus of this review. I also excluded discussions of key terms in relation to specific factors such as school violence, abuse, substance use, and natural disasters, as these were associated with particular causes leading to the development of secondary trauma in educators as opposed to concentrating on the development more broadly. I did not include dissertations, as the intent was to use primarily peer reviewed published sources. Lastly, I restricted sources to those published between 2011 and 2023 to acquire current information from the limited research in this area.

Data Analysis

Upon obtaining relevant literature, I extracted and summarized data from each fundamental source into a table (see Appendix). I adapted this table from Efron and Ravid's (2018) note-taking index card (ANTIC) organizational strategy. Using a qualitative approach to textual analysis, I examined and organized sources into key themes that outlined the impacts and strategies for managing secondary trauma in educators. This process involved coding information and identifying keywords, allowing for the organization of evidence as it aligned with each research question (Machi & McEvoy, 2016). Coded information was grouped into themes where I identified and compared overlapping ideas based on similarities and differences, and further sorted them into subthemes (Efron & Ravid, 2018). Themes related to impacts were categorized into two subthemes: the first encompassed impacts, such as emotional and psychological affects, burnout and compassion fatigue, educator attrition, and effects on student outcomes; and the second encompassed mitigating factors for

dealing with secondary trauma, categorized into individual and organizational interventions. Following the organization of information into patterns of evidence (Machi & McEvoy, 2016), I present the analysis and discussion of results together.

Research Findings and Discussion

Key findings pertaining to secondary trauma in educators include two major themes surrounding the impacts and mitigating factors. Impacts include psychological/emotional impacts, burnout and compassion fatigue, educator attrition and effects on student outcomes. Mitigating factors include individual and organizational interventions.

Impacts of Secondary Trauma on Educators

Educators can experience a myriad of impacts associated with secondary trauma. They can become exposed to the trauma of their students through direct reports from youth or their parents, observations of student academic and social activities, or from indirect sources like media or conversations with other colleagues (Simon et al., 2022). Consequently, educators are at risk of experiencing secondary trauma through emotional contagion that can occur unconsciously and have a significant impact on their wellbeing (Motta, 2012; Sprang & Garcia, 2022). Once affected, staff are further susceptible to re-traumatization, which is the process of re-experiencing what is traumatizing to them (Lawson et al., 2019). Moreover, when educators share the trauma information of their students with colleagues and other individuals, it may result in further secondary trauma transfer to additional parties (Lawson et al., 2019).

The impacts of secondary trauma can negatively impact personal or professional life, affecting the educator at home or in the classroom (Hydon et al., 2015). The symptoms of secondary trauma can be debilitating and affect an educator on multiple and combined levels, including physically, behaviourally, and psychologically/emotionally (i.e., biopsychosocial characteristics, which are summarized in Table 1). In addition, educators with a higher exposure to student trauma or critical incidents in schools, such as special needs educators, leadership personnel in smaller schools, or staff working predominantly with vulnerable students, are at a greater risk for developing secondary trauma and the ensuing negative consequences (Caringi et al., 2015; Christian-Brandt et al., 2020; Lawson et al., 2019; Kendrick, 2020). If not addressed, these impacts have the potential to give rise to burnout (Essary et al., 2020; Fleckman et al., 2022; Hendershott & Hendershott, 2020) and compassion fatigue (Kendrick, 2021; Koenig et al., 2018), as well as absenteeism (Sprang & Garcia, 2022) or attrition from the education profession altogether (Anama-Green, 2020; Caringi et al., 2015; Essary et al., 2020; Fleckman et al., 2022; Kendrick, 2021). Furthermore, the experience of secondary trauma may diminish the abilities of an educator to recognize and respond appropriately to student needs, in turn affecting student outcomes (Simon et al., 2022).

