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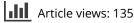
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Pre-Service Teacher Preparation in Trauma-Informed Pedagogy: A Review of State Competencies

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ABSTRACT

Trauma-informed pedagogy recognizes childhood trauma and its influence on students' behavior, health, and ability to learn. By utilizing traumainformed pedagogy, teachers can help children who have experienced trauma build resiliency. To determine if pre-service teachers are being trained in trauma-informed pedagogy, a systematic review of state-level teacher competency policies from all 50 states and Washington, D.C. was conducted. These teacher competencies were coded for the presence of elements of trauma-informed pedagogy. The review has shown that five states require teacher training in trauma-informed pedagogy and far more require training in individual elements, including social-emotional learning and cultural responsiveness.

The COVID-19 pandemic has altered the lives of many in the United States through illness, economic downfall, and even death. Existing problems of racial injustice and poverty have been exacerbated and millions have been left unemployed. Children, in addition to facing learning loss and isolation from school closures, are experiencing these traumatic events in their families and communities.

Since March 2020, 20 million children have lived in a household where someone has lost a job. Fifty-one percent of adults with at least one child in their household report losing income and 38% of these adults say they are experiencing difficulty paying for household expenses (Garfield & Chidambaram, 2020). Parent or caregiver stress over lost income, childcare, working from home, schooling, and other pandemic-driven pressures negatively impacts children. Initial research already shows that young children are experiencing high rates of distraction, clinginess, irritability, and fear (Garfield & Chidambaram, 2020). In past pandemics globally, children in quarantine have exhibited stress levels four times higher than children in normal routines and experienced increased anxiety, fear, domestic incidents, mood disorders, panic, Obsessive-Compulsive Disorder, and/or Post-Traumatic Stress Disorder (Araujo et al., 2020).

A pandemic such as the COVID-19 pandemic has the potential to become an Adverse Childhood Experience (ACE) for many children living through it. An ACE is a potentially traumatizing event or experience that occurs during childhood (Centers for Disease Control and Prevention, 2020). Pandemics have the potential to become an ACE, or exacerbate existing trauma, through "isolation, school shutdown, reduced social life and physical activity, changes to routine, sleep difficulties, exposure to disharmony at home, excessive screen use, and unhealthy diet, among others" (Araujo et al., 2020). Research shows that 67% of parents are concerned about their child's social and emotional learning during the pandemic and 33% of parents say that their child's mental or emotional health has been harmed (Garfield & Chidambaram, 2020). Additionally, children may be confined in vulnerable homes with caregivers experiencing substance abuse, domestic violence, and/or untreated and pre-existing mental health problems without external support (Araujo et al., 2020).

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2 👄 N. REDDIG AND J. VANLONE

With the appropriate care and support from trusted adults, the damage from an ACE can be reduced by creating environments of safety and security (Araujo et al., 2020). Even when children are exposed to severe violence, "when parents, caregivers, and others identify the impact of the violence exposure and provide adequate support and treatment, affected children are able to heal and recover" (Listenbee et al., 2012, p. 28). Schools and educators can play a unique role in helping children overcome these traumatic experiences by employing trauma-informed pedagogy in the classroom. According to the National Education Association, trauma-informed pedagogy, or the use of trauma-informed practices in the classroom, "demonstrates an understanding of how trauma can affect student behaviors and responses within the school context and promotes students' abilities to self-monitor and maintain positive engagement in all aspects of learning and interactions" (n.d.).During the pandemic, a number of practicing educators, research organizations, and advocacy groups have called for increased teacher training in trauma-informed pedagogy to respond to the needs of students experiencing preexisting and pandemic-driven trauma (Darling-Hammond & Hyler, 2020; Learning for Justice, 2020; Roberts, 2020; The New Teacher Project, 2020; Imad, 2020).

