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Healing Lessons:
Urban High School Teachers Learning to Teach
Black Youth with Post-Traumatic Stress Disorder

By

Dawn Ligaya Custodio Williams Ferreira

A dissertation submitted in partial satisfaction of the
requirements for the degree of
Doctor of Philosophy
in
Education
in the
Graduate Division
of the
University of California, Berkeley

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Professor Jabari Mahiri, Chair

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Spring 2012

Healing Lessons: Urban High School Teachers Learning to Teach

Black Youth with Post-Traumatic Stress Disorder

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Abstract

Healing Lessons:

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Doctor of Philosophy in Education

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Significant research reveals that youth who reside in neighborhoods of high crime and violence can often be exposed to external stressors that result in Post-Traumatic Stress Disorder (PTSD). These youths are disproportionately Black, and this condition often goes untreated. Consequently, their challenges with PTSD can surface and have tremendous impacts on teaching and learning at the schools they attend. These impacts include severe problems with academic achievement and discipline. The site of this research is a public, urban continuation high school in Northern California where many students exhibit symptoms of PTSD. This study explored the outcomes of professional development (PD) sessions designed to better prepare teachers to work with students who have exhibited behaviors connected to traumatic experiences. A mental health therapist led the first two sessions and assisted a focal teacher who was certified in cognitive behavioral therapy (CBT) in presenting the final session. Data sources are videotapes of the PD sessions, audio taped interviews of participating teachers, teacher surveys, observations, and field note documentation of the teachers' classroom instruction. Findings indicated that teachers found the PD sessions highly effective in helping them to better understand student behaviors as well as ways that they themselves were vicariously affected by their students' traumatic experiences. This study also found that mental health training helped teachers re-conceptualize their approaches to curriculum and instruction. Finally, this research explored the effects of the PD on implementation across the range of disciplines that were taught. A key implication is that when mental health training is incorporated into PD in urban schools, ameliorative impacts for both students and teachers are achieved. Teachers who learn about the effects of and pedagogical responses to PTSD are better prepared to create effective learning environments for traumatized students.

Keywords: post-traumatic stress disorder, urban education, and teacher professional development, Black students, African American students

Dedication

I give thanks to the ancestors on whose shoulders I stand.

Fred C. Williams, Sr.

Nora C.P. Custodio

Ricardo Lavender

Elijah Warren

Davelle Tate

Larry Spencer

Maurice Robertson

Shanice Kiel

Vévé Clark

John Ogbu

Carmen Mitchell

And to the children who stand on my shoulders...stand tall; I got you.

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Preface

Standing in line at a Baptist church waiting to embrace the mother of one of my students, I thought of Stevon's¹ smile. Months before, at a parent-teacher-student conference, his mother, Ms. Jones, had disclosed that she purchased home drug tests from the store to scrutinize her son's urine. Concerned with her only son's future, Ms. Jones had said unabashedly, "I know that if he can pass this [drug] test, he can pass any test."

In Stevon's 14 years, he had acquired impeccable social skills that made him a delight to work with in my Spanish class. Although he seemed to enjoy making me cringe by speaking Spanish with a very pronounced American accent, we shared the satisfaction of one of his accomplishments: a page-long, hand-written autobiography in Spanish.

A week earlier, Stevon had been shot in the stomach a block away from his apartment. He stumbled home in time to tell his mother that he loved her just before he died. Stevon was the first student I would lose to gun violence. By contrast, this was not his classmates' first experience of losing a peer or family member to a violent death. I witnessed the grieving process of teenagers familiar with their community's cultural protocols. On a main street near Stevon's home and school, students had assembled a street altar with posters, pictures, candles, stuffed animals, and balloons. Young adults donned sweatshirts with Stevon's images printed on them, expressed their vulnerabilities, and consoled each other with wisdom beyond their years. Exchanging stories about Stevon, students remembered his commitment to school.

Back in the classroom, there was an empty seat where a vibrant, young, Black man once sat. My students struggled to come to class and stay sober. An indescribable numbness consumed the space. As a teaching staff, we received no formal training on mental health issues, but implemented strategies to heal as a school that emphasized student well-being and safety, celebrated achievements, honored families, and embraced creative expression, all while continuing to teach our students with dignity and love.

*-Dawn Ligaya Custodio Williams Ferreira
(May, 2005)*

¹ Pseudonyms are used from this point forward for names of people and locations in order to protect their identity, unless the names have been previously published.

Acknowledgements

I wholeheartedly recognize that the doctoral degree that I have strived to achieve is not solely my own. It belongs to my community and will be used to serve my community.

With much gratitude and respect, I acknowledge the eight focal teachers and the mental health therapist who generously dedicated their time to my research. In writing this dissertation, I have gained even more appreciation for each one of you and the beauty that you bring to the fields of education and mental health. You made my work possible because you truly care about our youth. In light of the events that occurred on campus and the emotional strain that you experienced as teachers and as a therapist, you knew that you had to do something differently from the mainstream. The caring relationships that you cultivate with our youth are inspirational, and I am honored to have had the opportunity to tell your story. In telling that story, I have attempted to do this as accurately as possible, and I humbly apologize for any errors that may have occurred in the process.

To the beautiful, brilliant, youth of color who struggle to come to school: You are here against all of the odds. Some entities have been preparing for your demise. Pushing you out of mainstream education; pushing you to give up your innocence; pushing you to give up your beauty; pushing you to give up your talents; pushing you to give up your human rights. You are in the forefront of my mind as I do this work.

To Na'ilah Suad Na'sir: You lead by example as a professor, a scholar, a researcher, a mama of four, and an inspiring and gracious *sista*. From you, I have learned that motherhood can foster brilliance in educators and scholars. Resourcefulness, time management, and a particular worldview are just a few skills akin to mother-scholars, as we truly want a better world for all. While tackling the monumental task of completing my dissertation, it has been empowering to have a professor who embodies my same values, shares similar struggles, and is courageous enough to talk about it.

To Malo André Hutson: Your scholarly trajectory and your academic work are motivational. You are an undaunted warrior in your field, and it is an honor to have you on my dissertation committee. It is truly encouraging to see the scholarship on PTSD amongst communities of color expanded to academic fields beyond mental health. I appreciate the challenge you have taken on in joining my committee and the perspective that you bring from urban planning.

To Leigh Raiford: The day after one of my students was killed, I was outside of his grandmother's house waiting to pay respects, and you were on your way to Cal. You stopped to see what was happening. You were there in the midst of some of the story that I attempt to tell in this dissertation. I have appreciated your support all along the way and have been truly inspired by you.

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Grammar Lessons of Life from Jabari

On his keyboard,
He produces masterpieces.
His mind, in constant motion,
Creating new releases.
A mix of old-school and trendsetter,
Doesn't get no better.
Fine tuning,
Attention to each note, each letter.
From the quintessential,
Instrumental
Jabari

I have learned the following grammar lessons of life...

1. Increase your use of action words.
2. Omit the unnecessary words.
3. Make sure to punctuate your life with commas, but only when the time and place deem it appropriate.
4. Put your verbs and your mistakes in the past tense.
5. Use your knowledge and wisdom to shape the future tense.
6. Write your life's paragraphs in the affirmative.
7. Be okay with the first person point-of-view. The first person may not always have agreement.
8. Communicate clearly.
9. Avoid run-on sentences. Finish what you start.
10. Decide how you will capitalize (on) your words.

To Dior Sweeney: Thank you so much for your handling the tedious transcription work. You helped me out more than you know! It is truly an honor to know that we will both cross the stage this May!

To my brothas, Hodari Touré and Kofi Charu Nat Turner: Now the cipher is complete!

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To Babalwa Kwanele: Your kindness and positive energy radiate warmth. I appreciate your professional feedback and your constant support.

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To my family: In the quiet bustle of typing my dissertation at the study hall on a beautiful Saturday with other faithfully dedicated peers, I look out of the window. I see a father and his son coming out to play on the grassy area in front. It's as if I am watching a silent movie. At first, I am envious of the time that this dad, imaginably a fellow student-parent, has taken off to play with his child. The son, no older than four, holds a green plastic baseball bat that is almost as tall as he is. The father, with a cell phone in one hand and a ball in the other, tosses the ball. The son gets his first strike and immediately chases the ball down. The son throws the ball back to his father, who is so preoccupied by his phone he doesn't notice that the ball has landed at his feet. Realizing his father will not pick the ball up, the little boy runs to pick it up and puts it in his father's hand. The father tosses the ball again and returns to his apparatus. The boy swings but misses the pitch and runs to retrieve the ball again. The scene replays. His father becomes a pitching machine that only works when someone deposits a ball perhaps as mechanical as the device that consumes him. Finally, after several attempts at "playing baseball with his father," the boy decides to ride his scooter, an activity that he can do all by himself. As I observed, I was no longer envious, I was anxious—anxious to give my family the present of being fully present. Being absent from my loved ones has been the most difficult challenge of writing this dissertation. I look forward to making up for lost time.

To my grandparents, Grandma, Lola, and Lolo: Thank you for instilling the value of education in our family.

To Jinho, my soul mate: You are my favorite rap song—one African-rooted, witty, real, creative, aggressive, and infectious track. This year has definitely been a re-mix for us; but our love keeps the music playing continuously. As I look at my parents, I realize “it’s been done already.” Thank you for working so hard, keeping me in touch with reality, bringing me sources related to my work, and making me laugh. ☺

To Pharaoh: You have stepped up and taken on so much responsibility this year. I thank you so much for supporting me through this process and being such a wonderful son and big brother. I see that we are reflections of each other—both of us are trying to do our best in our many challenging roles with all of our responsibilities. Thank you for your sweet concern for my health and my sleep. Know that our family’s love is the lighthouse that got us through the dissertation “storm.” ☺

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To Désirée: You started grad school after me and finished before me. How did that happen? ☺ Thank you for reminding me to dance and make time for myself. Now, maybe that will actually happen...

To Justice: Thank you for feeding my belly with good food and feeding my brain with our conversations about education.

To my niece Laya and nephews, Jinho, Freedom, and Cairo: Tita Dawn is back!

To Mama Tanya & Taninha: Thank you for the love, support, understanding, and impeccable timing; you always seemed to step in at the perfect moment.

Chapter One A Community in Crisis

“Is it genocide?
‘Cause I can still hear his mama cry.
Know the family traumatized.
Shots left holes in his face about piranha-sized.
The old pastor closed the cold casket
And said the church ain’t got enough room for all the tombs.
It’s a war going on outside, we ain’t safe from.
I feel the pain in my city wherever I go:
314 soldiers died in Iraq, 509 died in Chicago.”

-“*Murder to Excellence,*” written and performed by Kanyé West
and Shawn “Jay-Z” Carter

The link between post-traumatic stress disorder (PTSD) and Black youth in certain urban neighborhoods became apparent to me in 2005. Months after one of my students had been shot and killed and during the emotional aftermath of his death, I worked as an educational consultant for Youth Radio, a non-profit organization designed to teach youth about media literacy, journalism, and broadcasting. My job was to develop on-line classroom curriculum for teachers to support the use of news stories written and produced by youth. A young soldier Jesús Bocanegra’s autobiographical piece about his return from the war in Iraq provided the catalyst for me to first seek out scholarship on PTSD. I immediately recognized its application to Black youth in urban communities. The National Institute of Mental Health (NIMH) defined PTSD as:

...an anxiety disorder that can develop after exposure to a terrifying event or ordeal in which grave physical harm occurred or was threatened. Traumatic events that may trigger PTSD include violent personal assaults, natural or human-caused disasters, accidents, or military combat (NIMH, 2008).

The American Psychiatric Association’s (APA) diagnosis for PTSD in the 2000 Revised Fourth Edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV-TR) includes the following criteria:

- A. Witnessing or experiencing a life-threatening stressor accompanied by feelings of terror or helplessness
- B. One or more intrusive recollections: including dreams, images, thoughts, perceptions, or feelings that relive the experience
- C. Three or more symptoms of avoidance/numbing: foreshortened sense of future, restricted range of affect, efforts to avoid associations with the trauma, detachment from others, memory loss with regard to details of the traumatic event, or less interest in activities that once brought enjoyment

- D. Two or more symptoms of hyper-arousal: difficulty sleeping, irritability or angry outbursts, difficulty concentrating, hyper-vigilance, or exaggerated startled response
- E. Duration: considered acute if symptoms last for less than three months and chronic if symptoms last for more than three months
- F. Functional significance: if the stressor impairs social and occupational interactions with others.

Aside from the technical definition, here is how Bocanegra described his condition in an excerpt from “Living with PTSD”:

...you’re sort of just numbed out. You don’t have no fear and your feelings are numb. It’s like you’re watching a black and white TV; you’re just not there. My mom noticed I was all nervous and stuff. I was sweating and I couldn’t sleep I was like, you know mom, I need help. I need to see a counselor or something.

The dissociation, anxiety, and insomnia Bocanegra describes are common symptoms after a person has experienced severe trauma. The youthful veteran goes on to comment on his experiences of seeking help, which dishearteningly proved fruitless.

As I developed the on-line curriculum (Soep & Chávez, 2010; Williams, 2006) around this particular radio broadcast, I asked about the connections to trauma in neighborhoods of highly stressful living. Following is an excerpt:

War at Home: Post-Traumatic Stress Disorder comes from being in an environment that threatens one’s physical, emotional, and mental well-being. It is often associated with war in other countries, but how can PTSD be a product of stressful environments found in our own backyards?

Debuting this particular Youth Radio curriculum in 2006, it was my hope that teachers would incorporate these lesson plans as it became evident that mental health needed to be linked more intimately to the classroom.

Trauma at Tubman High School

Years later, my former colleagues at an urban, public, continuation school located in Northern California, took action that concurred with the notion of bridging mental health and education. Between the years 2007-2009, five Tubman High School students or recent graduates were shot in surrounding neighborhoods of the school, resulting in the deaths of two young men and the critical injuries of three others. The gun violence witnessed, experienced, or survived by Tubman students happened all too frequently. In the words of Emily, a Tubman teacher:

At a school-wide assembly (to honor the lives of students lost) a local preacher asked the students to raise their hands if they knew of at least five people who had been shot and killed. All hands went up. When he said ten, a few hands went down. When he said fifteen, some more hands went down. What was shocking

was there were still hands raised when he called out twenty (Interview, September 19, 2010).

In the same interview, Emily additionally described the students as “numb” and the teachers as “more visibly upset.”

A high saturation of suffering students and teachers demands resources, yet the district did not offer extra funding. The Tubman administration’s response was to reignite a partnership with a mental health clinic that provided a part-time, on-site, licensed therapist. The partnership was suspended because the former clinician did not have a rapport with the staff and seemed to make little impact on the students. This time, Tubman requested and received a therapist who possessed cultural competence. The new clinician confirmed that mental health therapy needed to be prioritized when she analyzed the results of an informal survey showing that 99% of Tubman’s students self-reported symptoms of post-traumatic stress disorder in varying degrees. Though the therapist served students directly, she recognized that her time at the school was limited and in an effort to sustain the practices, offered to present sessions to the teaching staff about PTSD. Tubman’s teacher population unanimously elected to participate in a professional development led by the mental health therapist. While the comprehensive high schools in the district took on the issue of closing the achievement gap, Tubman teachers recognized that their students’ emotional needs affected their behavior and academics.

This research focuses on faculty members who faced a turbulent period of violent events related to their students. The study of these teachers’ professional development explores specifically how teachers came to understand the psychological conditions of the Black youth that they teach, and their potential roles in providing a therapeutic classroom environment for their students. The central research question is: How does professional development on post-traumatic stress disorder affect how teachers of traumatized Black students re-conceptualize and implement their teaching practices?