Table 1: Signs and Symptoms of Secondary Trauma

| Biopsychosocial | Signs and Symptoms |
|-----------------|---|
| Characteristics | |
| Physical | Physical exhaustion; insomnia or hypersomnia; headaches or migraines; body aches; upset stomach; nausea; breathing difficulties; increased susceptibility to illness; somatic complaints and hypochondria; physiological brain changes and DNA alterations. |
| Behavioural | Unhealthy expression of emotions; pushing oneself too hard; neglect of needs and emotions; on-guard behaviour; irritability; impatience; intolerance; avoidance; attrition; startle response; impulsivity; impaired decision making; surface acting; grandiosity, or "hero thinking"; blaming others; distancing or isolating; loss of interest; changes in routine; eating disturbances; sleep disturbances; nightmares; self-destructive coping, such as substance abuse, excessive gambling or shopping; accident prone; self-injurious; suicidal. |

Psychological/ Emotional

Emotional exhaustion; guilt; intrusive thoughts and imagery; re-experiencing; numbing; hypersensitivity or hyperarousal; hypervigilance; inability to tolerate strong emotions; alterations in mood and cognition; difficulty concentrating; decreased self-esteem; inadequacy; helplessness; depersonalization; changes in worldview; lack of confidence; dissatisfaction; lack of trust; frustration; detachment; withdrawn or emotionally unavailable; feelings of isolation; negative self-image; depression; anxiety; overestimating self-worth.

Note. Signs and symptoms listed are not exhaustive but provide examples of how secondary trauma can manifest in individuals. Sources: Essary et al. (2020); Fleckman et al. (2022); Hendershott and Hendershott (2020); Hydon et al. (2015); Kendrick (2020); Kerig (2019); Koenig et al. (2018); Lawson et al. (2019); Mathieu (2012); Motta (2012); and Ziaian-Ghafari and Berg (2019).

Emotional/Psychological Impacts

The emotional and psychological burdens created by the stress of secondary trauma in educators is a prevalent theme throughout the limited literature in this area. Despite physical and behavioural symptoms also resulting from secondary trauma, the majority of research reviewed referred to the impacts that manifest as psychological/emotional stress, and thus this theme warrants further discussion.

Indirect exposure to student trauma was noted by Alisic (2012) to be the most significant and demanding aspect of a teacher's job. Issues like taking student trauma problems home and feeling helpless by not knowing how to fully support youth who are suffering are both ways that secondary trauma can be experienced differently by educators, and at higher rates compared to other helping professionals (Alisic, 2012; Fleckman et al., 2022). Daily contact with students makes the avoidance of traumatized children less possible, amplifying the emotional burdens of secondary trauma in educators, which is compounded by a limited understanding and identification of secondary trauma symptomology in school staff (Fleckman et al., 2022). The lack of awareness combined with empathic concern for students, can even result in negative psychological ramifications that warrant clinical intervention (Borntrager et al., 2012; Koenig et al., 2018).

Furthermore, according to Kendrick (2020), there is a concern that educator professional codes and standards which outline the expectations and competencies of educators do not allow for the authentic expression of human emotions that staff may encounter in their work with traumatized youth (Kendrick, 2020). The unrealistic expectations of school personnel to remain positive and engaging in the crux of a system riddled with challenges, while emphasizing successful student outcomes, serve to exacerbate the impact of students' overt behaviours and may not align with how educators feel in their attempts to meet the needs of exceptional students, especially those coming from trauma backgrounds (Kendrick, 2020; Ziaian-Ghafari & Berg, 2019). The intense emotional labour required to meet the diverse needs of traumatized youth, particularly when the ability to care is depleted, leads to feelings of inadequacy and low self-efficacy in educators (Kendrick, 2020; Luthar & Mendes, 2020). In addition, the sense of distress around balancing the needs of students with that of the educator can compromise feelings of empathy (Ziaian-Ghafari & Berg, 2019), which is associated with compassion fatigue.

