

**Title:**

The Trauma-Informed Classroom

**Felesia Renee Bowen, PhD, DNP<sup>1</sup>**

Brandon Newell, HS<sup>2</sup>

Jubilee Zhou, HS<sup>3</sup>

Louisa Tinapay, HS<sup>3</sup>

Ghenwa Souiad, HS<sup>3</sup>

(1)School of Nursing, Rutgers, The State University of New Jersey, Newark, NJ, USA

(2)School of Nursing, Rutgers University, Newark,, NJ, USA

(3)School of Nursing, Rutgers University, Newark, NJ, USA

**Session Title:**

Education Posters Session 2

**Keywords:**

Learning environment, Nursing curriculum and Trauma informed education

**References:**

1. Blitz, L., Anderson, E., & Saastamoinen, M. (2016). Assessing Perceptions of Culture and Trauma in an Elementary School: Informing a Model for Culturally Responsive Trauma-Informed School. *Urban Review*, 48, 520-542.
2. Child Welfare Committee, National Child Traumatic Stress Network. (2008). *Child welfare trauma training toolkit: Comprehensive guide (2nd ed.)*. Los Angeles, CA & Durham, NC: National Center for Child Traumatic Stress.
3. Felitti, V. (2009). Adverse Childhood Experiences and Adult Health. *Academic Pediatrics*, 9, 131-132.

**Abstract Summary:**

Childhood trauma has life long effects. Primary and secondary education systems address and support the learning needs of these children. When traumatized students come to college they continue to require support. The curriculum in nursing may trigger distress therefore nursing schools must develop best practices to support their students.

**Learning Activity:**

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learner will be able to define trauma informed education	Poster and presenters will define trauma informed care.
The learner will be able to verbalize ways to make nursing courses safe for previously traumatized students.	Poster and presenters will provide examples of how to make nursing courses more conducive for previously traumatized students.

**Abstract Text:**

The purpose of this study is to: 1) assess the knowledge level of Rutgers University nursing faculty regarding adverse childhood experiences. 2) assess if and how Rutgers University nursing faculty make

their classrooms trauma informed to support previously traumatized students. 3) ascertain the number of nursing students who have experienced trauma and they support they require.

**Background/Significance:** Experiencing a traumatic event during childhood results in negative effects that last a lifetime [Felitti, 2009]. Children who experience traumatic events such as neglect, physical and sexual abuse, sudden loss of a parent, or surviving a life threatening event such as a severe illness, natural disaster, or war may exhibit difficulty with learning and general coping [National Child Traumatic Stress Network, 2008]. Primary and secondary schools have recognized that these children require support in order to achieve academic success [Blitz, Anderson, & Saastamoinen, 2016]. Best practices have been developed to aid schools so that trauma informed classrooms can help all students thrive. Schools have made concerted efforts to minimize the detrimental impact of traumatic experiences and provide a safe and supportive learning environment. Guidance counselors, school nurses, faculty, administration and staff are trained and well-equipped to deliver trauma informed education that supports these children. Their success in this area results in these children graduating high school and pursuing college degrees.

Nursing school curriculum requires students to take classes that have content that may result in the triggering of past trauma and causing distress to the student. Some students may be embarrassed, ashamed or intimidated to reveal their past trauma to faculty. Presently at Rutgers University School of Nursing there is no evidence of the trauma informed classrooms. Students who may experience re-triggering of past trauma may cope by not coming to class or choosing not to participate in assignments. These behaviors may result in failing grades and worse, dismissal from nursing school.

Students are required to self-disclose their trauma and disabilities for assistance however even then there is no guarantee that the classroom will be a safe place for learning. If faculty are aware of the concepts of adverse childhood experiences and trauma informed classrooms they can facilitate the success of affected students by providing a safe classroom that supports their emotional needs. Presently students who have experienced trauma are provided services once a problem occurs i.e. psychological distress, missed classes, risky behavior, or failing classes.

Presently at Rutgers University School of Nursing syllabi and courses are not trauma informed and there are no written policies that address the trauma informed classroom. Students in distress are required to seek help, there are no preventive measures in place.

**Sample/Methods:** This is an exploratory study. Rutgers University School of Nursing faculty will receive a Qualtrix survey to determine what they know about ACES and trauma informed education and if they use any principle of trauma informed education. Current Rutgers University undergraduate students will receive a Qualtrix survey to determine if their ACE score (a measure of trauma exposure), whether they have experienced childhood trauma, and if they have been triggered while attending nursing classes.

**Findings:** This study is ongoing. Results will be analyzed and presented on the poster.

**Conclusions:** We expect that this study will aid in policy development that will provide guidance for Rutgers School of Nursing faculty as they develop courses and syllabi that support all students who are survivors of childhood or adult trauma. Best practices from primary and secondary education along with the findings from this study will be used to develop trauma informed courses at Rutgers School of Nursing.