Understanding “Black”

As this research focuses on teachers of Black students, it is important to understand what is meant when using this ethnic description and why it has been selected to represent this particular population. Terms such as Black, black, Afrikan, and African American have been culturally accepted umbrella terminology to describe people of African descent who reside in the United States. Though this trajectory of Black self-identification, preceded by terms such as “colored” and “negro,” has most recently struggled to identify with Africa as a geographic reference and people of the African Diaspora, Hall (1996) calls attention to the importance of positionality. Under broad terms that encompass a wide spectrum of people, there exists a multiplicity of ethnicities from West Indian and Afro-Brazilian to Nigerian and Sudanese. Additionally, there are examples of white South Africans using the terms African and African-American. People of European descent have had the privilege of choosing to acknowledge the country of their ancestors or not. In this study, the term Black, emphasis on the capitalized “B,” refers to the ethnicity of people who are descendants of Africans who were enslaved in the United States and whose ancestral roots of origin along with their bodies were stolen with their displacement. This term is related to the internationally recognized, socio-political Black power movement of the 1960s, proliferated by the Black Panther Party, when efforts to promote positive images birthed the phrase “Black is Beautiful.” In this study, the terms black, with a

lower-case “b,” and African American are used inter-changeably, similarly to the terms white and European American. By employing the term Black, the intention is to be neither hierarchical nor pejorative, but to locate trauma and unique experiences with regard to institutional perjury, image, cultural identity, sexuality, resistance, criminality, and poverty in a U.S. white supremacist context (de Jesus, 1953; Robinson, 2010).

National information sources, such as the Census, tend to use encompassing terms to describe the African American population, which makes disaggregating statistics a challenging endeavor. The United States Census Bureau (2011) has shown the African American population at 12% steadily approaching 13. Yet, upon closer analysis the African immigrant population has dramatically risen from 35,355 in 1960 to 1.4 million in 2007, indicating that the Black population is on the decline. Additionally, Africans are among the most highly educated immigrants in the U.S. (Kaba, 2007). This data suggests a selective process that is taking place with regard to how immigration policies are shaping the future generations of African Americans. Bell’s interest convergence principle (1980) would propose that U.S. interest in rich, African resources, such as oil, diamonds, and minerals, underlie the increase in African immigrant acceptance into the country.

All too often youth of color, particularly Black youth, are unfairly blamed for societal ills, such as violence and crime (Mahiri & Conner, 2003). Conservative voices DiIulio (1995, 1996) and Bennett (2005) vilified Black boys born to single mothers in impoverished communities following DiIulio’s “Superpredator” theory. Scholarship of this variety has promulgated fear, racial profiling, and a reification of negative, Black, male stereotypes embodied in their over-representation in the prison industry’s bloated expansion (Alexander, 2010). According to Sabol, West, and Cooper (2010), the Bureau of Justice statistics data showed “an estimated 4.8% of black men were in prison or jail, compared to 1.9% of Hispanic men and .7% white men.” Black women were incarcerated at 1.6 times the rate of Latinas and 3.8 times the rate of white women (Sabol et al., 2010). The jail rates of African American people have been on the decline from 41.3% in 2000 to 38.6% in 2006 (Sabol et al., 2010).

Though conservatives complain vociferously about crime, corporate businesses that support right wing politicians profit substantially off of high crime rates and the prison industrial complex (Davis, 1998). Conversely, the Black population is most negatively impacted by the high crime rates and death tolls of Black people, particularly due to ethnic fratricide. The Tuskegee archives documented 3,446 deaths of Black people due to lynching from 1882 to 1968. While the Federal Bureau of Investigations reported 6,470 deaths due to homicide during the year 2010, the majority of these homicides involved Black assailants and Black victims. Homicide, assault, and rape are perpetrated more commonly against Black victims and race has statistically been a more prevalent factor than socio-economic status (Alim, Charney, & Mellman, 2006; Bryant, 2009). There are higher rates of trauma exposure in Black communities as more Black youth witness violence than white (Alim et al., 2006) and Latino youth (Sharkey, 2010).

Tubman students are predominately Black urban residents where homicide is the leading cause of death for Black, male youth their age (Conner, 2010, Sharkey, 2010). Crime in urban areas is 37% higher than the suburbs and 74% higher than rural areas (Bertram & Dartt, 2009). In the past year, in the same area of the research site for this study, three children five-years-old and younger have been shot and killed by bullets not intended for them (Johnson, 2012). Children do not have to be acquainted with victims or witness violence to be affected by it. Sharkey’s study conducted in Chicago (2010) found that among Black children in areas of high

violence, test scores declined around the times of murders whether the children knew the victims or not. This compelling research indicates that Black youth in urban areas of the United States face a problem much graver than the academic achievement gap—the mere threat to their survival.

Children growing up in communities where high rates of violence occur can result in PTSD (Aisenberg & Mennen, 2000; Shakoor & Chalmers, 1989). Facing deplorable living conditions, poor nutrition, capricious housing situations, unpredictable events, threats to life and person, and direct exposure to violence, many children lack stability and their ability to cope is greatly affected (Bertram & Dartt, 2009). Urban youth are highly prone to community, school, and domestic violence (Thompson & Massat, 2005). Sedlak et al. (2010) found that regardless of socio-economic status, black children have a higher risk of facing maltreatment than white children, while white children had higher rates of neglect.

In addition to physical abuse, sexual abuse is also an adverse reality for youth in urban areas, though studies vary in the actual statistics (Roberts, 1997). According to Finkelhor, Hotaling, Lewis, and Smith (1990), Black children were 18% of the survivors of sexual assault, yet 16% of the U.S. youth population. Urquiza and Goodlin-Jones' study from 1994 found that 44.8% of black women surveyed had experienced childhood sexual assault. Researchers (Alim et al., 2006; Perry, Pollard, Blakley, Baker, & Vigilante, 1995; van der Kolk, 2007) have found that sexually abused PTSD sufferers are sometimes promiscuous and engage in high-risk sexual activity. Trauma-related stress elicits behaviors related to survival, although risky sexual behavior could be considered antithetical to this notion.

There are more African American deaths due to HIV/AIDS than in any other ethnic group, 19.4 out of every 100,000 as compared to the national average of 4.2 (National Center for Health Statistics, 2011). However, this could also suggest that procreation may be a survival mechanism. Teen pregnancy statistics require a more nuanced analysis because they speak to new life brought into the Black community, yet young mothers are shunned for being inexperienced, undereducated, and impoverished. In fact, the pregnancy rate among black women aged 15–19 fell 45% between 1990 and 2005 before increasing in 2006, and continues on the decline (National Center for Health Statistics, 2011). The infant mortality rate among African Americans 13.7 deaths per 1,000 births is almost twice the national average of 6.9 deaths per 1,000 births (National Center for Health Statistics, 2011). Black women also experience the highest rates of childbirth complications resulting in maternal deaths (National Center for Health Statistics, 2011).

Not only are Black children experiencing death and unwanted sexual encounters at early ages, parental neglect and other disruptions in home life, such as living with surrogate parents or homelessness, are an ill-fated reality for some. Extended kinship and non-kinship dependence has been prevalent in Black families since ante-bellum times (De Gruy, 2005; T'Shaka, 2004) when slave owners separated Black families at whim. T'Shaka (2004) asserted that this has not been a continuum and links diminishing figures of Black men, who were a strong presence in Black households from 1882 to 1968, to the outsourcing of industrial jobs causing financial distress and family separation.

The 2011 Census showed that in over 60% of the households of African American children under 18, either one or both parents are absent. Livingston and Parker (2010) posited that 13% of African American children reside primarily with their grandparents and nearly 80% of those families reside in urban communities (Fuller-Thomson & Minkler, 2000). Social factors such as HIV/AIDS, parental drug abuse, teen pregnancy, youth unemployment, and incarcerated

mothers typically result in grandparents becoming primary caregivers (Fuller-Thomson & Minkler, 2000). In the foster care system, a kinship care clause seeks out relatives before placing children with non-family members. With the numbers of children raised by Black elders, health and well-being becomes an intergenerational issue. African Americans lead in death by natural causes such as heart disease, strokes, cancer, influenza, and pneumonia (National Center for Health Statistics, 2011).

Black children make up 30% of all children in foster care (Child Welfare Information Gateway, 2011) yet 17% of the national population under 18 (Census, 2011). According to Weber's research (2010) Michigan's Black children make up 18% of the youth population but represent 50% of the youth in foster care. Weber's findings (2010) also revealed that race and class discrimination were significant factors in the disproportionate placement. According to the National Casey project that serves youth in foster care, 21.5% of the alumni of the program suffered from PTSD, which more than quintuples the national average of 4.6%.

Nation-wide statistics show that Black children are disproportionately represented in foster care and in the homeless population. Often due to the high-cost of housing, poverty, and domestic violence, mothers and their children make up the largest percentage of homeless people (Aratani, 2009). Out of the total population of children who experience homelessness, 47% are Black (Aratani, 2009). Youth who run away have significantly high chances of facing incidents of sexual abuse, which are a cause of PTSD.

Dense urban populations living in close proximity make for more frequent interactions with strangers and both legal and illegal financial creativity. African American youth use illegal substances at lower rates than their Latino and white peers yet they are incarcerated for drug-related crimes more frequently (Alexander, 2010). Financial and materialist stress in a U.S. context can lead the youth or family members into involvement in illegal activities such as drug sales, theft, pornography, and prostitution.

In addition to acquiring money, many families in urban areas face the dilemma of finding healthy sustenance. Poor nutrition and high levels of obesity (Beyers et al., 2008) may be due to low access to grocery stores and fresh, wholesome foods. Obesity has also been linked to survivors of starvation (Terr, 1981) and childhood sexual abuse (LeMieux & Coe, 1995) who suffer from PTSD. Beyers et al. (2008) reported that in one neighborhood that fed students to Tubman High there were no grocery stores. The small markets, found on most blocks, were liquor stores that carried unhealthy snacks and if they had produce available, it was over-priced and of a mediocre quality (Beyers et al., 2008).

The high cost of living in urban areas weighs heavily on families. Low-cost rental housing decreased 13% between 1993 and 2003 (Aratani, 2009). With increasing childcare and healthcare costs (Smith & O'Hara, 2011), youth are often the caretakers of younger siblings or sickly adults. The Census of 2011 placed the area where this study takes place among the three most expensive urban areas. As gentrification brings increasing numbers of white people into urban areas and displaces waves of people of color to the suburbs, this incremental shift does not significantly impact this study and as such the following description of urban geography currently applies.

The geographic landscape that provides the backdrop for the majority of the aforementioned statistics on Black youth reflects the artificiality of socially constructed racial and urban conditions. In order to understand urban landscapes in the United States, there is a particular history to recognize, unique from other countries. Geographically, urban cities are typically near ports allowing for a close proximity to the import and export of goods and

international connections. The term “urban” derives from urbane, which bears synonyms such as sophisticated, polite, and refined (“Urbane,” 2011). In most countries the wealthy inhabit urban cities and people of lower socio-economic status reside in suburban neighborhoods, yet racial politics have uniquely dictated the “color” of urban areas in the U.S.

Black urban populations in northern and western urban cities reflect a history of post-bellum migration in search of economic stability, yet over a century of unfulfilled promises. “White flight” occurred when Black people moved into historically European American neighborhoods (Lipsitz, 1998). Racially discriminatory housing and employment practices combined with divisive transportation methods have isolated many economically disadvantaged Black people in urban cities (Beyers et al., 2008; Davis, 2006; Ware, 2004). Racially segregated communities additionally fall prey to environmental hazards due to industrial zoning (Hutson & Wilson, 2011). Although people of color have been the primary inhabitants of urban space, whites have typically maintained control of the property, finances, and law enforcement (Harris, 1992; Lipsitz, 2006). The power that dominant culture wields over the aforementioned institutions simultaneously impacts the education and social conditions of Black children (Ladson-Billings, 1998).

For Black youth, high exposure to chronic community violence along with decreased access to health care can decrease resiliency (Alim et al., 2006). African-Americans in urban areas are at a higher risk for PTSD (Alim et al., 2006). Yet, living in a community plagued with violence makes support networks seem less available, as living amongst other people who are also at risk makes it difficult to seek emotional reinforcement (Bertram & Dartt, 2009). Former Surgeon General David Satcher claimed that mental health was a crisis facing young people (U.S. Department of Health and Human Services, 2001). “One out of ten was suffering enough to limit daily functioning” and 70% did not receive treatment (Koller & Bertel, 2006, p. 199). Of particular note, Rowe (2010) explains that children who have experienced trauma “may not show all of the symptoms of PTSD but may frequently exhibit enough symptoms to interfere with their education” (p. 195).

Impacts of PTSD on Schooling

As young people navigate their worlds inside and outside of school, it is important to note that symptoms of PTSD can result from traumatization that occurs in both environments. Without mental health training, even a well-intentioned teacher could misinterpret symptoms of students who are suffering from mental health disorders and possibly exacerbate a situation. In reviewing the general symptoms of intrusive recollections, avoidance/numbing, and hyper-arousal it becomes clear that PTSD can have an adverse effect on students’ self-discipline leading to behavioral problems (Berman, Kurtines, Silverman, & Serafini, 1996; Thompson & Massat, 2005) and low academic performance in school (Berman et al., 1996; Sharkey, 2010). This is graphically depicted in Figure 1 below.

Figure 1. Manifestations of PTSD in the Classroom

Criteria for PTSD in DSM-IV-TR	Symptoms of PTSD	Manifestations in class
Intrusive recollections	Nightmares	Exhaustion, sleep-deprivation
	Feelings that relive traumatic experiences, anxiety	Need to self-soothe, self-medication, thumb sucking, clinginess to teacher
Avoidance / Numbing	Feelings of hopelessness, worthlessness	Giving up, dropping out, not putting effort into work, poor decision-making
	Efforts to avoid associations with trauma	Not coming to class
	Detachment from others, isolation	Difficulty with group work and collaboration
	Recall difficulties	Difficulty with memorizing information that seems irrelevant to survival
	Dissociation, zoning out	Not paying attention in class
Hyper-arousal	No longer enjoying activities that brought enjoyment	Not coming to class
	Insomnia	Exhaustion, sleep-deprivation
	Irritability	Difficulty working with others, bullying, issues resolving conflict, lack of respect for authority
	Angry outbursts	Disruptive behaviors, fighting
	Difficulty concentrating	Unfocused, difficulty doing work
	Hyper-vigilance	Lack of trust in others, walking around the classroom, wanting to sit by the door, not wanting to sit in a seating chart
Generalized hyper-arousal	Somatization, stomach pain, headaches	Missing class
	Inability to modulate sexual impulses	Harassing of peers, teachers; inappropriate conduct
Release of norepinephrine in brain	Cognitive processing of language	Struggles with literacy, difficulty putting thoughts into words, preference for art

Disrupted sleep due to nightmares or insomnia (Sharkey, 2010) and the use of chemical substances to forget trauma or stay awake (Thompson & Massat, 2005) can significantly affect student conduct. Difficulty concentrating (White, Bruce, Farrell, & Kliewer, 1998), memory loss (van der Kolk, 2007), and dissociation or “zoning out” (Carrión & Steiner, 2000; van der Kolk, 2007) can have a deep impact on a student’s academic work. Animated displays of rage, heightened emotions, and bullying are actions that can cause turbulence in a classroom full of students. Hyper-vigilance and paranoia can impact the level of trust. Another common aspect is the opposite—a student can become so attached to a teacher that he or she may go above and beyond to get attention from the teacher, feeling betrayed if the teacher is helping someone else. Eth and Pynoos (1985) warn that behavioral acting out at the secondary level can include

truancy, promiscuity, substance abuse, and delinquency and be more dangerous because of adolescents' possible access to cars and weapons.

Growing up surrounded by community violence could also be associated with an exposed student's low academic performance (Delaney-Black et al., 2002). PTSD is connected to developmental delays with language skills, particularly in reading (Delaney-Black et al., 2002). Lyon (2002) asserts that illiteracy is a "national public health problem." He further points out that 50% of incarcerated teens struggle with reading and in some states the size of future prisons is predicted by fourth grade reading failure rates. Of children who were maltreated, a strong predictor for PTSD, 53% had delayed cognitive development, which often results in long-term effects on literacy and academic performance later in life (Harden & Nzinga-Johnson, 2006). Adolescence is a particularly vulnerable time for traumatized youth because on one hand they may be suffering from feelings of hopelessness and worthlessness (van der Kolk, 2007), and on the other, they are expected to make important decisions about their future endeavors (Pynoos and Nader, 1988). Experiencing traumatic external stressors without the means to process them may lead to pregnancy or dropping out of school, what Eth and Pynoos (1985) refer to as "premature entry into adulthood and closure of identity formation" (p. 47). In other words, research empirically supports the notion that symptoms of PTSD are antithetical to high academic performance and seeking mental health interventions for traumatized students may help to sustain their achievement in school.