Burnout and Compassion Fatigue

Professional burnout results from job related stressors and work tensions over a prolonged period, contributing to a sense of diminished personal accomplishment, cynicism, and depersonalization (Lawson et al., 2019). These symptoms also overlap with those of secondary trauma, where there exists a strong association between the two constructs (Lawson et al., 2019; Ondrejková & Halamová, 2022). When combined with burnout, secondary trauma leads to the development of compassion fatigue, which impacts an individual across multiple levels, including physically, cognitively, emotionally, behaviourally, spiritually, interpersonally, and professionally (Ondrejková & Halamová, 2022). When the ability to empathize with those in one's care is affected, this experience becomes the distinguishing feature between compassion fatigue and that of secondary trauma or burnout (Mathieu, 2012).

The distress experienced when empathically engaging with traumatized youth resulted in the identification of compassion fatigue by all educators in a study conducted by Luthar and Mendes (2020),

which aimed to examine the major challenges faced by educators serving traumatized youth. Although students who are traumatized are not emotionally available to engage with assessments (Luthar & Mendes, 2020), evaluative policies and rigid adherence to assessment practices further compounds feelings of distress in school personnel, impacting their ability to show empathy toward students.

Several factors make the experience of burnout and compassion fatigue in school personnel more severe, resulting in employee attrition. These factors include working in underserved schools, feeling underacknowledged for the contributions educators make by administrators or larger society, a toxic work culture or environment, and the normalization of high workloads (Hydon et al., 2015; Kendrick, 2021).

Educator Attrition

The decision to leave the education profession due to work-related mental health problems is a consequence of unacknowledged secondary trauma, occupational burnout, and compassion fatigue (Anama-Green, 2020; Essary et al., 2020). Staff impacted by student trauma experience difficulties functioning due to high psychological stress, which is further intensified by other factors, such as increasing job demands or a lack of resources. Whether the impacts of secondary trauma are considered alone or whether they are combined with burnout from work environment stressors, the result is often low job-satisfaction, poor job-performance, absenteeism, or attrition (Fleckman et al., 2022; Kendrick, 2021; Sprang & Garcia, 2022).

In one qualitative study, Caringi et al. (2015) determined that 75% of school personnel who experienced secondary trauma in their work with traumatized youth intended to seek other employment, retire, or change school placements. This finding was echoed by Kendrick (2020): staff described their inability to remain in school settings when continuously exposed to student trauma, resulting in leaves of absences. The difficulty of retaining school personnel due to untreated mental health distress can be costly to school boards (Anama-Green, 2020; Kendrick, 2021), which is evident through the depletion of resources by replacing staff due to paid sick leaves. The challenges surrounding educator retention impacts student outcomes, which contributes to the destabilization of school and community relations (Anama-Green, 2020).

Effects on Student Outcomes

The wellbeing of an educator is directly tied to student support, for pressures that manifest as psychological distress in school personnel can negatively impact the wellbeing of students (Ziaian-Ghafari & Berg, 2019). When teachers experience secondary trauma, their own health and the support they provide to students is at risk (Alisic, 2012). Thus, "schools cannot be considered safe environments for children and youth if they are constantly disrupted by dysregulated adults" (Kendrick, 2020, p. 9).

Secondary trauma in educators can lead to ineffective teaching practices and poor classroom management, as well as low job performance, and diminished teacher-student relationship quality (Essary et al., 2020; Fleckman et al., 2022; Hendershott & Hendershott, 2020; Kendrick 2020). Staff may also experience difficulties implementing trauma-informed care approaches which aim to support vulnerable students while simultaneously improving educator wellbeing (Spang & Garcia, 2022). Furthermore, feeling ill-prepared to support students with mental health problems reduces educator self-efficacy (Hydon et al., 2015; Luthar & Mendes, 2020), resulting in negative impacts on student academic, social, and emotional outcomes.