Pre-Service Teacher Preparation

This systematic review aims to assess how well the demand for training in trauma-informed pedagogy is being met by existing pre-service teacher preparation standards. As all teachers receive differing inservice instruction and professional development during their careers, analyzing pre-service teacher preparation provides the most comprehensive, standardized overview of the baseline training that teachers rely on throughout their professional careers. Additionally, as the teacher shortage worsens and experienced teachers either leave the classroom or retire, the number of teachers in the early stages of their careers increases. In the 2011–2012 school year, the most common teacher was in their fifth year of teaching; by just the 2015–2016 school year, the most common teacher was even earlier in their career at just their third year of teaching (Ingersoll et al., 2018). Thus, analyzing pre-service teacher preparation is even more important to understanding the practices that teachers are using in the classroom as many of them may be new to the profession and rely on pre-service training rather than their few years of in-service. This will provide a more comprehensive view of the training in trauma-informed pedagogy that early career teachers have received in their teacher preparation program.

Effects of Childhood Trauma

Trauma-informed pedagogy is rooted in an understanding of how trauma affects child development. The Substance Abuse and Mental Health Services Administration (SAMHSA) defines trauma as "an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being" (Substance Abuse and Mental Health Services Administration, 2014, p. 7). In children, trauma often amounts from one or more ACEs. The groundbreaking 1997 CDC-Kaiser study categorized ACEs as emotional, physical, or sexual abuse; emotional or physical neglect; or household challenges, including substance abuse, parental mental illness, or divorce (Centers for Disease Control and Prevention, 2020).

Currently, 61% of Americans report having experienced at least 1 ACE and 1 in 6 Americans report experiencing 6 or more ACEs. These ACEs change a child's brain development and negatively affect attention, decision-making, learning, and response to stress. ACEs are correlated with leading causes of death, including cancer, heart disease, diabetes, and suicide (Centers for Disease Control and Prevention, 2020). Psychology research has found that childhood trauma affects four main functional domains: self-regulation, physical functioning, relationships, and academics. This means that children who have experienced trauma may experience extreme moods and hyper-vigilance to threat, physical holding of stress, and diminished senses of trust and safety, among others (Tishelman et al., 2010).

Preventing ACEs has the potential to lower a child's risk of depression, reduce substance abuse, improve education and job potential, and stop ACEs from being passed down generationally (Centers for Disease Control and Prevention, 2020).

ACEs affect a child's cognitive, emotional, and social development. In the classroom, trauma exposure affects a child's attention, memory, and cognition; decreases focus and organization; hurts problem-solving and planning; and creates frustration and anxiety (Buxton, 2018; National Child Traumatic Stress Network, 2008). Children who have experienced trauma often operate in a "survival mode" of fight, flight, or freeze, limiting their ability to learn new information or regulate their emotions (Erdie & Zakszeski, 2021; Pawlo et al., 2019). These reactions can often cause students to have behavioral outbursts, disrupting the classroom, or appear to be passive or distracted; teachers may see these behaviors as defiance or disrespect, or as signs of ADHD (Oehlberg, 2008).

Students who have experienced trauma are likely to have a lower GPA, more absences, higher dropout rates, more suspensions and expulsions, and decreased reading ability when compared to those who have not experienced trauma (National Child Traumatic Stress Network, 2008). A study from 2019 found that as the number of ACEs a child reports increases, the child's risk of poor attendance, behavior issues, and failure to be at grade level in math, reading, or writing also increases (Blodgett & Lanigan, 2019). This correlation "remained significant even after accounting for gender, variability across schools, race, and overall school poverty" (Blodgett & Lanigan, 2019, p. 19). Thus, if left unaddressed, child trauma affects a child's ability to learn.

Trauma-Informed Practices

The concept of trauma-informed practices emerged from the Sanctuary Model, a model of organizational change to encourage trauma-informed approaches to medical care. The model was developed by Sandra Bloom and her colleagues in the 1980s at an inpatient psychiatric hospital for adults with childhood trauma (Bloom, 2007). Bloom worked to create organizational change by "educating staff on the effects of trauma and stress on behavior, changing the mindset of staff regarding the behavior of clients ..., and providing tools to change individual and group behavior" (Esaki et al., 2013, p. 81).