Structure of the Dissertation

Chapter two, "Strategizing for Survival," extends from the physical and mental health threatening challenges faced by Black youth and explores ways that historically both psychologists and psychiatrists have sought out therapeutic solutions. Chapter two shows that scholarly attempts have been made to drive leading professional mental health organizations to recognize racism as a cause for mental health disorders to no avail. This literature describes existing programs used both outside and inside the classroom to strive for the mental healing of youth such as wilderness camps, residential treatment programs, and PTSD interventions in schools. This chapter investigates the literature on effective practices of professional development and mental health interventions as part of the development of teacher strategies, curriculum, and implementations. The final element of this chapter explores the cultural connections integral to both education and mental health in serving Black youth.

The third chapter, "The New Underground Railroad: A Case Study on Tubman High School's Faculty," describes the methodology used in a study of eight focal teachers. A qualitative study best suits this dissertation because it allows for a rich description and is not wedded to before and after test results. The documentation of the PD sessions, field notes on classroom observations, interviews, surveys, and artifacts provide the details on teacher outlook, implementation, and practices impacted by the PD sessions throughout the school year.

In the fourth chapter, "*Funda*-Mental Health Training," a detailed description of the three phases of professional development provides insights into the sessions that Tubman teachers experienced. This series of trainings is then connected to the conceptual and pedagogical shifts that followed in teachers' understandings of their students and in the practices in their classrooms that are delineated in the following two chapters.

One common theme that arose from teacher interviews about the PD was that the sessions pushed them to approach education from the inside out, reflecting on their own personal

experiences with trauma and beliefs about their students. In this way teachers' perceptions of students shifted, and that became evident in their classroom discipline and other teaching practices. The analysis of these shifts in perspectives and practices begins with the fifth chapter, "Bridging the Gap: From Self-Aware to Student-Aware." It assessed ways that the teachers internalized key aspects of the PD. This chapter shows that teachers used their mental health training to consider their own stressors and behaviors that also facilitated an understanding of the trauma their students faced. Tubman teachers analyzed some of their practices that were causing increased tension among students. Teachers also discussed ways in which they organically and proactively built and maintained mentoring relationships with their students.

"Teaching as Healing," chapter six, looked at how teachers across disciplines integrated the ideas presented in the PD on PTSD. This data analysis chapter detailed ways that the teachers developed curriculum to engage their students in explicit considerations about PTSD and its potential effects. Although PD at the secondary level is often difficult because educators claim that their subject matter is ignored, motivated Tubman teachers demonstrated how their learning about PTSD could be infused into all disciplines.

"Looking Forward," the seventh and final chapter, concludes the discussions raised in this study and draws implications for on-going teacher perspectives, practices, future research and educational policies that needs to be conducted to better understand mental health issues in urban schools.

Chapter Two Strategizing for Survival

We better hurry, oh, hurry, oh, hurry, whoa now!
'Cause we got no time to lose.
Some people got facts and claims;
Some people got pride and shame;
Some people got the plots and schemes;
Some people got no aim it seems.
We're the survivors, yes, the black survivors!

-*"Survival," written and sung by Robert Nesta Marley*

Beginning with a history of how post-traumatic stress disorder has developed, this chapter then links considerations of race and children that are applicable to the diagnosis of Black youth. After documenting how this illness has come to being, this chapter turns to the state of mental health interventions both outside and inside schools including forms of medical, psychological, and artistic approaches to therapy. Finally, this chapter illuminates how cultural aspects are intertwined in the fields of education and mental health. Drawing from the history of PTSD, previous interventions, and connections to Black culture, this literature provides the context for this study that focuses on the partnering of a mental health care provider and teachers at a public school that predominately serves Black youth.

A History of PTSD

In 1952, the American Psychiatric Association (APA) released the first volume of the Diagnostic and Statistical Manual of Mental Disorders (DSM-I). The first iteration of PTSD, Gross Stress Reaction (GSR), was influenced by the early work of French psychologist Janet (van der Kolk & van der Hart, 1989) and German psychiatrist Freud (Wilson, 1994). This applied mainly to people who had experienced combat and catastrophe and suggested a temporarily traumatized state of being. It was further thought that feeble individuals with pre-disposed conditions would fall prey to GSR in combat (Scott, 1990).

Fanon, an Afro-Martinican psychiatrist, was a forerunner in psychiatric scholarship. He documented the effects of colonialism, war, and oppression on mental health. As the medical profession primarily catered to colonizers, Fanon's (1963) contributions during that era provided a clearer picture of post-colonial mental health disorders that revolutionarily included colonized people. Providing evidence through numerous case studies in Algeria after French colonialism, psychiatrist Fanon found that faulting the oppressed for their oppression came with the proverbial territory. Though a pre-colonial dispersal of Africans to other continents occurred voluntarily, post-colonial theory is relevant to descendants of enslaved ancestors throughout the African Diaspora and the controlled and monitored presence of Africans throughout the world.

Fanon illuminated how megalomania infiltrated the culture of colonizers unapologetically committing nefarious acts against humanity. Laws and regulations protected colonial powers allowing members of the dominant culture to go unpunished without legal ramifications holding

them accountable. Fanon's broad lens on mental disorders took into account the dehumanization of colonized people:

Colonialism is not satisfied merely with holding a people in its grip and emptying the native's brain of all form and content. By a kind of perverted logic, it turns to the past of the oppressed people, and distorts, disfigures, and destroys it (p. 210).

Though Fanon promoted violence against the colonizer as a way to foment decolonization and assert humanity amongst oppressed populations, he showed that in-group oppression was a natural progression. Fanon poignantly illustrated the notion of colonial powers destroying relationships between oppressed people. Thus the torment of colonized psyches becomes an act that is passed from the oppressor to the oppressed. Fanon's theories explain how white supremacy has affected the homicide of Black people in forms such as Ku Klux Klan lynchings (Tuskegee Institute Archives, 2010) and ethnic fratricide (Conner, 2010; Sharkey, 2010). His seminal work illustrated the inter-workings of war and domination on the psyche as an isolated trauma, yet went unrecognized by the American Psychiatric Association.

In the following version of the Manual of Mental Health Disorders, the DSM-II, which came out in 1968, there was even less mention of Gross Stress Reaction. The phrasing had been changed to Transient Situational Disturbance, still implying that symptoms were temporary and stating that lingering effects were due to childhood dispositions (Bertram & Dartt, 2009). Mental health scholars, who have traced the history of the PTSD diagnosis, seem particularly baffled by this omission (Andreasen, 2010; Bertram & Dartt, 2009; Wilson, 1994). This time period chronicles severe national trauma with the assassinations of leaders and the Vietnam War taking place but the DSM-II reflected very little recognition of historical events. Confused by the abundance of history written yet the lack of mental health progression, Wilson commented on the DSM-II's surprisingly grave disconnect from the times:

The simplicity and inadequacy of these examples (of GSR) gives pause to inquire as to why there was not a more adequate and complete delineation of the various types of trauma; their common effects on psychological functioning and the known clinical features associated with such stressful life experiences (p. 691).

One group that was paying attention to the national times and attempting to connect those events to psychology was the Association of Black Psychologists. Psychiatry and psychology are separated mainly by the titles of medical doctor versus doctor of philosophy, thus the MD's ability to prescribe medications. The organization struggled for more equitable treatment of Black people's trauma and in 1968, these scholars petitioned the American Psychological Association, for racism to be acknowledged as a contributor to mental health disorders, among other demands. It was the year that Dr. Martin Luther King, Jr. was assassinated and the petition cited the federal government's Kerner report, which documented "white racism in America as the factor chiefly responsible for the present conditions of injustice, inequality, and social unrest" (Williams, 2008, p. 251). Williams (2008) referred to the 1968 American Psychological Association president Albee's refusal to make any concessions, saying that the board could not speak for the entire body of psychologists. Pickren and Tomes (2002) added that there were "bland" attempts on the part of the American Psychological Association to increase the participation of people of color at their conferences. The following year, Kenneth Clark, a Black

psychologist was appointed president of the American Psychological Association. According to Williams (2008), this was an attempt to quell claims of racism, however, Clark's integrationist politics meant that he too rejected the proposal of the body of scholars who said they "were Black people first and psychologists second" (2008, p. 250).

The Black members of the American Psychiatric Association followed a year later, with a protest (Carter, 1994) and a proposal (De Young, 2010) to include racism in mental health diagnosis. The rejection of the APA in De Young's words said, "so many white Americans are racist, even the extreme racism that resulted in the murders of Civil Rights workers and leaders could be considered normative..." (p.16). Carter explained that the APA's attention had been shifted to residency training programs increasing the numbers of patients and psychiatrists of color.

Although neither the American Psychological Association nor the American Psychiatric Association approved the vast majority of the Black psychologists' and psychiatrists' demands, changes in definitions, additions and subtractions to the DSM are possible. Notably, in 1973, when Dr. Alfred Freedman, a gay psychiatrist, became the president of the American Psychiatric Association, the board of trustees accepted his proposal to re-classify homosexuality, no longer to be considered a mental illness (De Young, 2010).

After psychologists, psychiatrists, therapists, and Vietnam War veterans teamed together to establish a technical diagnosis, PTSD became a full-fledged disorder in 1980 in time for the release of the DSM-III (Scott, 1990). According to van der Kolk, Wisaeth, and van der Hart (1996), this body drew upon research conducted on Holocaust survivors and burn victims to develop the criteria for PTSD. Bertram & Dartt (2009) pointed out that the shift was significant because "symptom causality had shifted from the individual psyche to the ecology or context of the affected person" (p. 296). This change in philosophy shifted from the consideration of PTSD as a mental health illness due to a genetic or predisposed condition to one linked to external stressors.

PTSD and race. The broadened understanding of ecological causality has overlooked racism's role in traumatized, oppressed people. With systemic control of language, space, and bodies, European American culture embodies the act of setting societal norms (Bell, 1980; Harris, 1992; Lipsitz, 2006; McIntosh, 1989). White culture has defined diagnoses, dictated what is accepted in the DSM, decided who receives mental health treatment, and often determined who will win grants that fund mental health programs. This notion of privilege has been bequeathed to all people of dominant culture including those who do not actively embrace a white superiority complex. The acts of deciding what qualifies for PTSD and who will receive treatment have often excluded people of color (Loo et al., 2001).

Harris (1992) asserted that the overarching dominant cultural view is predicated on the belief that those who hold power are the possessors of all, seeing oppressed others as "objects" or non-human. This dehumanization is clearly evident in the blatant disregard for Black experiences and scholars of African descent in the field of mental health. The trauma of chattel slavery experienced by Black people was not taken into consideration when the first diagnosis for PTSD was established in 1980 although the U.S. is the only industrialized country to have practiced chattel slavery on its soil. Free labor of Black people in the form of chattel slavery provided the U.S. with a solid economic foundation that fast-tracked its climb up the rungs to become a global super power.

Yet, compared to other industrialized nations, the United States comes in 20th out of 24 for the level of political and economic rights guaranteed to its citizens (SERF, 2011) and ranks second to last in providing for children of low socio-economic status (UNICEF, 2007). Clearly illustrating these rankings are the disproportionate representations of Black people who are incarcerated (Alexander, 2010; Beyers et al., 2008) and unemployed (Beyers et al., 2008) and the displacement of children who live below the poverty line, inevitably affecting Black children (United States Census Bureau, 2011; Beyers et al., 2008).

PTSD in children. As the APA defined PTSD, there was a reluctance to diagnose children with PTSD. Some theorists originally believed that children had enough resilience to isolate them from trauma having an effect on their mental health (Silva et al., 2000; Wilson, 1994).

Yet, many studies have confirmed that children can indeed be diagnosed with PTSD (Berman et al., 1996; Berton & Stabb, 1996; Cook et al., 2005; Cooley-Quille, Boyd, Frantz, & Walsh, 2001; Duncan, 1996; Perry et al., 1995; Shakoor & Chalmers, 1989; van der Kolk, 2007; van der Kolk et al., 2009), particularly that of Terr (1981), which followed a group of Chowchilla children who were kidnapped and buried alive in a bus to later be ransomed. Not just limited to war and natural disaster, the 1994 version of the DSM-IV included life-threatening events or traumatic stressors either experienced or witnessed. At that point the diagnosis of PTSD expanded to include children (Anderson, 2005; Bertram & Dartt, 2009). Perry et al. (1995) contended that children are not resilient but malleable and their childhood experiences shape their memory. “In the developing brain, these *states* organize neural systems, resulting in *traits* [emphasis mine]” (Perry et al., 1995, p.275). Because children are a vulnerable population, studies on children typically focus on witnessing and experiencing violence, though trauma in the forms of physical, sexual, and mental abuse; neglect; and abandonment may also result in PTSD (van der Kolk, 2007).

Several scholars have found that minors of varying ages experienced trauma differently from adults (Berton & Stabb, 1996; Duncan, 1996; Perry et al., 1995; Terr, 1981; Thompson & Massat, 2005; van der Kolk et al., 2009). Psychosomatic complaints, such as stomachaches or headaches, accompany traumatized children (van der Kolk et al., 2009). Pre-schoolers believe in fantasy and being able to have superhuman powers to escape their trauma (Perry et al., 1995). As children get older, daydreaming or dissociation, disengaging from the external world and retreating to an internal world (Perry et al., 1995) can also be linked to the occupied thoughts of fantasies. Self-soothing mechanisms, such as thumb sucking (van der Kolk, 2007), and difficulties with social relationships (Thompson & Massat, 2005) could be possible for youth who suffer from trauma. School absenteeism, low academic performance, behavioral problems, promiscuity, participation in illegal activities, sleeping troubles, hyper-vigilance, and substance abuse are often associated with teenagers who have experienced trauma (Thompson & Massat, 2005). According to Shaw (2000), adolescents generally react to trauma similarly to adults but due to their developmental stage, they may vary from having hedonistic tendencies that attract them to particularly risky behavior to having phobias and severe inhibitions. Adolescents may use drugs and behavioral issues as distractions from guilty, anxious, and painful feelings because they are consumed with their sense of responsibility in a traumatic event (Rowe, 2010).

Trauma has a tremendous impact on cognitive development additionally affecting self-regulation, attention, memory, dissociation, hyper-arousal, and fight or flight response (Harden & Nzinga-Johnson, 2006). Neglect, considered a form of trauma, impacts cognitive

development as parental attachment, particularly maternal, is crucial to providing protective mechanisms for a child against prolonged traumatic effects of external stressors (Aisenberg & Mennen, 2000; Cook et al., 2005; Silva et al., 2000; van der Kolk, 2003). Silva et al. (2000) maintained that there is resiliency in children and youth because of the low presentation of PTSD symptoms. According to their study, 59% of an urban youth population had experienced high rates of trauma but that less than one fourth of those exposed met full criteria for PTSD. They additionally cite Fitzpatrick and Boldizar's study (1993) that claimed 70% of another researched urban population was exposed to trauma and only 27% of the youth displayed signs of PTSD.

Some scholars in the field of mental health have suggested that the role of parents in children's lives during critical developmental stages can account for differences in how children process trauma. In fact, van der Kolk has led numerous other scholars (2009) in petitioning for Developmental Trauma Disorder (DTD) to be included in the DSM-V that particularly highlights the lack of parental attachment as criteria for diagnosis in children. Though the DSM review board has not approved DTD, researchers (van der Kolk et al., 2009) have sought to share their theory and findings extensively which showed that the youth who displayed the most exacerbated signs of PTSD generally tended to have weak maternal connections. This may result in the finding of Jensen and Shaw (1993) that traumatized teenagers can be overly dependent on role models and thereby need help to stay focused on their goals.

Research on traumatized children remains scant (Perry et al., 1995). One possible reason is due to the fact that minors are a vulnerable population. In studies such as those of Stein et al. (2003) and Berman et al. (1996) questions were tailored to leave out sexual abuse and domestic violence in order to be acceptable by the parents of the youth involved. A second reason for the lack of research is that few funding sources support children's mental health research (Perry et al., 1995).

Gender differences. Another group that is under-researched and receives relatively modest funding is rape survivors. Perry et al. (1995) reported that more research funding goes toward military veterans than rape survivors, although there are higher numbers of people who have experienced rape than have gone to war. This inherently has an impact on women though not all rape victims are female. Gender differences are not only apparent in the way that research is funded, but in the way that trauma is experienced, exhibited, and diagnosed.