Educators feeling ill-prepared to meet the needs of vulnerable youth is a common theme throughout the literature. Lacking the skills or understanding on how to support traumatized students, contributes to emotional and psychological distress in educators, further illustrating the bidirectional relationship between student and teacher mental health (Alisic, 2012; Essary et al., 2020; Kendrick, 2020; Kendrick, 2021; Hydon et al., 2015; Lawson et al., 2019; Luthar & Mendes, 2020; Ormiston et al., 2022; Ziaian-Ghafari & Berg, 2019). Findings indicate a direct association between educator secondary trauma symptoms and student social-emotional difficulties. Educators' social emotional competence and wellbeing influence their ability to recognize student emotions and connect these to cognitions and behaviours, impacting teacher-student relationship quality and inadvertently student functioning (Simon et al., 2022). It is therefore critical to

identify approaches and best practices that can mitigate the impact of secondary trauma in K-12 educators for the benefit of school personnel and the students they serve.

Mitigating Secondary Trauma in Educators

Approaches to mitigating secondary trauma includes interventions and practices aimed at preventing or alleviating the effects of secondary traumatic stress in educators. Awareness is the first step in supporting educator mental health, as it provides the impetus to proactively develop prevention and intervention strategies to deal with the stress culminating from indirect trauma exposure. Developing mechanisms of awareness also requires collaboration between individual educators and school organizations. However, it is apparent from the research reviewed that organizational interventions supersede those required by individual educators alone. A combination of individual and organizational practices, including methods for prevention and treatment, is outlined in Figure 1.

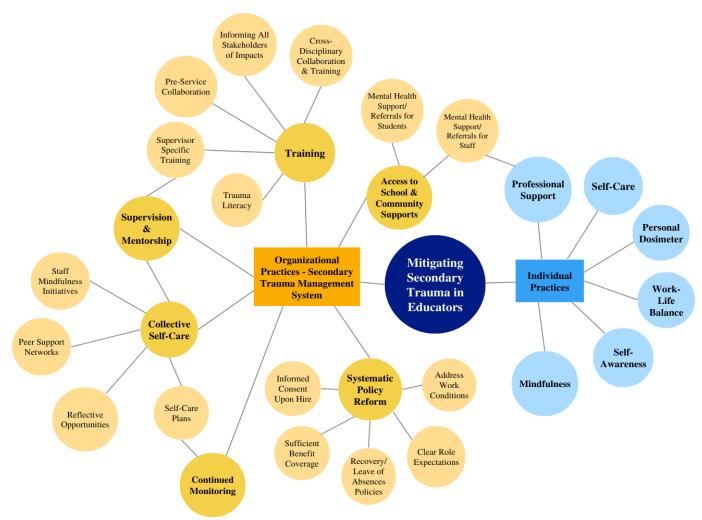


Figure 1: Mind Map of Individual and Organizational Practices for Mitigating Secondary Trauma in Educators *Note. These approaches crosscut the 26 sources reviewed.*

Individual Practices

To maintain sound professional practice, educators can implement lifestyle and work habits that are protective against the development of secondary trauma (Administration for Children and Families [ACF], 2016). Preventative strategies include tracking stressors in one's daily life or developing a personal dosimeter to register individual warning signs of secondary trauma (Kerig, 2019; Mathieu, 2012). Maintaining appropriate work-life balance that includes setting boundaries and being assertive with respect to individual limits, as well as practicing self-awareness and regularly evaluating personal experiences surrounding indirect trauma exposure, are crucial to preventing secondary trauma reactions in educators (ACF, 2016; Mathieu, 2012).

Evidence-based mindfulness practices can strengthen an individual's attention, cognitive fitness, and improve "physiological response to stress while enhancing self-regulation of behaviour and emotion" (Anama-Green, 2020, p.65). Such practices promote better regulation of internal levels of stress, thereby reducing the risk of secondary trauma and burnout in educators (Anama-Green, 2020; Mathieu, 2012). Mindfulness initiatives introduced as part of professional development or an approach to organizational wellness (Mathieu, 2012), such as collective self-care, also have the potential to improve educator mental health and thus student outcomes.