The elements of the Sanctuary Model have since been adopted by other care sectors, including education, as trauma-informed approaches to care. SAMHSA outlines "Four R's" of a trauma-informed approach: Realization about trauma, recognition of the signs of trauma, response using trauma-informed care, and resistance to re-traumatization (Substance Abuse and Mental Health Services Administration, 2014). Adopting these core areas, in education, trauma-informed practices are those that realize and recognize trauma and its impact on children, respond to children and adolescents experiencing trauma, and resist re-traumatization of children by "improving the school ethos and environment in support of trauma-exposed children" (Berger & Martin, 2021, p. 224). Thus, trauma-informed practices shift teachers' perspective from asking students "what is wrong with you?" to "what happened to you?" (Thomas et al., 2019, p. 428). When adopted in a school setting, a teacher's collective use of trauma-informed practices in the classroom is known as trauma-informed pedagogy.

Teachers can invoke trauma-informed pedagogy by creating clear routines and schedules, communicating digestible information, encouraging curiosity, appreciating student work and growth, emphasizing inclusivity, building relationships with and between students, teaching emotional intelligence, emphasizing mindfulness, and teaching how to appropriately express feelings, among others (Hallday Goldman et al., 2020; National Child Traumatic Stress Network, 2008; Pawlo et al., 2019). Additionally, teachers have used roleplay exercises to practice social and emotional skills including behavioral responses, conflict resolution, and decision making (Cramer, 2018; Pawlo et al., 2019). These practices are intended to help minimize triggers for students who have experienced trauma and teach them alternative reactions to stress and self-regulation of behavior (Brunzell et al., 2019; Erdie & Zakszeski, 2021).

4 👄 N. REDDIG AND J. VANLONE

Trauma-informed pedagogy has been shown to benefit the social, emotional, mental, and academic well-being of children who have experienced trauma. Historically, it has been utilized with students of color and students living in poverty, including those in urban and rural environments, who have been more likely to experience childhood trauma (Blitz et al., 2016). A survey of teachers using traumainformed pedagogy in schools in rural Appalachia found that teachers felt more confident and competent when dealing with classroom behavior and decreased their use of punitive behavior management strategies. Students in these classrooms showed increased resiliency and improved classroom behavior (Shamblin et al., 2016). Participants in the RAP Club, a group for Baltimore middle school students designed to help them build decision-making and emotional regulation through trauma-informed pedagogy, showed improved social, emotional, and academic outcomes, according to their teachers (Mendelsohn et al., 2015). Further, the Healthy Environments and Response to Trauma in Schools (HEARTS) program found that trauma-informed pedagogy significantly improved students' ability to learn, attendance, and focus. The school's overall number of disciplinary referrals, out of school suspensions, and reports of physical aggression also decreased after the HEARTS program was implemented (Dorado et al., 2016). In other studies, trauma-informed pedagogy has reduced student PTSD, anxiety, and depression; improved self-esteem; and increased academic engagement and achievement (Berger, 2019; Stopa et al., 2011).

While trauma-informed pedagogy has shown great success working with students who have experienced ACEs, additional research has shown that many students do still require additional interventions and mental health support. Naik (2019) advocates for universal trauma screening for students and full-time school-based mental health counselors for deeply traumatized students. Additional research suggests that trauma-informed pedagogy should be employed within a Multi-Tiered System of Support where Tier 1 requires universal staff training and trauma-informed class-room environments, Tier 2 requires intervention from school-based mental health staff, and Tier 3 requires intensive support from outside mental health and community services (Berger, 2019; National Child Traumatic Stress Network, School's Committee, 2017).