Sexual assault survivors are statistically more likely to be female while physical assault has a higher propensity of occurrence among males. With regard to ethnicity, Black women and Black men are assaulted most frequently in each respective category (Alim et al., 2006). Whereas females generally present with internalizing symptoms such as, anxiety and depression, males tend to exude externalizing behaviors, such as physical altercations (Le Mieux & Coe, 1995). As Perry et al. (1995) explained focusing on external behavior is similar to the notion of "the potential homicide threatens; the potential suicide inconveniences" (p. 283). Flaherty, Weist, and Warner (1996) stated that students who display externalizing behaviors are likely to be referred, but internalizing is more often ignored which means more young women are neglected for treatment. This contributes to higher rates of diagnoses for males, although possible misdiagnoses of conduct disorders (Perry et al., 1995).

Misdiagnosis and co-morbidity. Other mental health scholars posited that clinicians can be biased in their assessments. Alim et al. (2006) asserted that under-diagnosis and misdiagnosis of psychiatric disorders are rampant in the Black community. The reaction of

therapists serving Black male war veterans to what therapists perceived as a hostile manner and general distrust of clinicians diverted them from diagnosing PTSD (Alim et al., 2006). This could possibly be due to the fact that Black men's mannerisms were attributed to their cultural affect instead of a mental health issue. Though racism is not officially recognized in diagnosis, according to Loo et al. (2001), if clinicians fail to evaluate race-related stressors, they could miss 20% of a patient's symptoms for PTSD and will likely not provide the proper analysis.

Empirical research (Bertram & Dartt, 2009; Weinstein, Staffelbach, & Biaggio, 2000) has shown that youth in urban areas are more likely to be diagnosed with Attention Deficit & Hyperactivity Disorder (ADHD) or conduct disorders than PTSD. This follows the trajectory of Freudian pathological thought, putting the blame on the individual. The revised 2000 version of the DSM-IV-R notes that symptoms of PTSD and ADHD resemble each other. For example, hyperactivity is usually associated with ADHD but can also be a form of hyper-arousal in PTSD where a person is overly anxious or hyper-vigilant, cautious of their surroundings as a self-protecting mechanism. The more internal symptoms of PTSD such as withdrawal, the inability to experience pleasure, and gloominess are comorbid with depression that may also cause confusion about the diagnosis.

Mild stress is typical and the release of cortisol in the human brain may produce results that heighten positive characteristics such as mental acumen, strength, and speed during a time of crisis (Jensen, 2005). Chronic traumatic stress as van der Kolk and McFarlane (1996) differentiate, particularly from recurring childhood sexual abuse, produces more deleterious effects on the brain. This type of stress releases higher levels of norepinephrine and may cause the hippocampus to shrink (Bremner, 2006). The hippocampus is the part of the brain responsible for "verbal declarative memory" (Bremner, 2006, p. 447). Van der Kolk, Roth, Pelcovitz, Sunday, and Spinazzola (2005) maintained that in the field trial for the DSM-IV, the patients who were primarily diagnosed with PTSD also met the criteria for disorders of extreme stress not otherwise specified (DESNOS), such as depression, anxiety, and somatization. Whealin and Slone (2007) describe DESNOS as another name for Complex PTSD. In addition, Herman (1992) discussed the prevalence of complex PTSD in youth who come from neighborhoods where trauma is ever-present. Van der Kolk (2002, p.144) claimed, "exposure is likely to be re-traumatizing because intense affects are likely to overwhelm the patient, just as they did at the time of the original trauma." In this sense, the sufferer is less likely to be "post" traumatic stress but functioning more in a constant state of trauma. In the Roth, Newman, Pelcovitz, van der Kolk, and Mandel's (1997) field trial for the DSM-IV, 92% of the people in the study who displayed Complex PTSD also met the criteria for PTSD. The results, however, did not persuade the DSM board to accept the diagnosis of Complex PTSD. Additionally, van der Kolk et al. (2005) cited multiple studies that found discrepancies ranging from 25 – 40% of people who fit the criteria for DESNOS but not PTSD. These scholars (van der Kolk et al., 2005) stated, "focusing on PTSD symptoms and, at best, relegating other posttraumatic sequelae to comorbidities may interfere with a comprehensive and effective treatment approach" (p.396).

PTSD effects memory by not only blocking traumatic events, but also the ability to hold on to other memories (van der Kolk & McFarlane, 1996). In attempting to forget trauma, children may take on different personas or try to escape their own bodies, while accruing a host of DESNOS as referenced in the DSM-IV-TR (van der Kolk et al., 2005). Shaw (2000) further stated that youth

... who have been exposed to ongoing and repeated stressors, such as victims of

physical and sexual abuse or the child victims of war, may present with significant personality trait disturbances, borderline personality, dissociative phenomena such as depersonalization and derealization, self-injurious and suicidal behavior, depression, externalizing behaviors, and substance abuse (p. 233).

However, for those who have experienced sexual trauma, it is as if the body will not allow for complete erasure of the traumatic memory as some of their behaviors may stagnate to the age of the occurrence (Shaw, 2000).

Given the aforementioned research, it is incumbent to go further in assessing children, as symptoms such as hyper-activity, learning disabilities, and childish behavior could be misread clues of a minor who has experienced severe trauma. Existing practices that have served various populations must be evaluated in order to determine best treatment practices.

PTSD Interventions

Mental health interventions for people who suffer from PTSD have come in the forms of medical, psychological, and art therapy. Medicine used to treat PTSD or diffuse the symptoms can be self-sought or doctor prescribed. Alim et al. (2006) illustrated the possible effectiveness of self-medication. These scholars pointed to a study that showed that women whose substance abuse increased had lower rates of PTSD. Jansen (1999) found that self-medication for PTSD in the form of ecstasy pills was successful in curbing symptoms, yet dependency became a factor. Shaw (2000) stated that experiencing trauma is a predictor for youth substance abuse. Carlson and Putnam (2004) reported that between 50 – 80% of the teens in the Northern California area, where this research study was conducted, used drugs and alcohol. The adult cannabis culture of the area and voter acceptance of marijuana, particularly for medicinal purposes, may contribute to a sense of affirmation with regard to experimenting with drugs. Self-medication is neither ideal nor ethical treatment for youth. Yet it must be kept in mind that white and Latino adolescents abuse drugs at higher rates while Black youth are incarcerated for drug-related offenses at more elevated rates (Alexander, 2010).

Selective serotonin reuptake inhibitors, Sertraline and Paroxetine, are the only medications approved by the Federal Drug Administration for PTSD, though there are several other medical drugs available (Jeffereys, 2009). Typically these drugs are used to control moods, anxiety, and other bodily functions affected by trauma, however, another study documented that some pills can help one to forget (Nader et al., 2000). Nader et al. (2000) discovered that PTSD had a severe effect on survivors of trauma due to the memory of the trauma. Based on previous studies, these researchers found that subjects were able to shift the feelings of fear and anxiety generated from traumatic experiences by using medications to block the part of the brain that guards negative emotions. Scholars have established that using a prescription form of the street drug ecstasy, 3,4-Methylenedioxymethamphetamine (Doblin, 2002) or another drug propranolol (Brunet et al., 2006) combined with psychotherapy could have an effect on forgetting the pain of traumatic events. Because medications can cause addiction and must be used in conjunction with psychotherapy, exclusive medical treatment is not commonly recommended for patients who deal with PTSD (De Angelis, 2008).

In addition to medical therapy, typically three sub-types of psychotherapy have had indications of success in treating PTSD. These are exposure therapy, eye movement

desensitization and reprocessing, and cognitive behavioral therapy (CBT). Exposure therapy involves bringing a person who suffers from PTSD to confront stressors. An example would be a war veteran playing a realistic video game that allows the soldier to recapitulate and react differently in a situation that has caused considerable trauma (Bremner, 2006; Collie, 2006). Eye movement desensitization and reprocessing is another type of psychotherapy that involves a therapist guiding the client to reframe memories by shifting their eyes from left to right while recounting a traumatic event (Justman, 2011).

CBT is gaining increasing attention for helping people who have PTSD because it makes connections between thoughts, feelings, and behaviors (Amaya-Jackson et al., 2003; Jaycox, 2004; Hamblen & Barnett, 2010). Therapists use this method to assist patients in talking out their thinking, emotions, and actions and ask questions that allow them the opportunity to process the options of their reactions. Through this therapy patients are directed to find their triggers or causes for reaction. CBT can assist people who suffer from a plethora of mental health disorders in developing an asset-based perspective. Along these lines, is a form of healing that the military is beginning to use called post-traumatic growth, where veterans are identifying traumatic experiences in their lives as pivotal moments of inner-strength (Calhoun & Tedeschi, 2004).

Creative options for dealing with traumatic stressors such as art, music, theater, dance, and journaling provide therapy with a more artistic approach (Collie et al., 2006). Often writing tasks are difficult because of the part of the brain that is affected by PTSD, therefore, Collie et al. have suggested art therapy as the most accessible form (2006). Like the interventions that involved medicine and psychological treatment mentioned before, art can also be used in conjunction with other forms. Scholars who researched art therapy among war veterans (Collie et al., 2006) concluded that group treatments were most effective.

Though the majority of the interventions mentioned have served military personnel, the number of youth treated is not evident. Flaherty et al. (1996) claimed that 80% of youth presenting with mental health issues have not had prior treatment. Furthermore, between 20-38% of all adolescents suffer from mental health disorders yet one-third of those youth receive treatment (Han & Weiss, 2005). In the following sections, programs that serve adolescents will be discussed. The aforementioned mental health interventions in the forms of medical, psychological, and art therapy serve youth in settings both outside of school, such as in the form of residential treatment programs, and inside schools.

Residential treatment programs (RTPs). One method of intervention involves the removal of a child from a traumatizing environment. For some children, this means removal from their home and placement with a different relative or their entrance into the foster care system, where the threat of further trauma is a reality. Another alternative for severely traumatized youth, typically males of color, is to become a ward of the state and be hospitalized in a public residential treatment program (RTP) (Behrens & Satterfield, 2011). These programs receive public money and referrals from public entities, such as child protective services and juvenile detention facilities, yet have lost significant funding. Public RTPs in Northern California have the capacity to serve a limited 271 patients for a population of 883,777 youth (Carlson & Putnam, 2004). In addition to inadequate space, Carlson & Putnam (2004) showed that the average time needed for youth housed in public RTPs to achieve a functioning demeanor was approximately three years.

Though public RTPs claim to serve more youth of color, Martin and Grubb (1990) found

that white juvenile offenders received mental health treatment at significantly higher rates than their Black counterparts:

There is evidence that Black juvenile delinquents have received biased differential treatment in mental health care systems. Research shows that the White juvenile offender often is assessed as having a psychological problem while the Black juvenile offender is more often seen as exhibiting behavior characteristic of his culture and more often than not receives inadequate psychological counseling (p. 259).

This study followed the trajectory put forth by legal scholar Ross (1990), which proclaimed that laws have historically protected white innocence and promoted Black abstraction or dehumanization. The discrepancies in mental health treatment between Black and white youth are apparent yet even more blatant is the care with which a more privileged white miscreant's future is preserved.

For affluent white children, trauma, substance abuse, and conduct disorders do not pose obstacles to academic support, foreign language study abroad, or going to college. Private RTPs in the form of therapeutic boarding schools and wilderness programs have become a growing industry. Costs of private RTPs are estimated between \$5,000 and \$12,000 per month with health insurance typically covering a portion of the costs. These programs allow youth to escape from the surroundings where they experienced trauma or exhibited behavioral problems. Typically the duration of services runs for a few months to a year. Youth receive counseling in a secluded environment that supports adolescents in becoming less chemically dependent and more college-ready. For some, entrance to the program may be coerced, meaning their parents or guardians arranged for their children to be involuntarily removed from their home and placed in a program (Hardy, 2011). Tucker, Zelov, and Young (2011) conducted a four-year study on 23 outdoor behavioral healthcare and RTPs certified by the National Association of Therapeutic Schools and Programs. Their study found that 66% of the participants and their parents self-reported clinically significant positive changes. The typical client in private RTPs was a "white, upper middle- to upper class, 16-year-old male or female with prior treatment failures who was functioning below average academically and had multiple psycho-social problems" (Behrens & Satterfield, 2011, p. 40). The most common problems exhibited amongst these teenagers were disruptive behavior, substance use, and mood disorders. Many of these programs engage youth with various activities allowing them to participate in art therapy, learn survival skills, and work with horses (Tucker et al., 2011).

Some private residential treatment programs are located in exotic milieus outside of the U.S. In addition to mental health care these programs offer participants résumé boosting opportunities such as being able to claim foreign language study. In this way, privileged youth are able to maintain status even while seeking rehabilitation for substance abuse or mental health disorders.

Mental health programs inside schools. While Columbine High School of Littleton, Colorado, amplified another example of differentiated treatment for privileged youth (Duncan-Andrade, 2010), it additionally presented an alternative form of mental health that meets the youth where they are. Unlike RTPs, mental health programs in schools bring therapeutic services to teens immersed in the same setting where they experienced trauma, in some instances this can be extreme while in others, trauma can be on-going.

On April 20, 1999, two Columbine students orchestrated a shooting spree murdering 12 peers and a teacher and injuring 24 others before taking their own lives. The event followed Newman, Fox, Roth, Mehta, & Harding's (2004) definition of a "rampage shooting": white, suburban, male perpetrators unleashing "attacks on whole institutions—schools, teenage pecking order, or communities" (p.15). School psychologists and other mental health professionals flocked to provide what Pynoos & Nader (1988) referred to as "psychological first aid" for the entire school. The Jefferson County School District website shows that Columbine serves an upper-middle class, predominately white, suburban population of approximately 2,000 students. More violence continued to disrupt the Littleton community as the suicides of the mother of one of the paralyzed survivors of the shooting and a star basketball player followed a year later.

Columbine received an outpour of community support. In May of 2000, Project HOPE (Healing of People Everywhere), collected donations in order to redesign and beautify the school library where the majority of killings took place, complete with an atrium and several murals. In September 2007, the Columbine Memorial Foundation also established the Columbine Memorial at a nearby wildlife reserve to honor the lives lost in the shooting (Kass, 2008). Memories of the deceased, written by family members are etched in stone on the Wall of Healing (Fast, 2003).

The thoughtfulness of the healing process was not only evident in the psychotherapeutic care and the transformation of the school structure but the effect on law and education nationwide. The way that the police officers handled the shooting in waiting for Special Weapons and Tactics (SWAT) teams to arrive, called into question law enforcement procedures (Mell & Sztajnkrzyer, 2005). Toppo and Elias (2009) reported that post-Columbine "38 states now have anti-bullying laws, though experts disagree on whether most states' laws are effective, and only seven require schools to tell parents that their child is being bullied" (para. 16). Bulach (2002) emphasized character education as a way to promote anti-bullying and common school values. A continuing debate surrounds the topic of death education where students openly discuss death, visit funeral homes, and write their obituaries. Conservative challengers have followed a paradigm that sex education promotes sex, and death education promotes death (McLure, 1974). Though Columbine no longer espouses death education, business students won a grant to promote suicide prevention on their campus (Goldberg, 2012).

The most obvious difference between Columbine and Tubman is the gaping disparity in resources, yet they are both public schools where students who have experienced trauma are surrounded by the environment where their stressors originated. Though the two school communities have experienced violence, Columbine's traumatic event was a rare occurrence that received national attention, whereas Tubman invariably, yet silently endures pain. The perpetrators at Columbine were high-performing students with prior arrests. Public, urban continuation schools, like Tubman, serve student populations whom comprehensive schools have pushed out for misconduct and under-performance in their classes. As underachievement and acting out can be linked to symptoms of PTSD (see Figure 1), this suggests that any large-scale trauma experienced in the alternative school community impacts an entire student body that could be suffering from previous mental health disorders.

Scholars Ozer (2005) and Shaw (1997) suggested that schools, particularly in areas where students are exposed to high levels of violence, could be ideal locations to identify and provide psychological services to youth who are often underserved by mental health professionals. Pynoos and Nader (1988) asserted that responsibilities for schools include compiling the resources in an asset-based framework; developing a strategy for intervention; and creating, training, and deploying intervention teams.