Self-care is often recommended as the go-to intervention for supporting individual mental health within education and across other helping professions. When educators attend to their own self-care, this practice translates to better outcomes for their students, as well as themselves. However, self-care is only moderately effective when addressing the impacts of secondary trauma (Mathieu, 2012). It is frequently emphasized as an individual endeavor rather than a communal one, failing to address the organizational structures contributing to stress and exhaustion in school staff (Kendrick, 2021, McMakin et al., 2022). Although self-care is an important intervention tool to mitigate the impacts of secondary trauma in educators, it should not be carried alone (Hendershott & Hendershott, 2020). Thus, researchers argue that it may be more beneficial to acknowledge self-care practices from a collective organization-wide scale prevention perspective (Kerig, 2019).

When the distress from indirect trauma exposure becomes more difficult than self-imposed interventions can alleviate, professional support or even removal from the school environment may be required (Simon et al., 2022). Although there are almost no agreed upon treatment strategies for secondary trauma in adults, educators impacted by secondary traumatic stress may benefit from professional treatment, such as medical and psychological therapy, such as what is used for post-traumatic stress disorder or PTSD (Motta, 2012). Professional support can be initiated independently or through the assistance of school mental health and community connections.

Organizational Practices

The majority of literature reviewed highlights the organization's role with respect to supporting educators with secondary trauma. Mitigating the impacts of secondary trauma involves the establishment of formal support systems within all school settings as part of a trauma-informed approach to school mental health (Borntrager et al., 2012). Secondary trauma management includes the implementation of mental health interventions and initiatives that are dual-purpose, where trauma-informed schools recognize and support not only students impacted by trauma but also the secondary stress reactions elicited in staff who interact with these students on a regular basis (Lawson et al., 2019). According to Kendrick (2021), creating a framework of intervention for the prevention and treatment of secondary trauma in educators involves multiple levels of support, including individual school, education system, individual or personal, professional expert, and community resources. Therefore, the prevention and treatment of secondary trauma in school personnel requires a change in educator interrelationships and larger organizational practices (Kerig, 2019), emphasizing educator wellbeing as a collective priority where "individuals are part of a group or organization that influences individuals' wellness, and vice versa" (Kendrick, 2021, p. 34). It is through this lens that I categorize the organizational practices for secondary trauma in educators into school mental health and community supports, proper training related to trauma and secondary trauma, appropriate supervision and mentorship, collective self-care, continued secondary trauma monitoring, and systematic policy reform.

School Mental Health and Community Supports

System-level approaches require a shared commitment between schools and community resources (Kendrick, 2021) where mental health support is available to students affected by trauma, as well as staff secondarily exposed (Lawson et al., 2019). Frontline educators are not prepared to treat traumatized youth, nor are they expected to (Lawson et al., 2019). Specialized mental health personnel, such as nurses, social workers, or psychologists, and community connections should be available to school staff to assist with supporting traumatized youth, as well as educators impacted by indirect trauma (Essary et al., 2020; Lawson et al., 2019; Luthar & Mendes, 2020; Ormiston et al., 2022).

Trauma-Informed Training

Trauma-informed care practices are necessary when supporting vulnerable youth (Alisic, 2012; Hydon et al., 2015; Kerig, 2019; McMakin et al., 2022). Teachers who lack trauma literacy may experience reduced self-efficacy in their classroom management, preventing them from meeting the needs of individual students as well as the larger group (Ziaian-Ghafari, 2019). Participation in trauma-informed care practices is positively associated with decreased secondary trauma symptom severity in school personnel (Sprang & Garcia, 2022). Training for educators on applying trauma-informed practices fosters internal growth of coping resources, allowing educators to recognize student behaviours as trauma reactions and better regulate their stress response (Luthar & Mendes, 2020; Sprang & Garcia, 2022).

