



## Prepare Schools to Mitigate Trauma

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COVID-19 has altered every facet of our lives. For students, they are grappling with loss – loss of face-to-face interaction with teachers, peers, community, and extra-curricular activities in exchange for online or remote learning in an effort to adhere to social distancing. Another immediate concern is that the school environment is often the only safe refuge students have from abuse and neglect. Nearly 20% of the 4.1 million alleged instances of maltreatment are reported by education personnel. Besides guaranteeing two meals a day, teachers and school personnel offer a safe set of eyes and ears on children. The pandemic, and the resulting lockdown and loss of in-person instruction, will likely create traumatic experiences for young children that teachers will need to be able to recognize and address. **To that end, teachers need to be trained in recognizing indicators of trauma and abuse, and in how to make appropriate referrals when they observe “red flags.”** While schools are the most frequent and efficacious setting for **trauma-specific interventions**, best practices for **screening and referring students to treatment** have not been identified.

In 2014, a partnership between Fayette County Public Schools and the University of Kentucky evolved to address this gap. Efforts were devoted to (1) **co-locating trained clinicians at schools** to deliver evidence-based, trauma-informed treatment, and (2) disseminating information to teachers about evidence-based interventions to address trauma. Despite these efforts, teachers and staff did not make referrals, thereby **hindering the implementation process**. To that end, my current project will examine whether newly developed online training curricula, inclusive of lectures, role plays, and group dialogue, increases the use and exchange of knowledge about evidence-based interventions between school leaders and between leaders and teachers. The study will also determine if these “exchanges” of knowledge increase referrals, encourages them to make referrals as needed. Activities will include: 1) developing the online trauma-informed program to increase knowledge and awareness of what treatments are available 2) examining if awareness increases communication about trauma care between school personnel, and 3) examining if communication patterns influence teachers’ intention to refer and actual referrals to treatment. Online training offers flexibility — teachers can complete training in the comfort of their own homes during this global pandemic. After we overcome the unprecedented challenges related to COVID-19, teachers will then be armed with knowledge and resources to respond to trauma. Without swift action, students are placed then at heightened risk for **learning and behavior problems**, and decreased engagement in **school**.