Although school factors do not appear to fully protect youth against negative psychological outcomes when exposed to high levels of violence, schools can provide sufficient opportunities for intervention, particularly in urban communities with high rates of community violence. Ozer (2005) reported on a study that showed that school-connected teenagers reported less risky behavior, emotional anxiety, and aggression. These students also viewed their school as a space of “happiness, belonging, safety, closeness, and fair treatment by teachers” (p. 170). Ozer’s study applied this research to youth who reside in urban communities with high rates of violence. The study’s findings indicated that compared to students who did not feel connected to their school; students who reported greater teacher support and identification with school also reported higher hope and fewer psychological symptoms (Ozer, 2005). Feeling connected to school was linked to student satisfaction with developing healthy, positive relationships with a school’s community, performing well academically, and thriving socially. Students who enjoyed going to school had lower truancy rates because presence at school meant less risky behavior during school time and a greater chance of espousing the school’s values (Ozer, 2005).

Original school mental health programs were designed with the hope of intervening in situations such as high-risk behavior regarding sex, drugs, and alcohol; adolescent deaths; and dropout rates (Flaherty et al., 1996). Of people who opted for the General Equivalency Diploma (GED), 45% reported mental health concerns as reasons for dropping out of high school (Koller & Bertel, 2006). Half of all students with emotional disorders drop out of high school expressing a lack of social support from peers and teachers (Han & Weiss, 2005).

A significant result of the introduction of mental health clinicians to school programs was a decrease in special education referrals (Flaherty et al., 1996). This outcome is especially notable for two reasons. First, Black males are disproportionately assigned to special education classes (Ferguson, 2001; Gregory, Skiba & Noguera, 2005). Secondly, the attrition rate for special education teachers due to burnout is higher than for other teachers (Fore, Martin, & Bender, 2002).

The attempt to provide mental health in schools has traditionally become an add-on program instead of an integral part of schools and in previous mental health studies (McIntyre, 2000; Ozer, 2005; Richters & Martínez, 1993; Stein et al., 2003), teachers played a centrifugal role in the healing process. One particular study involved a curriculum Cognitive-Behavioral Interventions for Trauma in Schools designed by clinical psychologist Jaycox (2004) for students who had experienced PTSD. This program covered the gamut from experiencing violence to natural disasters and was to be implemented by licensed mental health clinicians (Stein et al., 2003). This study took place at two schools in a predominately Latino, Los Angeles neighborhood where the majority of youth were exposed to high levels of community violence. The team of therapists introduced cognitive behavioral therapy (CBT) to the students. In this study the teachers were not trained in CBT but were asked to disclose any changes in student behavior along with the reports of parents and students to determine the success of the interventions. At one school the teachers reported no significant results and at the other site they reported slightly significant results. One parent group reported an increase in symptoms at three months and then a decline in psychosocial dysfunction at six months, while the other group reported a continuing decrease in psychosocial dysfunction at both the three and six month markers. In both groups the students’ self-reports showed decreases in their symptoms of PTSD and depression. The researchers admitted, “the Teacher-Child Rating Scale subscales we used may not be as sensitive to clinical improvement as are the child and parent measures” (2003, p.607). Teachers may also be more attuned to externalized, disruptive behaviors in their

classroom and less aware of internalized symptoms of anxiety and depression that a child faces.

Other challenges with this study were that clinicians tried to fit in with the pre-determined school schedule instead of being an integrated part of the school, therefore their interventions were not consistent. In other words, they had to find non-academic times to work with the students during the day and if they had to interfere during academic times they had to make sure that students would vary in the classes they would miss.

Of the team of mental health scholars, the school psychologist was the only one directly connected to the middle school. This school affiliate intervened in the surveys, requesting that the researchers omit questions pertaining to domestic violence and suicide. These questions are significant because parents might have potentially declined to let their children participate and if students reported affirmative answers, then school authorities would be required by law to contact child protective services. This study took into account that minors are a vulnerable population yet in conducting intervention research on children not all of the youth's mental health needs could be served. A full-fledged mental health program located at a school would not face the same challenges with reference to qualifying services for students.

Mental health training for teachers. Given the importance of educational settings in youth psychosocial development, it is important to examine the potential ameliorative effects of teacher support for youth exposed to violence. However, very few programs attempt to reach teachers before they go into the classroom. Currently, preservice teachers tend to receive basic psychology courses that pay more attention to theory than practice, specifically ignoring "learning constructs related to mental health" (Koller & Bertel, 2006, p. 201). In-depth mental health training is not available in regular or special education programs at a level that allows teachers to attain proficiency. In the words of Koller & Bertel (2006, p. 204), "...traditional preservice programs focus on pathology (i.e., the identification of deficits or functional limitations to determine eligibility for placement in special education and/or DSM-IV diagnosis) rather than requiring competence in evidence-based practices to prevent pathology."

Koller, a professor at the University of Missouri, Columbia, works with a program for preservice teachers, which deals with how to create an affirming classroom and school environments for all students that emphasize healthy psychological development. In addition, they discuss ways to identify warning signs displayed by children who could be suffering from possible or current mental health issues (Koller & Bertel, 2006).

While endeavors to train preservice teachers are laudable, there is concurrently a dearth of communication of these issues to teachers who presently work with children suffering from emotional disorders. Perhaps a reason for historically leaving teachers out of the therapeutic endeavors of mental health training is due to not wanting to overburden teachers with information. Yet, Koller and Bertel (2006) shared from their study that, "all teachers both first-year graduates and experienced mentors...unanimously agreed that knowledge of mental health needs of youth are critically important for all teachers to experience success in today's classroom" (p. 202). Additionally, teachers at all levels reported not having the tools to recognize or intervene in mental health issues (Koller & Bertel, 2006).

School intervention programs must be connected to the school population and its psychological needs. Pynoos and Nader (1988) underscored the importance of getting treatment for the adults in a school community, as healthy adults work more effectively with their students. Educators rated their own mental health as a major concern, yet they felt unprepared to "recognize or manage the signs and symptoms of their own stress and burnout" (Koller & Bertel,

2006). Isolation and not feeling supported by students, colleagues, administrators, and parents put teachers at a high risk for burnout (Koller & Bertel, 2006). However, further teacher burnout research determined that not receiving mental health information increased teacher stress. In Lens and de Jesus' (1999) study on teacher burnout, 20% of the teachers said that they experienced a decline in their personal resources, "due to age, health, and lack of training in, for example, the psychology of today's adolescents" (p.195).

Though teachers believe that mental health issues are relevant to satisfactory performance in schools, budgetary constraints make it difficult to implement adequate programs (Adelman & Taylor, 1999; Flaherty et al., 1996; Weston, Anderson-Butcher, & Burke (2008). As Han and Weiss (2005) explained, funding presents a barrier in placing mental health services in schools, while No Child Left Behind states that failure to make Annual Yearly Progress (AYP) places schools in jeopardy of losing funding. AYP measures academic achievement therefore, schools generally prioritize academics over mental health.

Flaherty et al. (1996) brought awareness to the Education for All, Handicapped Children Act of 1975 which mandated that schools provide appropriate educational programming for all children with disabilities in the least restrictive setting possible. Han and Weiss (2005) additionally made a case for diagnosing emotionally disturbed students and disaggregating their scores from mainstream students in order to preserve AYP scores. This notion still does not address the need for extra funding for mental health therapists in schools or training for teachers.

Han and Weiss (2005) focused on outcomes. These scholars said that effective programs "are associated with strong satisfaction by diverse stakeholders' groups, improvement in student emotional and behavioral functioning, and improvements in school outcomes." Some examples of these outcomes are a positive environment that allows students to make connections to school, higher attendance, less referrals to special education, less disciplinary referrals, and less bullying and violence. Mental health clinicians who work in schools should be able to help teachers meet developmentally and culturally appropriate learning needs of students who suffer from mental health disorders.

Although diagnosis of mental health disorders is the role of the clinician, teachers can play a part in referring students to get help and creating classroom environments that facilitate a healthy learning environment (Rowe, 2010). Klem and Connell (2004) outlined what positive student-teacher relationships entail. Klem and Connell (2004) further stated that students need an adult community that cares and respects them. Youth also need teachers to provide a structured environment in which they are allowed to make decisions and assignments that bear real-life significance. Expectations about conduct should be fair and clear while consequences should be consistent and predictable (Klem & Connell, 2004). Rowe (2010) asserted, "criticism and punishment reinforce the low self-esteem and negative view that these students have" (p.192). Rowe further emphasized that teachers should re-think punishment for fights and emotional outbursts. He also asserted that teachers learning about PTSD could potentially make a tremendous impact not only on their students' behavior but their achievement as well. Mental health training could lead to modifications in academic expectations, prioritizing the core subjects to prevent students from falling behind academically.

Rowe (2010) noted that teachers can be active in making the school a safe place, open to discuss trauma voluntarily, though teachers should not be over-ambitious about getting children to talk. Part of the role of a teacher is acting in the capacity of a mandated reporter. He suggested that in reporting to outside agencies, it is best to work with a team of colleagues and to be up front with parents in a nonjudgmental way.

Koller and Bertel (2006) recommended treatments that build off of strengths, involve the community, and promote cultural awareness. Rowe (2010) stressed the importance of qualitative praise that involves looking at student strengths, providing, for example, details about appreciating the way a student wrote a particular line, instead of generalized praise such as “You are a wonderful writer.” Rowe said that generalized praise can make students who are in need of support feel like failures if they cannot live up to the praise each time. Jensen and Shaw’s (1993) research on child soldiers showed that youth who had experienced severe trauma positively associated with helping roles and wanted to work toward creating a violence-free world. This finding along with findings from McIntyre (2000) may have implications for youth who have experienced community violence seeking opportunities to participate in social justice movements and mentoring.

The travail ahead for teachers working with traumatized students may be difficult, as teachers will need to navigate their own emotions and beliefs. Hargreaves (2000) applied Hochschild’s (1983) notion of emotional labor of giving up one’s outward appearance of negative feelings for the sake of reaping the positive rewards of one’s work, to teaching. She stated,

In our own work, we have found that teachers largely enjoy the emotional labor of working with students because this meets their core classroom purposes in circumstances that they largely control. Here, when they mask and manage emotions around students, teachers say, they do so for the students' benefit (p. 815).

Along these lines, Delpit (1995) stated, “We all interpret behaviors, information, and situations through our own cultural lenses; these lenses operate involuntarily, below the level of conscious awareness, making it seem that our own view is simply ‘the way it is’” (p. 151).

Because the teaching professional body is disproportionately white, close to 90%, teacher educator Darling-Hammond (2000), stressed the importance of “boundary crossing” for teachers—seeing outside of their personal perspectives and building relationships with students. Weiner (2003) asserted, “When cultural diversity and race are not put on the table by the school but are perceived by students to be salient factors that influence their identity and school success, teachers who are culturally different from their students have a greater challenge in creating a trusting classroom environment” (p. 305). Taking into account the integral link between culture and psychotherapy, Astor et al. (1996) recognized that teacher inservice workshops should address cultural competency as well as mental health.

Black Cultural Connections to Mental Health and Education

Teachers who cannot accept institutional racism and structural inequities as realities for their students and put cultural blame on students’ shortcomings are typically less successful at teaching Black students (Foster, 1993). Effective teachers of Black students are familiar with cultural norms and have an understanding of their social, historical, economic, and political relationships of the Black community to the larger society. Teacher educators like Ladson-Billings (1994) and Foster (1993) contended that teachers are not just educating their student’s academically but nurturing their character development to be able to achieve success in the larger society and navigate their own communities. Na’sir and Cooks (2009) asserted that these

mentoring relationships served “as a kind of gateway to material and ideational resources (and thus as a gateway to learning) (p.57).”

Similarly to educators acknowledging the impacts of racism on education, many practicing therapists have agreed that racism is a contributing factor to mental health disorders even though the DSM-IV-TR does not (Alim et al., 2006; Butts, 2002; Hardy & Laszloffy, 2005; Loo, 2001). Several Black theorists like Akbar (1980), De Gruy (2005), Nobles (1976), and T’Shaka (2004) provided evidence that substantiates that mental health issues in the Black community have a foundation in chattel slavery. As descendants of enslaved ancestors, Black people suffer from generational mental health issues and are less likely to seek treatment. A strong, cultural distrust of researchers and physicians brought on by historical, unethical testing conducted on enslaved Africans and such trials as the Tuskegee Syphilis Experiment, have hindered Black people’s participation in health care services and research studies (Washington, 2006). Alim et al. (2006) cited a study where Black people regardless of socio-economic status had a higher measure of distrust for health care providers than whites. High therapy dropout rates among veterans of color suggest that they have not felt welcomed in sessions and Loo (2001) expressed the need for more outreach to attract more clinicians of color. Alim et al. (2006) corroborated this claim highlighting a study that showed how Black clinicians made a difference for Black war veterans, providing a comfortable space to openly express their experiences with racial discrimination.

Some psychologists and mental health professionals (Alim et al., 2006; Hardy & Laszloffy, 2005) have connected the stressors of urban life for Black people to PTSD as they provide clinical support. Culturally specific treatment for Black people capitalizes on strong ethnic identity, connections to Africa, and a legacy of perseverance and endurance (Harden & Nzinga-Johnson, 2006). Alim et al. (2006) shared a comparison study that showed that culturally sensitive treatment elicited improvement for traumatized Black girls age 8-13 in comparison to a control group that did not have access to that particular intervention.

Other mental health therapists have found alternative ways to reach the Black community that go beyond therapy sessions. Black psychologists and university professors Akbar and De Gruy have worked within the spiritual realms among Black people through Islam and Christianity. They have each developed an agenda for healing in the Black community that has been outreached to religious communities. According to Harden & Nzinga-Johnson (2006), 81% of the Black population reports having a religious affiliation. Akbar, who has presented mainly in the Black Muslim community, claims (1980) that many Black people have internalized their oppressor’s hate of black people as truths and calls stepping out of one’s skin to inhabit ideologies of white supremacy the “alien disorder” (p.165).

De Gruy’s (2005) terminology, Post-Traumatic Slave Syndrome, clearly delineates how a history of chattel slavery has affected Black people’s mental health today. Instead of focusing on making an addendum to the DSM-V definition, De Gruy (2005) has developed an entire curriculum around Black people creating study groups to analyze their own behaviors and thought processes. Though De Gruy is of the Ba’hai faith, she has extensively made appearances in Black churches. Religious institutions provide a lens for expanding on notions of spaces that provide therapeutic healing.

As seen in previous sections, mental health interventions, such as different types of therapy and RTPs that remove students from their environment, have by and large served white youth. Noting that the underlying factor in determining how and if Black youth receive treatment is the cultural aspect, public schools are a prime location for mental health

interventions because there has been and continues to be increased recognition of social inequities. Therefore, it is crucial to find methods that are applicable to all students in the process of outreaching to Black students.

Mental health therapists (Carrión, 2006; van der Kolk, 2003) and educators (Duncan-Andrade & Morrell, 2005; Duncan-Andrade & Morrell, 2008; Jackson, 2011; Mann, 2000; Valenzuela, 1999) have emphasized the importance of relationships when working with youth who have suffered from external stressors. Although brains are naturally hard wired to connect with others, social and emotional intelligence is not generally prioritized in schools (Hymel, Schonert-Reichl, & Miller, 2006; Jensen, 2005).

Veteran educator Mann (2000) looked at how classroom practices can engage or in her words “touch the spirit” (p. 1) of all students, particularly Black youth. She developed her educational framework from black African cultural aspects of spirituality, resilience, humanism, communalism, orality and verbal expressiveness, realness, unique style, emotional vitality, and musicality, which significantly correlate to research on the brain. From these guiding principles, Mann concluded that teaching strategies that employ recitation, repetition, relationships, rituals, and rhythm are vital for students.

Interestingly, trauma specialist van der Kolk (2003) suggested interventions that align with Mann’s classroom recommendations. Van der Kolk (2003) asserted that children who have been seriously traumatized need safety and predictability, clear humanizing communication, opportunities to seek mastery and pleasure, strong relationships, and rhythmical attunement with one’s surroundings. Knowing on whom to depend and on whom to model oneself is also crucial for a child who suffers from trauma. The cultural and cognitive connections that scholars have revealed make prioritizing mental health in education a viable strategy for teachers who serve traumatized Black youth.