Trauma-informed practice requires the recognition and acknowledgement of secondary traumatic stress and how to protect oneself from its impacts (Kerig, 2019). Training and professional development for staff on secondary trauma symptomology and ways to address this stress is an important preventative organizational intervention (Caringi et al., 2015; Essary et al., 2020; Hydon et al., 2015; Kendrick, 2021; Koenig et al., 2018). Training can be similar to that offered to other human service professionals, such as social workers, who are informed early in their careers, or during pre-service years, about the hazards associated with serving individuals who are traumatized (Koenig et al., 2018; Lawson et al., 2019). Essary et al., (2020) suggests consulting other helping professionals like school social workers to help develop secondary trauma curricula for pre-service educators as a way to build awareness of secondary traumatic stress prior to encountering it in their teaching practice. Cross-disciplinary training opportunities and shared trauma literacy from professionals versed in secondary trauma, can also help build understanding in practicing educators (Essary et al., 2020; Lawson et al., 2019). According to Lawson et al. (2020), specialized professionals who typically work together and are dependent on one another to support students impacted by trauma, like educators, social workers and psychologists, would benefit from interprofessional training and preparation together to improve practice when it comes to supporting students as well as themselves with respect to trauma.

Without proper training and awareness of secondary trauma's signs and symptoms, as well as its prevalence and the need for self-care, new and experienced educators may "suffer in silence" (Koenig et al., 2018, p. 271). Secondary trauma training also involves better preparation following a crisis, debriefing methods that teach staff to normalize and validate stress reactions in themselves and others, and learning to focus on the impact of a stressor rather than the event, which is associated with reduced secondary trauma symptom severity (Hydon et al., 2015; Kendrick, 2021; Kerig, 2019). Debriefing methods as described by Kerig (2019) in their Resilience for Trauma-Informed Professionals (R-TIP) curriculum, include explicitly teaching non-mental health professionals, like school staff, strategies on how to disclose distressing thoughts to others without further transmitting secondary trauma, while also responding compassionately to the reactions of colleagues who are impacted by the trauma of another.

Supervision & Mentorship

Appropriate organizational supervision and mentorship are necessary to help mitigate the impacts of secondary trauma in educators. According to the National Child Traumatic Stress Network (2011), administrators who supervise child-serving professionals in the U.S., which may include school leadership personnel, are obliged to assess secondary stress among those they supervise. An integral aspect of supervision includes recognizing and understanding the affective reactions of staff toward their work with

traumatized individuals, which can be accomplished through ongoing check-ins and collaborative reflection, promoting organizational accountability (Hendershott & Hendershott, 2020; National Child Traumatic Stress Network [NCTSN], 2018). This requires supervisor-specific training on how to identify and manage secondary trauma in staff (Kerig, 2019; NCTSN, 2018). Attention to the emotional content that educators may be exposed to "promotes greater awareness of the impact of indirect trauma exposure, and it can provide a structure for screening for emerging signs of secondary traumatic stress" giving administrators "an ongoing opportunity to develop policy and procedures for stress-related issues as they arise" (NCTSN, 2011, p. 3). In addition, supervision that prioritizes the development of a plan, as well as resources to support staff impacted by indirect trauma exposure, contributes to a positive school climate (Kendrick, 2021). Creating a culture where educators' experiences with secondary trauma are normalized and validated allows staff to feel valued and able to discuss and manage reactions to stress appropriately, demonstrating the commitment of the leadership team to supporting all members of the school community.