Purpose

The COVID-19 pandemic presents a unique opportunity for teachers to engage with and implement trauma-informed pedagogy to respond to the needs of their students. Whether teaching in-person, hybrid, or fully online, teachers can create clear routines, build positive relationships, create space for expressing emotions, and maintain a sense of safety and connectedness (Learning for Justice Staff, 2020). During the pandemic, many students may face trauma-related to isolation, grief, and economic hardship (Hallday Goldman et al., 2020). Given the prevalence of this collective trauma, teachers are being urged to adopt trauma-informed pedagogy during the pandemic and beyond to respond to the needs of their students (Darling-Hammond & Hyler, 2020).

Despite the increased attention toward trauma-informed pedagogy, few studies have focused on pre-service teacher preparation in the practice. Instead, many researchers have studied professional development in trauma-informed pedagogy or whole-school models of trauma-informed schools (Brunzell et al., 2019; Pawlo et al., 2019; Dorado et al., 2016; Blitz et al., 2016; Shamblin et al., 2016; Mendelsohn et al., 2015). This article aims to report how many states require pre-service teachers to receive preparation in trauma-informed pedagogy as part of their state certification requirements. State-level policy determines the requirements for teacher certification and educator preparation in each state and therefore is the foundation of the curricula taught to pre-service teachers.

Method

In order to understand if pre-service teachers are required to receive training in trauma-informed pedagogy, a systematic review of state policies regarding teacher preparation competencies was conducted for all 50 states and Washington, D.C. These state teacher preparation requirements

were found by searching state department of education websites and administrative codes. If the relevant documents were not identified on the department of education websites, "[state] administrative code teacher preparation," "[state] teacher preparation competencies," and "[state] educator preparation requirements" were used as google search terms to identify materials (reviewed documents and links can be provided upon request from the first author). Within these documents, general competencies for all educators, specific competencies for special educators, and separate competencies for those participating in alternative certification programs were identified, if applicable.

Next, the first author read the required competency documents for each state and coded them for the presence of trauma-informed pedagogy explicitly or six main elements of trauma-informed pedagogy. In a previous literature review of research regarding trauma-informed pedagogy, Thomas, Crosby, and Vanderhaar found that there was no clear operationalization of "traumainformed approach," "trauma-sensitive," or "trauma-informed system" within education (Thomas et al., 2019). Thus, resources from SAMHSA, NCTSN, and prior research were utilized to identify and adopt six key elements of trauma-informed pedagogy: a) Identify and assess trauma, b) Safe and predictable learning environment, c) Cultural responsiveness, d) Positive behavior management, e) Positive relationship building and collaboration, f) Social-emotional learning. These elements are defined in Table 1. The first element, identify and assess trauma, was further broken down into two sub-categories, reporting child abuse and understanding adverse childhood experiences, to create a more comprehensive picture of training requirements. To ensure accuracy, after the first reading was complete, both authors used the control F search tool to search for relevant keywords and other elements of trauma-informed pedagogy that may have been overlooked. Policies were coded with a 1 if the element was identified or 0 if it was not identified (data from coding can be provided upon request from the first author).

After the first author coded all of the state policy documents and entered the data into an excel spreadsheet, the second author also coded documents from 30% of the states or 15 states that were randomly suggested, in line with previous systematic reviews of state policies regarding teacher