Conclusion

Learning about PTSD is critical to understanding issues for students in urban schools. However, as this study seeks to connect mental health to the field of education, there is still a continuing debate within the academic circles of psychology and psychiatry about how to define and diagnose trauma-related illnesses.

Similarly to the development of the diagnosis of PTSD, interventions have largely disregarded race but identifying and treating children and adolescents with symptoms has generally become accepted. The literature reviewed reveals a plethora of existing programs that provided mental health interventions to youth, although the majority of these forms of treatment have not served Black youth. However, treatments in the forms of medicine, psychotherapy, and art have been used to diffuse symptoms of PTSD. Some programs for youth operated in the wilderness, others provided residential therapy stateside and abroad, while others could be found at schools. Of the school programs, often teachers were not involved in the healing process of the students. Mental health therapy was generally left to clinicians but implications are that teacher involvement would be ideal.

A few teacher educators have gone beyond the typical child psychology course to offer mental health training to preservice teachers, while educators currently in the field have shown in surveys that mental health is a topic of interest. Though the need for interventions in schools is evident and there is growing support from educational communities, many teachers may be left out of therapeutic training due to the federal dictates that link school funding to academic testing.

However, focusing solely on school achievement ignores core reasons for low academic performance, particularly for Black students, an abandoned population in the realm of therapeutic treatment for trauma.

Lives lost, high incarceration rates, and increasing risk factors call for immediate action. As successful educators acknowledge social inequities, it becomes evident that mental health interventions could have an ameliorative impact on both the behavior and academics of Black students. Providing emotional support at educational institutions can be seen as a strategy for Black youth survival.

Chapter Three

The New Underground Railroad: A Case Study of Tubman High School

“I freed 1,000 slaves.
I could have freed 1,000 more if they had known they were slaves.”

-Harriet Tubman

“Our work is the new underground railroad.”

-Khalil, Tubman High School Teacher

After five shootings in two school years and a mental health survey’s results showing that 99% of the students displayed symptoms of post-traumatic stress disorder (PTSD), there was no district or community uproar demanding help for the youth of Tubman High School. There were, however, several factors that supported the bridge between mental health and education at this particular school. A mental health clinic secured the funding for an on-campus, licensed therapist for two years. In addition to serving students, the selected clinician offered professional development (PD) to the teaching staff. Tubman’s teachers, recognizing that their students’ emotional needs affected their academics, voted to take on mental health training for their PD. This approach differed from the other schools in their district. The comprehensive high schools, as in many urban districts, took on the issue of closing the achievement gap.

Research Design

This dissertation is an exploratory case study (Yin, 2003) that addressed the question: How does professional development on post-traumatic stress disorder affect how teachers of Black students re-conceptualize and implement their teaching practices? This study followed eight focal Tubman teachers through a series of professional development sessions during the 2010-2011 academic year that focused on PTSD. While two of the three phases of this PD intervention were led by a mental health therapist, the final phase was led by a teacher leader who was also a focal teacher. The PD sessions took place in August, prior to the first day of school; during October, the second month of the fall semester; and in March, the second month of the spring semester. This research has followed the eight teachers through their professional development and into their classrooms to determine the impact of this mental health training on how they re-conceptualized and implemented instruction in this school setting.

Site. Tubman is a pseudonym used for a public, urban, continuation high school located in a Northern California school district. Continuation high schools are alternative secondary institutions to which students are involuntarily assigned as a result of severe discipline or achievement problems at the district’s larger comprehensive high schools. For a number of reasons, Tubman High has become a concentrated space of youth who may have been traumatized by high levels of violence and crime, yet have had to continue living in these stressful environments.

Tubman has been characterized in local and public discourse as “dumping grounds,” “pre-prison,” and “a place for bad kids” (LaBarre, 2006, p.1). However, a closer look at the school in relation to its community and the school district shows that these characterizations need to be understood in the larger context of positive work being done by the teachers and administrators at the school. Mahiri (2011) described the faculty’s work as showing increasing success despite the extreme challenges of this educational environment.

At Tubman, 100% of the students qualify for a free lunch. The school serves a 75% African-American and 24% Latino student body. One percent of the students declined to disclose their ethnicity. At the comprehensive high schools, the student population comprises 24% African-Americans and 19% Latinos. Generally, twice as many young men as young women register at the continuation school. During the time of this research, there were 106 male and 57 female students. Students enroll and exit for various reasons keeping Tubman’s population in constant flux. Behavioral issues, poor attendance, or low achievement at the comprehensive high school are the typical reasons students are transferred to Tubman (Noguera & Wing, 2006). However, because Tubman can legally serve 175 students, and transfers do not fill all slots, other students choose to attend Tubman because they prefer the smaller, attentive learning environment. The disproportionate number of deaths of students in this relatively small school has a traumatic effect on both students and staff. Consequently, the high number of Black students who fit the profile for being likely to have PTSD along with teachers who chose to participate in PD on PTSD make this site a prime location for this study.

There were also many challenges to doing research in this site. For example, there were often spotty records on these students from their past institutions. So it was difficult to determine the best academic placements and support services for them to receive. There were also challenges based on the “rolling enrollment” of students coming and leaving at any time during the school year. This could be due to reasons such as students returning to the comprehensive high school, moving, joining Job Corps, becoming incarcerated, or dropping out of school.

The well-maintained physical site of the school includes a small library, an administrative office, a computer lab, and ten classrooms. Five classrooms with ample windows line each side of a grassy courtyard. Next to each classroom door, a colorful collage of tiles displays the original artwork of students. A gymnasium dually serves as a cafeteria with a small kitchen attached. However, Tubman occupies a precarious position in its school district. Though the principal has made the district administration aware of student needs, his staff must build networks and seek out independent funding in order to provide students with both academic, social, and emotional resources.

Participants. Along with the student population and lack of resources, this teaching environment presents many challenges. Tubman teachers must be well versed in differentiated learning because the students have a wide variety of educational experiences. From being held back a grade, to frequently switching schools, from special education to advanced placement, from working toward literacy to reading college level material, students’ academic skills range significantly. Yet, there have been many celebratory milestones at Tubman such as significantly improving student academic achievement and completion of graduation requirements. A number of Tubman students are the first in their families to go to a university after graduating from high school.

Tubman has a total of twelve teachers and one principal. Although all twelve teachers voluntarily participated in the professional development, and the principal attended the first and

second sessions, I selected only the eight returning, full-time teachers as focal participants. These focal teachers had an established history with the school community and due to their full-time status were more available to participate in the research. The qualifying educators represented a wide range of disciplines from the humanities and language arts, to the sciences and math, to special education. Six of the focal teachers are Black, one is Korean American, and one is white. They range in ages between 23 and 48. Each of the focal teachers has been given a pseudonym:

- Tammy, the women's studies and physical education teacher, had been at Tubman for five and a half years at the time of the study. She is a 46-year-old Black woman who is also a wife and the mother of two children. She is a full-time teacher, however, she also has several additional responsibilities like academic counseling and coordinating the after school program. Tubman was her first teaching placement.
- Nicole, age 34, had been teaching at Tubman for four years when the study began. She is Black, married, and the mother of two children. She was a social studies teacher, but has also worked as the librarian for the school. Nicole taught at Tubman during her credential program and has continued to work there even during the summers.
- Khalil, age 48, has been a science teacher at the school for five years. Khalil is Black, married, a father of two, and he graduated from a comprehensive high school in the same district as Tubman. Originally, he started out as a substitute teacher at one of the comprehensive high schools. After finishing a credential program, he chose to teach at Tubman.
- Marvin is a math teacher who is Black. He was 31 years old, married, and had been teaching at the school for three years at the time of the study. Prior to Tubman, he taught in a nearby district with a similar population of students for two years.
- Frank, a Black male teacher, was in a credentialing program and had been at Tubman for two years. He was 23 years old at the time of the study, single, and taught social studies.
- Emily is Korean American. She was 34 years old at the time of the study, married, and had taught English at Tubman for five years. Tubman was Emily's first teaching job though not her first choice.
- Delphine is a white woman. She was 38 years old at the time of the study, and she had been teaching special education at Tubman for five years. Delphine and her partner are the mothers of two. Tubman is the third school at which she has taught, and she prefers the size of Tubman to the other schools.
- Summiyah, the ethnic studies teacher, was 37 years old. She had been at Tubman for four years. Summiyah is Black and the mother of two children. Like Khalil, she attended the local comprehensive high school, but she also attended a small, alternative school similar to Tubman. She previously taught for two years at a high school in a district close by with a population that closely resembled Tubman students. She was in her fourth year at Tubman at the time of this study. Summiyyah was a teacher leader on Tubman's campus. She mentored her colleagues through the Beginning Teacher Support and Assessment program. She also volunteered her class for a group mental health intervention where Summiyah learned about cognitive behavioral therapy. She achieved a certification that allowed her to share basic CBT strategies with her colleagues.
- The mental health therapist who conducted the majority of the professional development training sessions is Fatima, a licensed marital and family therapist. At the time of the

study, she was 40 years old. Fatima is a Black woman, married with three children, and this was her second year at Tubman but her 19th year working with youth from the district. Before becoming a licensed therapist, she had previously worked in the capacity of an academic counselor for one of the comprehensive high schools serving students who were low-income, first generation students, meaning their parents had not been to college. The year before this study took place, Fatima informally surveyed students and found that 99% of them had experienced some form of trauma. This led her to develop a class that focused on interventions with students. Throughout the school year of this study, Fatima dedicated her time to the implementation of cognitive behavioral therapy, which included teacher sessions and student classes.

Fatima was unlike the other clinicians who provided therapy at Tubman previously, not only because of her shared common ancestry with the majority of Tubman's students and staff, but her dedication to Tubman. Though Fatima was brought in part-time, she valued the Tubman community and often volunteered overtime hours to meet with staff and students. Her commitment was evident in the way that she assessed students, creatively put interventions into motion, and brought additional resources to the school. Fatima's office hours, though part-time, made her available during the day, which allowed her to meet with students at an accessible time through referrals from teachers.

Data Collection Procedures

Data was collected by 11 hours of videotaped PD sessions, 18 hours of audiotaped interviews, surveys completed at the end of each PD session, and 32 hours of classroom observations. These research times signal the commitment of the teachers as they made themselves available for observations, interviews, and surveys. There were three phases of professional development. The first session was three hours and took place in August before the school year officially began. The second session was an extended six-hour session that took place in October of the fall semester. The third and final PD training was a two-hour session held in March during the spring semester. Surveys, classroom observations, field notes, and interviews were conducted after each phase. I additionally looked at archival data in the form of newspaper articles about Tubman prior to beginning my research. This data established the presence of trauma in the school community and corroborated the notion that Tubman rarely received laudatory press. Finally, teachers shared artifacts of their planning and of student work that I was able to photocopy.

I functioned as a participant observer as I collected data from a range of sources. I set up a stationary video recorder at the PD sessions, with the permission of the participating teachers, in order to capture the full picture of what took place in the sessions. Videotaping was preferred due to the large group setting because the video images helped to differentiate the speakers.

After each phase of professional development, I employed the data collection tools of surveys, classroom observations, and field notes. The surveys helped to gauge the learning of teachers from the sessions that they attended. As I observed teachers' classrooms, I also volunteered to help students when the occasion arose during work sessions. I took copious field notes for thick descriptions of the PD planning sessions, the phases of the PD series, and the activities in teachers' classrooms. After phases one and two of the PD, I conducted audiotaped interviews with each focal teacher. During phase three, I interviewed participants as a focus

group. After all three phases of PD, I interviewed Fatima to get her perspective on the PD sessions.

Data Analysis Procedures

A constant comparative analysis was used to code and analyze all of the data sources. This approach was used to surface patterns or themes that could be combined to evidence findings that reflected changing perceptions and/or practices connected to what was learned in the PD sessions. Thus, initial codes were linked to instances or ways that the teachers re-conceptualized their teaching practices, on the one hand, or actually changed their teaching practices, on the other, in connection with information and/or strategies they received in the sequence of PD sessions. Since the PD took place in three phases, the classroom observations took place between the sessions while the teacher interviews and surveys were conducted at the end of each session.

Additionally, I looked at the teachers' levels of participation and engagement, teacher interactions, points of clarification and revelations that occurred in the PD sessions. I connected what I had observed and documented in these PD sessions to my interviews with teachers to develop more evidence on how they re-conceptualized and changed their teaching practices.

Analysis of evidence. Before conducting interviews, I spent a great deal of time formulating the questions that I would ask participants both in interviews and on surveys. In order to advance with an analysis of the data, I sifted through the interviews, surveys, and field notes. The categories that percolated during the coding process are the following: teacher empathy, student fragility, the need to meet students where they are, which entailed re-conceptualizing discipline and pedagogy, and changes in teaching practices. Examples of teachers recognizing their internalized and externalized symptoms of PTSD that mirrored their students fit into a larger idea of empathy. Internalization of PTSD was seen in the instances of emotionally shutting down, dissociation, difficulty sleeping, anxiety, avoidance, and self-medication. Externalized symptoms were exhibited in outbursts related to hyper-vigilance and irritability. I sub-coded for the various ways that teachers had similarities and differences in their responses on interviews. I also sub-coded curriculum interventions in the various subject matter taught to find out if there were any similarities in approaches.

Limitations

The participants in this study were the eight teachers who had taught at Tubman during the previous year. However, the four other teachers were not included in the data; two worked part-time and two were new to Tubman. Consequently, the focal teachers did not reflect a complete view of the education that all Tubman students received. Additionally, Summiyah's class was the only class that received the mental health intervention therefore Summiyah received more in-depth training in cognitive behavioral therapy than any of the other teachers as well as receiving a CBT certification. Due to the limited resources, this was justified because Summiyah was a teacher leader who had the tools to maintain sustainability of the PD series.

Although Fatima, the mental health therapist, was a constant in the preparation of the three phases, she was unable to attend the final session due to a scheduling conflict. She had limited hours at Tubman throughout the week but worked with clients at a clinic on Fridays,

which was the set day for Tubman's staff meeting time. Consequently, Summiyah had to lead the final staff training. This schedule also posed a potential conflict in the amount of follow-up training the staff could receive.

There were two principals throughout the school year. Both were supportive of the mental health training. The first principal is referred to as "the principal," for the purposes of this research. He was the principal from the fall of 2006 to the fall of 2010. He had experienced the traumatic situations with the staff and students that led up to the mental health training. He attended the first two phases of the PD. Mid-way through the year, he left the school and his replacement was one of the non-focal teachers who started at Tubman the year before and worked part-time during the fall of 2010 before taking over as principal. The second principal did not attend the third session and is not referenced in this study. Due to the changes in Tubman's leadership, this research does not focus on the effects of the PD on the principal.

Researcher Role

I began my relationship with Tubman students and faculty as a teacher at Tubman. As a colleague, I became familiar with campus issues and the difficulties that students and teachers faced. After three years of teaching, I returned as a volunteer at Tubman as I conducted my research. I had also participated in a national PD organization and had teaching techniques to share. Though my research was to follow the impacts of PD sessions led by a mental health therapist, I was asked to share teaching tools as a way to present a portion of the PD that firmly connected with educators. In this way, I became a participant-observer at PD sessions.

As a woman of Black and Filipina descent, I felt genuinely accepted in the community. I was open to discuss my research question and literature with students and staff alike. Students who inquired about my study seemed to appreciate the topic because it honored their struggles, but they also appreciated not being put on the spot. Yet, some students would approach me to talk, freely sharing some of their own trials and tribulations.

Chapter Four ***Funda-Mental Health Training***

“I be getting hella mad just wantin’ to kill somethin’.
Kicked me out the school for fightin’ and pill poppin’.
I can see it in they eyes they don’t want me to have nothin’.
If you’d a been my teacher, man, I’d have been somethin’.”

-“*Conversation,*” written and performed by Jinho “Piper” Ferreira
Song played to introduce Phase I of the Professional Development

In order to provide a context for the training that Tubman teachers received, this chapter describes the school situation prior to the professional development and then delves into the planning and actualization of the three phases of the PD series. It begins and ends with the voice of one focal teacher, Summiyah. She detailed a culturally conflicting class experience with a school psychologist that occurred before participating in the PD. Then, embodying the ideal progression of the training, Summiyah received certification in cognitive behavioral therapy and actually presented the third phase of the PD after Fatima, the mental health therapist, had led the first two phases.