School administrators can also support educational staff through the establishment of supportive social networks in schools (Alisic, 2012; Caringi et al., 2015; Kendrick, 2021, Hydon et al., 2015, Luthar & Mendes, 2020; Motta 2012). Whether drawing upon veteran school staff to provide mentorship to newer staff on how to deal with indirect trauma exposure or utilizing professional collegial support (Luthar & Mendes, 2020) and peer-pairing (Borntrager et al., 2012) as a means to offering a safe place to discuss the challenges of working with traumatized youth, supportive peers help mitigate secondary traumatic stress reactions in educators (Motta, 2012). In their investigation of teacher experiences with secondary trauma, McMakin et al. (2022) discovered that relationships translated to the highest reported type of self-care. Colleagues and administrators who regularly checked-in with one another or supported each other's work-life balance, promoted a positive school culture that may have been protective against secondary trauma and burnout. Therefore, leadership that encourages collegial connection as a means of collective self-care fosters a unified school culture, where staff walk together through their experiences of managing student traumas, thus promoting a greater sense of belonging and self-efficacy (McMakin et al., 2022).

Collective Self-Care and Continued Monitoring

Collective self-care as an organizational practice for mitigating secondary trauma impacts also includes the creation of self-care plans to support staff in dealing with the challenges of their work (Caringi et al., 2015; Hydon et al., 2015; Kendrick, 2020; Ondrejková & Halamová, 2022). Much like professional growth plans, self-care plans highlight individual commitments and actions to navigating workplace stressors, including indirect trauma exposure, as well as individual and community resources that can be drawn upon during times of significant stress (Kendrick, 2020). Such plans also promote space for ongoing reflection related to the individual limitations of meeting the needs of exceptional students and situations (Ziaian-Ghafari & Berg, 2019). Sharing self-care plans with administrators allows leaders to demonstrate their commitment to supporting educator mental health, as well as provides the opportunity for continued monitoring of secondary trauma in educational staff (Caringi et al., 2015), which is an important aspect of reflective supervision (Ormiston et al., 2022).

Systematic Policy Change

Given that anyone who works with traumatized youth is susceptible to secondary trauma, it becomes imperative that all stakeholders in education are informed of secondary trauma and its impacts (Essary et al., 2020) and "remain vigilant, and become active agents in the development of trauma-informed school systems" (Lawson et al., 2019, p. 426). This requires collaborative attention from all stakeholders to become trauma-informed and include staff in the assessment of and response to trauma reactions (Lawson et al., 2019). Systematic policy reform that addresses the organizational factors contributing to secondary traumatic stress in educators (Caringi et al., 2015) is needed. Policy changes that attend to educator workload (Luthar & Mendes, 2020) and that outline clear role expectations of educators, including how and with whom student trauma is shared (Alisic, 2012; Luthar & Mendes, 2020), are important considerations for supporting educator mental health. Obtaining informed consent from staff hired to work in schools with high populations of traumatized youth (Essary et al., 2020) also demonstrates the recognition and commitment of the organization to be proactive in preventing secondary trauma reactions. Including secondary trauma as part of recovery and leave-of-absence policies (Essary et al., 2020), as well as providing sufficient benefit coverage for staff

impacted by indirect trauma (Kendrick, 2021), are important considerations, for they acknowledge the challenges of working with vulnerable student populations and can reduce the stigma associated with accessing support. Systematic policy reform works to create a trauma literate foundation for the prevention and treatment of secondary trauma at all levels of the education system (Caringi et al., 2015; Lawson et al., 2019; Ormiston et al., 2022).

Implications and Conclusion

The research findings outlined above on mitigating the impacts of secondary trauma in educators has implications for all K-12 school personnel. These implications extend further to students whose mental health and academic outcomes may be affected as a result of educator distress. The research synthesized affords school personnel and educational organizations with an enhanced awareness and overall understanding of how secondary trauma can manifest, as well as the actions required to prevent and manage the effects.

The psychological/emotional, behavioural, and physical burdens created by secondary trauma in educators are numerous. The ensuant consequences of burnout, compassion fatigue, absenteeism, and attrition of educators from the profession, in addition to the negative indirect impacts on student wellbeing, warrant the identification of secondary trauma as a workplace occupational hazard (Mathieu, 2012). Thus, the establishment of individual and organizational practices are necessary to manage secondary trauma in K-12 school personnel and to address the ill-effects of job-related stress and impairment resulting from student trauma.