Term	Definition
Requires instruction in Trauma- Informed Pedagogy Elements of Trauma-Informed Pedagogy	State has a requirement that teacher preparation programs include instruction in trauma- informed pedagogy, or all six elements of trauma-informed pedagogy are identified
Identify and Assess Trauma	State requires instruction related to understanding childhood trauma and its effects as well as identifying trauma signs, symptoms, and risk factors
Child Abuse Reporting Identify Adverse Childhood Experiences	State requires training regarding relevant mandated reporting laws of possible child abuse State requires training in recognizing signs and symptoms of abuse, neglect, and/or household adversity (ie. violence, mental illness, substance abuse, divorce, incarceration) and responding to affected student needs, in supplement to state-run mandated reporter training
Safe and Predictable Learning Environments	State requires instruction related to creating safe, predictable classroom environments with clear and concise expectations, schedules, and transitions; including, but not limited to, evidence-based classroom management practices
Cultural Responsiveness	State requires instruction related to understanding the impacts of student cultural experiences and historic oppression on learning; educators are encouraged to engage with diverse school communities
Positive Behavior Management	State requires instruction related to student discipline with clear and consistent expectations and consideration or student trauma as a catalyst of behavior; this includes, but is not limited to, positive behavior interventions and support and/or restorative justice practices
Collaboration and Positive Relationship Building	State requires instruction related to fostering positive, trusting relationships between students and teachers and students and their peers; spaces are created for sharing emotions and experiences
Social-Emotional Learning	State requires instruction related to teaching emotional intelligence, emotional and behavioral regulation, social skills development, and/or other areas of social-emotional learning

Table 1. Coding definitions for state policy documents.

preparation (Bailey & Burch, 2017; Cooper et al., 2020; Freeman et al., 2014). Inter-observer agreement (IOA) was calculated by dividing the number of agreed codes by the total possibility of agreement. The resulting overall IOA was 86%. The specificity of the competencies varied greatly by state, leading to slightly different interpretations of some requirements. After both authors finished coding, we reviewed our discrepancies and came to a consensus reaching full agreement based on the first author's coding interpretation.

Results

The results indicate that relatively few pre-service teachers are required to receive training in traumainformed pedagogy. As shown in Figure 1, only five states explicitly mentioned trauma and required training in trauma-informed pedagogy. These states were California, Michigan, Utah, Washington, and West Virginia. The two elements of trauma-informed pedagogy most identified were creating safe and predictable learning environments and positive relationship building and collaboration. These elements were required in general certification competencies in 40 and 38 states, respectively. Additionally, 34 states required training in cultural responsiveness. On the other hand, only 12 states required training in positive behavior management and nine states required training in identifying adverse childhood experiences in their general certification requirements.

Overall, the majority of states do not require even half of the elements of trauma-informed pedagogy in their general certification competencies, as shown in Figure 2.¹ Special education certification competencies generally required training in more elements of trauma-informed pedagogy than the general certification (Figure 3). Only 14 states required training in five or more elements of trauma-informed pedagogy for general education certification. In comparison, 22 states required training in five or more elements of trauma-informed pedagogy for general education certification. In comparison, 22 states required training in five or more elements of trauma-informed pedagogy for special education certification. These special education requirements tended to be more comprehensive and detailed than the general education requirements. In particular, while only 12 states required training in positive behavior management for general education certification, 24 states required such training for special education certification. Additionally, training in social-emotional learning was only required for general education certification. Despite these differences, still, only five states specifically required training in trauma-informed pedagogy for special education.

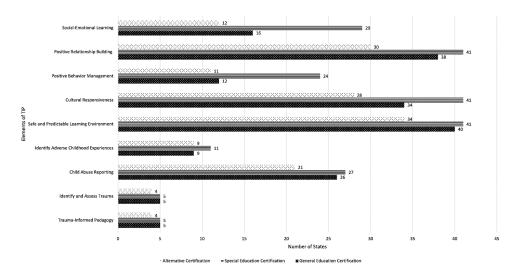


Figure 1. Number of states requiring each element of trauma-informed pedagogy.

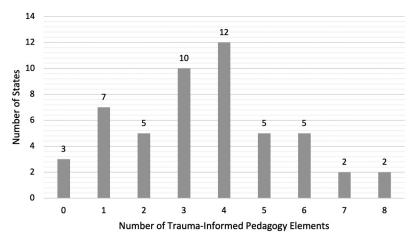


Figure 2. Frequency of elements of trauma-informed pedagogy in general education certification competencies.