Consistent in the preparation of all phases of the PD, Fatima displayed a high level of cultural competency in her work with the teaching staff. She additionally used thoughtful approaches to challenges that she faced in preparing each PD for Tubman’s educators, at one point bringing in other mental health workers to assist her in providing support for teachers. The intensity of the instructional context of Tubman teachers became evident for Fatima when she herself actually experienced teaching a class at Tubman.

The PD sessions on PTSD had three different foci. In August of 2010, the first phase began in a half-day PD session that ran for three hours. During this initial session, Fatima introduced the concepts of PTSD and vicarious trauma. She took into account the teachers’ emotional needs and their request for tools on how to work with their students as she prepared the second session held in October of 2010. Since it was a longer PD day with a duration of six hours and she was concerned about the teachers’ emotional well-being, she asked that her mental health interns and a community psychologist also be present. In the second phase, Fatima focused on cognitive behavioral therapy (CBT) as well as helping the teachers see positive aspects of a traumatized student population. The third and final phase, conducted by Summiyah, took place in March 2011 on a Friday when students were released early during a two-hour block typically dedicated to staff meeting time. She focused on the classroom applications of CBT and on ways that the teachers might embrace a healing philosophy in their classrooms.

Teaching Traumatized Students

Teaching at Tubman was outside of the realm of the traditional school because Tubman students experienced life situations outside of the realm of the traditional student. Many of the youth were negotiating their lives in a highly stressed environment. Often students were parents or caretakers of younger siblings. Some had participated in illegal activities such as drug sales, theft, pornography, and prostitution. Many students had been incarcerated and wore ankle

monitors. Tubman received frequent visits from probation officers. Occasionally, students were homeless. In the majority of Tubman students' households either one or both parents were absent. Some students lived in foster care, group homes, or resided with other family members, such as their grandparents. Additionally, there was a high exposure to death in this community. Students had lost family members and peers to gun violence.

Teachers encountered an array of behaviors that indicated their students suffered from emotional pain including a high propensity for verbose, profane, angry outbursts; self-medication; high absentee rates; self-soothing attempts that ranged from thumb-sucking to inappropriate sexual conduct; fighting; leaving class; and feelings of worthlessness, hopelessness, and helplessness which were all associated with post-traumatic stress disorder.

Another aspect of Tubman's school community was that both teachers and students have seen each other in a vulnerable state. A year before Fatima's tenure began two recent Tubman graduates had been shot and killed within a week of each other. These turbulent experiences can bring communities closer together. Tubman teachers put their best efforts forward to work with their students, creating spaces where they could write, draw, share, cry, and build an altar together. The following excerpt of Summiyah's account of the aftermath on campus details how an outsider from the mental health field was culturally disconnected from Tubman students.

So we were in our cipher and the district sends the school psychologist to us, I guess to counsel us. Now mind you, we had been vibing with one another, sharing poetry and good memories of [the deceased boys]. And he, first of all, we don't know him, many of us have never seen him before, but he comes in and he's standing there like a cop, with a pen in one hand and a pad of paper in the other, and he starts asking for details about the murders! The kids was not havin' it! They got up and left or the ones that did stay put their headphones on, put their hoodies on, put their heads on their desks, and tuned him out. And I didn't blame them! He had completely disrupted the energy of our class.

Summiyah immediately recognized that there was a cultural conflict. She explained that the school psychologist received a hostile rejection from the students because his manner of questioning resembled law enforcement authorities. She explained to the clinician that in this particular community a bitter relationship with the police existed due to racial profiling, sexual harassment, abuse of power, and violence endured. Acknowledging that the students responded favorably to their teachers, the psychologist left. Teachers continued to organize students in producing an altar at the entrance of the school to visually display affection for the young lives lost.

Although Summiyah did not have certification in mental health, she had a profound knowledge of the community in which she worked, grew up and resided. Inherent in this example is an illustration of cultural competency, teacher brokering between students and district authorities, culturally relevant pedagogy (Ladson-Billings, 1994; Delpit, 1988; Foster, 1993; Mann, 2000), and fierce dedication of teachers to students.

Phase I: Introduction to Post-Traumatic Stress Disorder

When Fatima began to work at Tubman, in 2009, she gained a deep appreciation for what Tubman teachers were facing. Fatima's work in the mental health field differed from the school psychologist because she specialized in dealing with trauma, whereas the school psychologist

mainly handled assessments for special education. She conducted an informal assessment of the students and found that 99% of the youth exhibited symptoms of PTSD. Fatima concluded, “In the district, there is nowhere else with such a high concentration of kids suffering from PTSD.”

Based on the results of the survey that Fatima administered, she formed a trauma intervention class. Partnered with a yoga instructor who was also licensed in family therapy, they used this class to work with students with the most severe cases of PTSD. In Fatima’s assessment, they were students “scoring 30-40 when the average traumatized youth scored a 17.”

It was in this class during her first semester that Fatima got a clearer sense of the challenges of Tubman teachers. Her husband noticed that every time she came home from Tubman she needed headache medicine. Her employer remarked that she was irritable. Fatima found that she had developed vicarious traumatization, a form of trauma generated secondarily by working with traumatized clients. Although the students who had completed the trauma class experienced the success of graduating, Fatima had to discontinue the class the following semester because her employer wanted her to take on another assignment.

In planning her consecutive year at Tubman, Fatima realized that Tubman teachers could be suffering from vicarious traumatization as well, and she invited the teachers to participate in mental health training about PTSD and its effects on students and staff. In Fatima’s opinion, “...presenting it to the teachers just made sense. Teachers are there with students for the majority of the day. But the teachers are suffering too... Teachers can understand trauma and they can work with these children so they can learn.”

The teachers voted unanimously to establish the training as their professional development focus for the following school year. As Fatima prepared the mental health training, she enlisted my help as an educator to make the connection to teachers.

She also found out in talking to the principal and faculty that there was an emerging tension. The divide was largely due to the fact that the principal was establishing another school; some of the teachers and staff were planning to leave with him, and others were not. This division brought about questions of loyalty and commitment on both sides, yet the entire staff was going to have to serve Tubman’s student body. Because Fatima worked at Tubman part-time her schedule made it difficult for her to be present on the days of Tubman’s staff meetings, so she had to condense her sessions to the long PD days. Fatima’s other challenge was that she needed to make the language of mental health accessible to teachers.

Although her experiences in the field of mental health confirmed that both racism and slavery caused mental health disorders, Fatima noted that they were not recognized for two reasons—racism and money. She stated that if the future DSM-V “recognized that racism is a contributing factor to mental illness or that slavery is a contributing factor for mental illness, [the government would] really have to pony up on reparations.” With this understanding however, Fatima made a conscious decision to focus PD sessions presented to an ethnically mixed group of teachers on PTSD instead of post-traumatic slave syndrome (PTSS) (DeGruy, 2005). Discussing mental health intervention using PTSD instead of PTSS in Fatima’s words, “takes out that feeling that my forefathers and foremothers are responsible for this and it takes away guilt and it makes it softer for [white teachers] to handle.” As a therapist prioritizing the mental health of teachers and students, this was an intentional decision not to set off the teachers’ triggers in an attempt to make sure students were served by healthy educators.

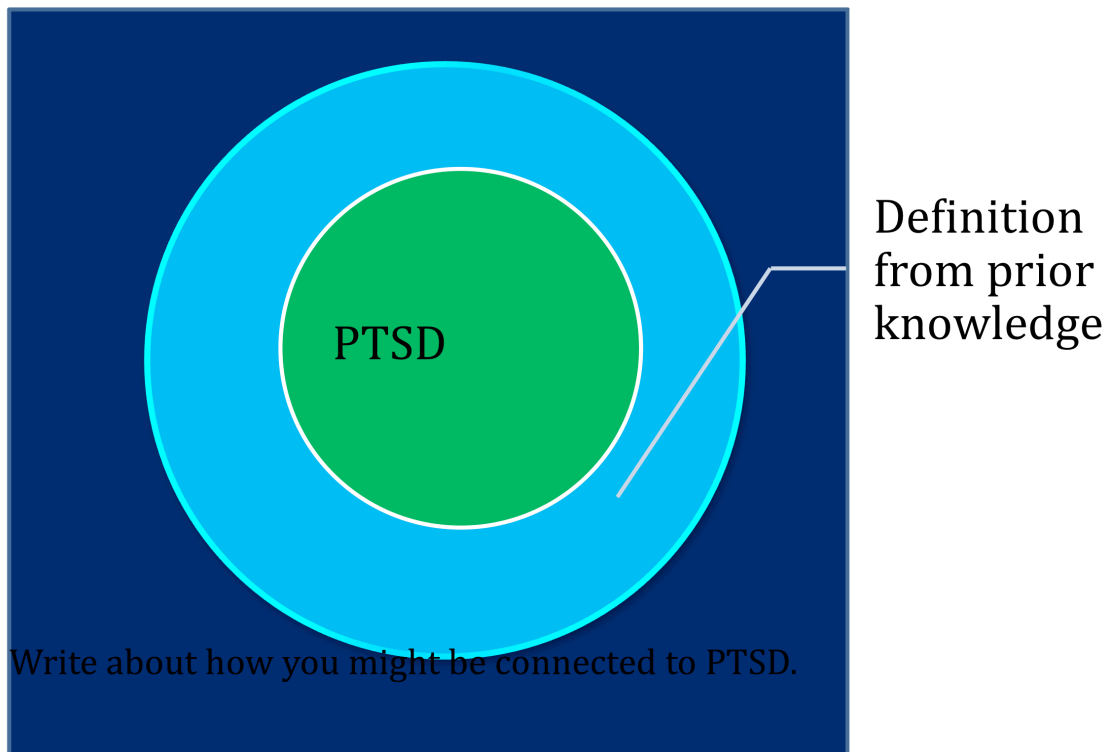
As Fatima planned the first phase, she emailed a flyer to the principal as a kind of menu of services that she could provide to the staff (see Appendix A). From the list of offerings, the topics of PTSD, mandated reporting, vicarious trauma, and role-playing to understand student

behaviors were selected for the first PD session. A couple days before the 2010-2011 school year began, Fatima presented the first phase of the professional development. She and I collaborated to emphasize the connection between mental health and education. Thus, the activities in the beginning of the session concentrated on bringing teachers' thoughts back to the classroom and establishing teachers' successful practices.

At the beginning of the first phase, teachers and the principal filed in to the song, "Conversation," by Piper. As they found their seats, they were asked to think about one successful classroom practice that they had implemented in the previous school year and to write it down on a card. Teachers were asked to elaborate on the lessons discussing if it were a collaborative effort, how they got the idea, and what techniques made it a success. In addition, they were asked to share the responses of their students and how they knew that the students had learned. Then, participants circulated around the classroom, paired up, and shared their successful teaching. After pairing up and sharing two more times, teachers were asked to write down practices from their colleagues that they were interested in implementing. Teachers then looked at the different levels of learning of Bloom's taxonomy (Bloom, 1956; Anderson & Krathwohl, 2001) and were asked to figure out the categories that applied to their teaching practices.

I shared a successful teaching practice for me, the use of Thinking Maps™. These eight maps developed by David Hyerle (2008) are the bases for strategies that allow learners to graphically illustrate cognitive processes based on Bloom's taxonomy. In order to teach the technical definition of PTSD, we used the first of Hyerle's maps called a circle map for teachers to define PTSD in their own words and eventually wrote about their own personal related experiences. Figure 2 below shows the circle map used to define PTSD.

Figure 2. Defining PTSD in a Circle Map



Fatima then shared the DSM-IV-TR definition of PTSD and took great care to explain it in laymen's terms. Teachers shared their cognitive maps with one another. Fatima felt that this activity could potentially make participants feel vulnerable so she walked around surveying the group to make sure that teachers felt comfortable. After presenting information about PTSD, Fatima also answered questions from the PD participants.

A teacher asked, for example, "if everyone experiences some sort of trauma do they come out of it with PTSD?" Fatima answered, "no... a lot tends to be based on the upbringing early on, and coping mechanisms, and support systems.... Now this isn't necessarily 100% either, but they have a better chance than someone who does not have those coping mechanisms from early on." Fatima also generated discussion on ways that students with PTSD might display symptoms in the classroom that affected them academically (see Figure 1 for a list of PTSD symptoms). This is exemplified in the point below that she made to the teachers:

If I'm in a functional environment and I'm trying to bring in this dysfunctional behavior, it's not going to work, and I'm going to have a hard time adjusting. And I'm gonna need a lot of help around me to help me to be able to work and function in this environment. It's almost like what I believe and feel is right is not in this particular environment. But I can't lose that, because I'm gonna walk out of my environment and get shot, so I need it, it's helpful to me. So what we're asking is...how can you help that youth to de-escalate some of those feelings they have on the inside?

Though it was easier to recognize students who were more verbose exuding symptoms externally, Fatima warned that students who kept quiet and to themselves could also be suffering tremendously. Silence could be a coping mechanism.

Fatima next discussed how mental health care providers could help teachers with student referrals and mandated reporting. She explained that circumstances of neglect and mental, physical, and sexual abuse must be reported. She recommended making contacts with the counselor and the school secretary who could be helpful in the process. Fatima answered a teacher's concern about youth fabricating their circumstances, stating that indeed those situations occurred, but the majority of calls were warranted.

At this point in the PD, Fatima discussed vicarious traumatization. She shared her own experiences and symptoms that developed when she was teaching the class with students who exhibited the most severe cases. She said that youth who have experienced trauma are used to reading people's emotions for survival. Fatima then explained how vicarious trauma can impact how a teacher interacts with students:

...if you're feeling something and you're bringing that into the classroom and a student is getting a particular vibe from how you're feeling with them, they may shut down and then you interact with them differently than you do with other students. I think that's critical to be mindful of as well.

Because people working with traumatized populations are susceptible to this form of secondary trauma, Fatima emphasized the importance of self-care. She explained that along with incorporating healing mechanisms such as meditation, movement, or music into their lives, teachers had access to eight free therapy sessions each semester through their district's supplemental health plan.

One of the teachers wanted to know why teachers were not informed of the background histories of their students. Fatima explained that there was a confidentiality act that prevented her from telling teachers about a student's past experiences unless she had the student's or the family's permission. At Tubman it was safer to assume that students had experienced trauma as the interventions could positively impact all students.

From here, Fatima presented the research of van der Kolk (2003), a psychiatrist, and I presented the work of Mann (2000), an educator, in order to show how recommendations for interventions from their respective fields overlapped. Van der Kolk asserted that traumatized children needed to feel safety, predictability, and rhythmical attunement with their surroundings. This scholar claimed they must know how to communicate their needs and whom they can trust. Van der Kolk also noted that they should be given opportunities to experience mastery and pleasure. Mann's work is based on black African culture but is also connected to brain-based research. It showed how effective educators incorporated recitation, repetition, rhythm, relationships, and rituals. These five teaching techniques can elicit positive feelings for youth who have experienced trauma.

For the purposes of implementation, the group focused on rituals and relationships. They explored rituals that teachers already did in their classrooms. Nicole had a board for "Excuses For Why I Am Not Being the Best Student I Can Be" and anytime students had an excuse, it was added to the list. Khalil had a "Wall of Shame." On this wall, Khalil and his students noted deleterious people in the news or current events. Summiyah and Tammy wrote daily agendas on the board. Another teacher mentioned having set activities on certain days. Fatima pointed out,

...here at school may be the only safe place a student has, and you may be the only safe person a student has. So your relationship to your students really goes a long way with their healing processes. Whether you know they're going through PTSD or not, your role is really, really big. And the consistency—letting a student know what's going on throughout the day when they get in the classroom – that helps too. So it's little tricks of the trade and things like that.

Then, Fatima led the staff in a relationship building activity where in small groups, participants acted out one intervention that could be done to build relationships among the staff and the students, the staff and the parents, the administration and the teachers, and amongst the teachers. The staff was then encouraged to take the ideas generated, such as a staff versus student basketball game and a barbecue, into consideration for actualization.