A disproportionate amount of research related to mitigating secondary trauma in educators, concentrates on the organization's role in supporting educators' mental health. However, solely focusing on individual or personal interventions to alleviate educator distress risks perceiving secondary trauma as a consequence of personal failure (Kerig, 2019). Therefore, it is imperative that educational organizations not only prioritize self-care (Caringi et al., 2015; Hydon et al., 2015), but also establish systematic frameworks through the implementation of policies and practices that build awareness of secondary trauma in educators, and create the foundation for trauma-informed practice in schools related to both students and staff, as part of collective self-care (Lawson et al., 2019; McMackin et al., 2022). Building awareness of secondary trauma in school personnel results in staff who are more attuned to the impacts of working with traumatized youth, which has important implications related to educator retention. Normalizing stress reactions and creating better access to support results in school personnel prepared to receive help when required, thus promoting sustainability.

Drawing attention to the research findings has important implications for educational leaders and policy makers responsible for advancing the collective action agenda related to secondary trauma response. It is through broad awareness and consistent recognition of the impacts and mitigating factors of secondary trauma that leaders can promote a sense of empowerment and connection between themselves and front-line educators, fostering transparency and authenticity throughout the entire educational organization. When trauma-informed practices are put in place to support staff in addition to their students, this action has the potential to improve workplace culture, as well as reduce the stigma associated with being impacted by student trauma. Furthermore, "when schools create a culture that values care amongst staff, they promote the resilience of both their teachers and, indirectly, their students" (Luthar & Mendes, 2020, p.153).

It is apparent through the literature reviewed that gaps still exist with respect to identifying the prevalence and impacts of secondary traumatic stress in educators, including the effects educator distress has on students (Fleckman et al., 2022; Hydon et al., 2015; Simon et al., 2022). Researchers also express the need to assess common interventions used to address mental health distress in educators (Caringi et al., 2015; Sprang & Garcia, 2022), including conducting empirical studies that measure the effectiveness of these approaches in order to yield a more robust research base (Borntrager et al., 2012; Caringi et al., 2015; Kerig, 2019). In addition, there continues to be a lack of scholarship on secondary trauma in Canadian educators, with only two studies contributing to the data for this review. Both studies looked at compassion fatigue and burnout in relation to educators (Koenig et al., 2018; Kendrick, 2020, Kendrick, 2021), as opposed to secondary trauma more specifically. Therefore, more studies are needed that address the impacts of secondary trauma in educators within Canadian contexts.

Having reviewed the research, it is evident that the development of a comprehensive framework to address educator distress as a result of secondary trauma is needed. Approaches to secondary trauma management are presented throughout the literature, however, none have been synthesized to provide a clear structure from which to inform practice. Furthermore, the development of policy to direct practice is also needed to provide clear expectations for school systems surrounding the response to secondary trauma in educators.

Given the prevalence of childhood trauma, attention toward the impacts and approaches to mitigating secondary trauma in educators will continue to be of great importance. Through individual and organizational practices, educators are better prepared to handle the challenges associated when working with vulnerable populations, including the impacts of student trauma on themselves. In addition, school personnel who feel supported by their educational organization and who are trauma-literate can maintain more effective relationships with those in their care, allowing them to serve students to the highest standard.

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APPENDIX

Data Table for Organizing Source Information

| Author(s) | | | |
|---|--|--|--|
| Year of Publication | | | |
| Title or Article/Report/Chapter | | | |
| Where/How Obtained | | | |
| Research Question(s) | | | |
| Methodology (design, sample) – | | | |
| | | | |
| Key Themes/Summary and Analysis of Source – | | | |
| | | | |
| <u>Important Quotes –</u> | | | |
| | | | |

Table adapted from Efron & Ravid's (2018) article note-taking index card (ANTIC) organizational strategy.