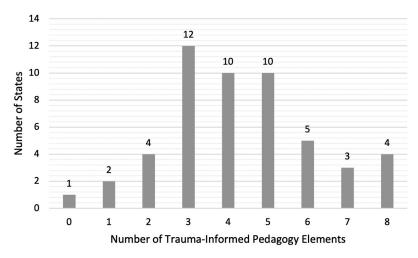


Figure 3. Frequency of elements of trauma-informed pedagogy in special education certification competencies.

Conversely, the required competencies for pre-service teachers completing alternative certification programs were far less comprehensive and generally less likely to require the elements of traumainformed pedagogy (Figure 4). Only 12 states required training in five or more elements of traumainformed pedagogy for alternative certification programs. Nine states did not require those in alternative certification programs to be trained in a single element of trauma-informed pedagogy. While 40 states required training in creating a safe and predictable learning environment for traditional general education certification, only 34 required such training for alternative certification. 38 states required traditional general education training in positive relationship building, but only 30 states required this training for alternative certification programs. Only 12 states required those seeking alternative certification to receive training in social-emotional learning and 11 states required them to be trained in positive behavior management. Overall, only four states required alternative certification programs to explicitly train pre-service teachers in trauma-informed pedagogy and identifying trauma, one less state than the traditional general certification programs. Thus, there is a stark difference between the level of training in trauma-informed pedagogy elements that pre-service teachers in alternative certification programs receive compared to their peers in traditional, general education certification programs.

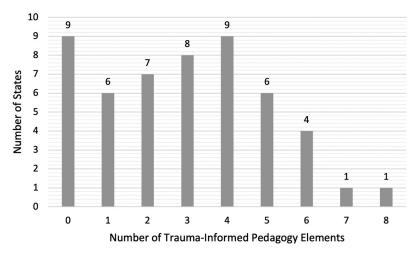


Figure 4. Frequency of elements of trauma-informed pedagogy in alternative education certification competencies.

Discussion

The findings of this review indicate that the current demand for trauma-informed pedagogy created by the pandemic is not being met by existing teacher preparation standards across the country. As only five state competency requirements explicitly mention training in trauma-informed pedagogy, preservice teachers in the other 45 states and Washington, D.C. are not required to receive training in the practice and are likely not prepared to implement it in the classroom. Despite this, nearly every state required pre-service teachers to receive training in at least one element of trauma-informed pedagogy, even if it was not explicitly connected to trauma. Special education certification competency requirements included even more elements of trauma-informed pedagogy than general certification requirements, particularly in the areas of social-emotional learning and positive behavior management. Thus, early career special educators may be more likely to implement these vital elements of traumainformed pedagogy in their classrooms. These social-emotional learning skills are useful with special education students who may need additional support learning to appropriately manage emotions and stress; however, they are also extremely beneficial for all students to help minimize triggers from traumatic experiences and directly build social skills (Brunzell et al., 2019; Cramer, 2018; Pawlo et al., 2019). These special education requirements could therefore be a potential model of beneficial requirements for general education certification as well.

Given the lack of current requirements for pre-service teacher competency in trauma-informed pedagogy, the findings of this review suggest that most state policies should be revised and updated to include training in trauma-informed pedagogy. These revisions can build upon the training that preservice teachers are already receiving in elements of trauma-informed pedagogy and explicitly connect them to benefiting students who have experienced trauma. The policies from all five states that include trauma-informed pedagogy (CA, MI, UT, WA, and WV) were updated within the past five years, indicating that as states review their teacher competencies, they may already be considering adding trauma-informed language. The state of Maryland, for example, is currently considering revisions to its teacher competencies that include required training in trauma-informed pedagogy (Salmon, 2021).

Other states, including Pennsylvania, Montana, Oregon, and Alaska, have policies that encourage the implementation of trauma-informed pedagogy and trauma-informed schools, particularly during this COVID-19 pandemic (Lysons & Mook, 2021; Oregon Department of Education, n.d.; State of Alaska, 2020; Trauma, 2021). Thus, many states are already working to implement trauma-informed pedagogy, even if it is not yet explicitly mentioned in teacher preparation competencies. Without these revisions, teachers may not be adequately prepared to work with students who have experienced

trauma, especially during the COVID-19 pandemic. As the pandemic continues, teachers will continue to work with students who have endured school shutdowns, changes to their routines, economic downfall, and insolation in vulnerable homes, all affecting their ability to learn (Araujo et al., 2020; Garfield & Chidambaram, 2020). Thus, trauma-informed pedagogy will continue to be important to aid students facing pandemic-driven trauma for years to come.

State policymakers should consider expanding upon this existing shift toward trauma-informed pedagogy and revise these teacher preparation competencies to require the practice. Given the success of previous trauma-informed pedagogy interventions in schools in improving classroom behavior, student resiliency, academic outcomes, attendance, focus, and student mental health, the increased use of trauma-informed pedagogy through the support of such legislation would directly benefit students (Berger, 2019; Dorado et al., 2016; Mendelsohn et al., 2015; Shamblin et al., 2016; Stopa et al., 2011). Teacher educators and practicing educators further should consider advocating for these policies at the state level and implementing trauma-informed pedagogy and training in their classrooms. The states that require trauma-informed pedagogy training in teacher competencies or encourage it in other policies represent a diverse coalition of states from across the political spectrum. Thus, updating teacher competencies to include trauma-informed pedagogy may be politically viable across the country. Additionally, outside of state-wide policy, school leaders and administrators could consider encouraging trauma-informed pedagogy in their schools and providing in-service training, particularly where students are not required to receive such training in pre-service. School administrators could further implement these strategies within a Multi-Tiered System of Support, providing universal staff training in trauma-informed pedagogy, school mental health staff, support for teachers' secondary trauma, and outside mental health services (Berger, 2019; National Child Traumatic Stress Network, School's Committee, 2017). These in-school initiatives, in addition to changes in state policies, could greatly improve the availability of trauma-informed supports for students and teachers across the country.

Limitations

While this research reviewed the presence of elements of trauma-informed pedagogy in-state teacher competency requirements, further research could consider training in trauma-informed pedagogy in other settings. This research did not review the presence of trauma-informed pedagogy training in professional development or in-service teacher training. Additionally, as this is a review of the required pre-service teacher training, this research did not identify whether individual educator preparation programs implement trauma-informed pedagogy in states where it is not required by state policy. The review is also limited in understanding how these requirements are being implemented in pre-service teacher preparation and if the training pre-service teachers are receiving in the elements of trauma-informed pedagogy is high quality. Further research is needed to understand more about the actual implementation of trauma-informed pedagogy training in pre-service teacher pre-

Conclusion

Trauma-informed pedagogy shows great promise for supporting students who have experienced trauma and building resiliency to help them overcome their experiences. Through illness, economic hardship, and exacerbated existing racial injustice and income inequality, the COVID-19 pandemic has become a shared adverse childhood experience for young children. Teachers can play a vital role in helping children reduce the damage of this trauma by creating environments of support and safety through trauma-informed pedagogy. As children grapple with the traumas created by the pandemic, as well as preexisting trauma, teachers need to be equipped with these tools to support them for years to come. By providing pre-service teachers with this training, educator preparation programs can prepare new teachers to use trauma-informed pedagogy as a foundational aspect of their professional

10 👄 N. REDDIG AND J. VANLONE

practice throughout their careers. Policymakers who hope to help children overcome the traumas that they have experienced should consider updating state teacher competency requirements to provide teachers with the tools of trauma-informed pedagogy.

Note

1. Since the category of identify and assess trauma was further broken down into two sub-categories, identify Adverse Childhood Experiences and child abuse reporting, eight total elements are reported.

Disclosure Statement

No potential conflict of interest was reported by the author(s).

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