For the final portion of the PD session, two volunteers participated in a role-play. One played a student and the other played a teacher. The scene was that the class was working and the teacher could not help the student at the moment. The student role was to imagine one of the most difficult students and come up with a typical reaction. The teacher role was to imagine how a teacher who had not understood PTSD would handle the student. The first time through, Nicole, playing the student, wanted help with her work and when the teacher, played by the principal, couldn't help her because he was assisting someone else, she became irate, went on a tirade of expletives, and refused to do her work. The teacher's anger escalated, and he called for the security guard to escort the student to the office. The role-play evoked associative laughter from the audience of colleagues and shouts of understanding.

The second time the teacher role was to change the interaction. The audience helped to decide what the teacher should do. Summiyah suggested that the teacher point out a classmate

that could help her while he was helping another student. Marvin recommended that the teacher establish a rapport with the student and let her know that he valued her intelligence and her questions. As the scene replayed, the actors implemented the suggestions and achieved a more positive outcome, being able to speak civilly to each other. The role-play hinted at what was to come in the next sessions because it made evident that the central catalyst for change was the teacher.

Phase II: Introduction to Cognitive Behavioral Therapy

In feedback from the first session, teachers asked for practical tools in dealing with traumatized students. Therefore, Fatima's plans for the second session included training in cognitive behavioral therapy along with other tools that teachers could use. Fatima chose this method of intervention specifically for the predominately Black population of students and teachers "because it fits more culturally with how we function as a people." Fatima had a curriculum but she had to make sure to tailor it to the needs of the Tubman community. She said,

I built upon it and enhanced it and used other tools to put in with it. I infused it with other methods and resources, culture, SES. The other piece was the self-care—it changed it. Top-heavy with the piece of self-care and the change of thought. Because they have to be strong enough to withstand the work that they are doing because they are the front line, because they will be the first ones to see the kids before I see them in the clinic.

In preparing for session two, Fatima also consulted with the principal who attended this session as well.

Before the second phase of PD, Fatima was assigned two mental health interns. She invited her two interns and a community psychologist to come to the all-day PD session in order to provide support for teachers while she led the mental health presentation. As the session began, the principal announced that the PD was "for us to push the boundaries of what it means to be a teacher, what it means to provide mental health, what it means to provide support to students and families, so we're going to try and deconstruct those things."

The teachers introduced themselves to the interns and psychologist and checked in about their weekends. Most of the participants seemed to be in good spirits with the exception of Tammy. As she gave her introduction, Tammy noticed that the name of one of the murdered Tubman students was carved into the desk where she sat. Then, she explained that her grandmother was hospitalized and not doing well. Tammy appeared to get choked up as she announced that she would be "a little in and out."

When the psychologist introduced himself, he explained that he worked for a group that offered 30-40 free sessions of therapy to youth who had been victims of crimes or lost loved ones to violence. He told the teachers that it was inspiring to see them participating in a PD session dedicated to mental health issues. The psychologist described PTSD in the following way:

...particularly with kids who have experienced trauma, its like, I'd like to describe it as noise. Noise going on in your head, it's something that's happened to you, in a way, and your head gets filled with noise. That can be either the story that you're telling yourself, everyone's against me, I'm gonna die, the world's unsafe. Whatever it is,

whatever the story is, it's like noise. And that noise is what keeps the student from being present and being able to absorb content. And my guess too is that this noise often manifests itself in either acting out in the classroom, unruly behavior, you know, kids not listening. Whatever it is that's preventing you from getting across the material that you want to get across. So our hope is that today we can focus in on this noise and then you all see why the noise is coming up and then actually brainstorm together different ways that you can help reduce the noise in the kids' heads so that they can be more present with you in the classroom.

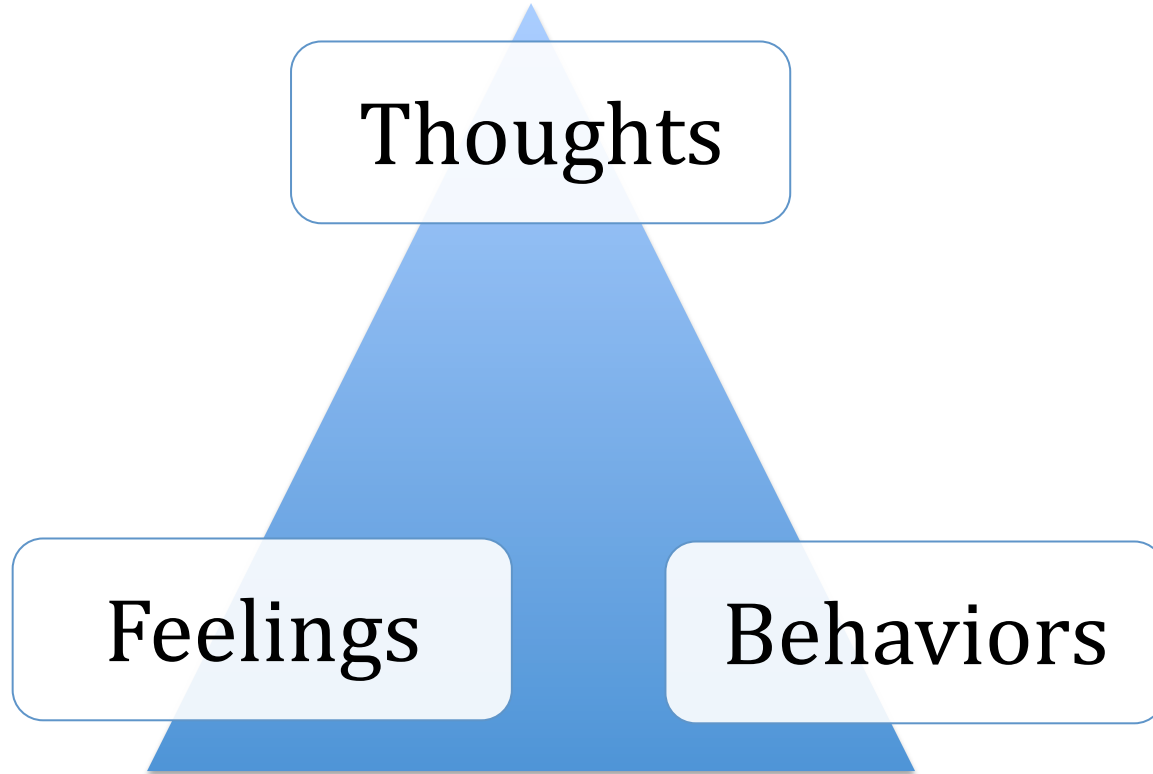
The psychologist asked teachers what traumas they thought their students faced. Teachers said abuse, domestic violence, sexual abuse, murder, hunger, neglect, homelessness, unnatural death, racism, social injustice, and simply getting to school. Then he asked participants to write down names or numbers of students that they felt had PTSD. Some teachers wrote a few names, but most wrote the number 163. This was the total student population. Fatima corroborated their guesses, sharing the results of her survey that they were teaching a population where 99% of the students self-reported symptoms of PTSD.

Fatima highlighted the curriculum that was going to be used in Summiyah's class, Cognitive Behavioral Intervention for Traumatized Youth (CBITS) designed by Jaycox (2004), for the entire staff. She explained that the curriculum was developed to serve youth who had been traumatized in various ways from community violence to natural disasters. These different scenarios all applied to Tubman students although the latter example was often overlooked as seen in the list compiled by teachers earlier on. Fatima pointed out that Tubman served youth whose families had been displaced due to Hurricane Katrina and natural disasters or terrorism that had taken place in Latino countries.

Fatima talked about the brain of a traumatized youth. On one hand, the frontal lobe of the brain is still developing and, on the other, trauma is getting stored in different places in the brain forming memories and developing triggers. Fatima said that triggers are based on sensorial memories a touch, a sound, a smell, a taste, or an image. This may be why a simple act such as placing a hand on a student's shoulder could set her off. Fatima shared that substance abuse, behavioral problems, and under-performance in school were common among traumatized youth.

Fatima provided a CBT visual of a triangle with each point labeled thoughts, feelings, and behaviors as seen in Figure 3.

Figure 3. Cognitive Behavioral Therapy Model



The idea behind CBT is that feelings and behaviors are derivative of thoughts and the power to change feelings and behaviors is rooted in changing thoughts. Fatima simplified CBT, “It’s just ‘think positive,’ and when your like ‘I’m not going to think positive’ then you have a really crummy day.” She emphasized the important role that teachers played in the lives of students and the influence that they had.

Fatima concentrated on the idea of positive thinking and what to do when negative thoughts crept in:

Sometimes we have this running commentary in our head about how to deal with a student, how to deal with a parent or particular client, and we have to acknowledge that it is true because we’re going to act upon it, whether we believe it or not, so we have to admit the thought to ourselves about what we’re doing in our profession and our abilities, if we don’t begin to address it ourselves we’re going to act it out. So identify the negative voice, give it a name, a tone, make fun of it, some people do that, you know? I have this voice inside of me and there are times when I tell it ‘just shut up.’

She introduced the idea of a feeling thermometer to help teachers identify their own triggers. This concept was basically a self-check to determine how a situation was being perceived and a self-talk that can identify a trigger before reaching a boiling point, or an exacerbated level of anger. She put the onus of change on the teachers and their role in creating a healing environment for students stating,

Because that's what you have control over. It's, what can you do to make it a better place for the students? What problem lies within you? What's difficult for you? Working with particular students in the classroom? What can you do to create a better space for students to learn in?

She pushed the participants of the PD session to look from an asset-based perspective and asked how PTSD could be seen as a gift. Teachers suggested that pain reminded a person that something was wrong, provided coping skills and resilience, and fueled creative energy. Fatima added "particularly youth who suffer from trauma, they have honed some skills that your ordinary person does not. That is, reading nonverbal cues, being able to decipher whether you're real or not, whether your telling the truth or not, because these are people who have these things to survive, you can't take that from them."

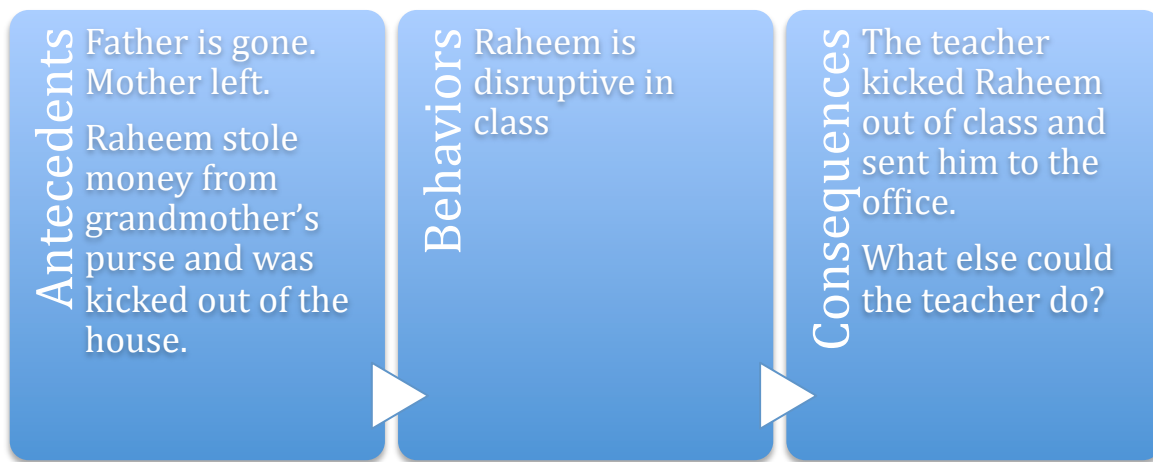
Fatima explained that when students attended teachers' classes, it was a deliberate act. She stated further,

...they're choosing to be there, and they're choosing you. Often times when they share their stories with you, it's because they've developed a trust with you, right? So you're more than a teacher in a classroom; you're a therapist in the classroom, which is why we're teaching you CBT, which is a technique used by therapists. Why give it to teachers? Because you're doing it already! So you're just taking the tools that therapists use and using them in the classroom.

Similarly to the first phase, I was called on to present Thinking Maps™, largely because this strategy is useful in working with traumatized youth. Using cognitive maps helps to graphically represent ideas in one's head. Being able to use pictures, words, or phrases makes this activity accessible for youth with symptoms of PTSD, because often trauma has an effect on language abilities. The multi-flow map was particularly highlighted in the second phase because it graphically displayed cause and effect. This connected smoothly to Fatima's antecedent, behavior, and consequence (ABC) model.

Using the ABC model framed by a cognitive map (see Figure 4 below), Fatima put the idea of kicking a student out of class into perspective.

Figure 4. Antecedent Behavior Consequence Model in a Cognitive Map



She explained a fictitious case study where a student named Raheem was sent out of class for disruptive behavior. She explained that an incident tends to have more to the beginning and more options on how it can end. Fatima provided antecedents to Raheem’s behavior explaining that his father was not around, his mother had abandoned him, he lived with his grandmother, and she kicked him out of the house for stealing money from her purse. When Raheem got to school, the situation replayed. His disruptive behaviors resulted in the consequence of being sent to the office. Illustrating the actions of kicking Raheem out of his home and his classroom showed the reproduction of displacement for this student. Students could use the cognitive map as a tool to process their behavior themselves and brainstorm options for how they wanted to proceed. Fatima asserted that teachers could control the way that they reacted to certain behaviors keeping in mind that there was most likely more to a student’s story than what was observed in the classroom.

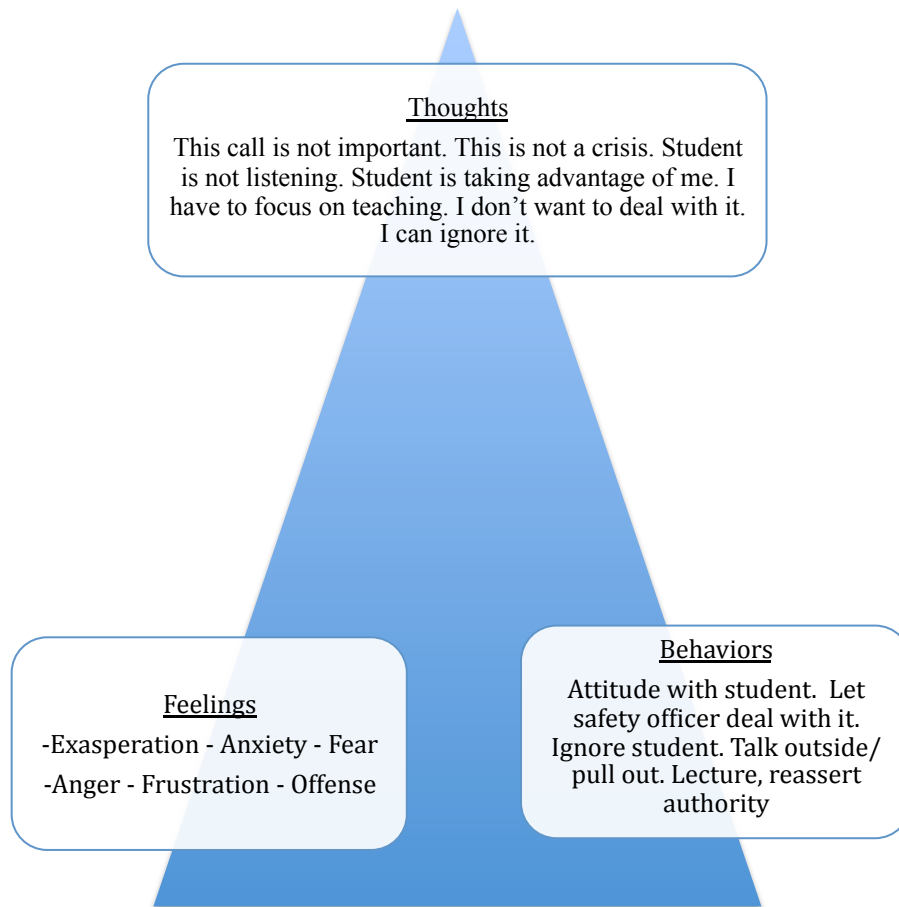
The principal shared that in preparation for the PD session he discussed with Fatima a quadrant that expressed the notion of both teachers and students having an internal and an external reflection. He explained that his illustration could also be useful for the support staff because it provided a graphic organizer that encompassed both of the parties that the administration worked with. The chart that he shared follows in Figure 5.:

Figure 5. Teacher-Student Quadrant

Quadrant 1: Teacher internal check	Quadrant 2: Teacher external check
Quadrant 3: Student internal check	Quadrant 4: Student external check

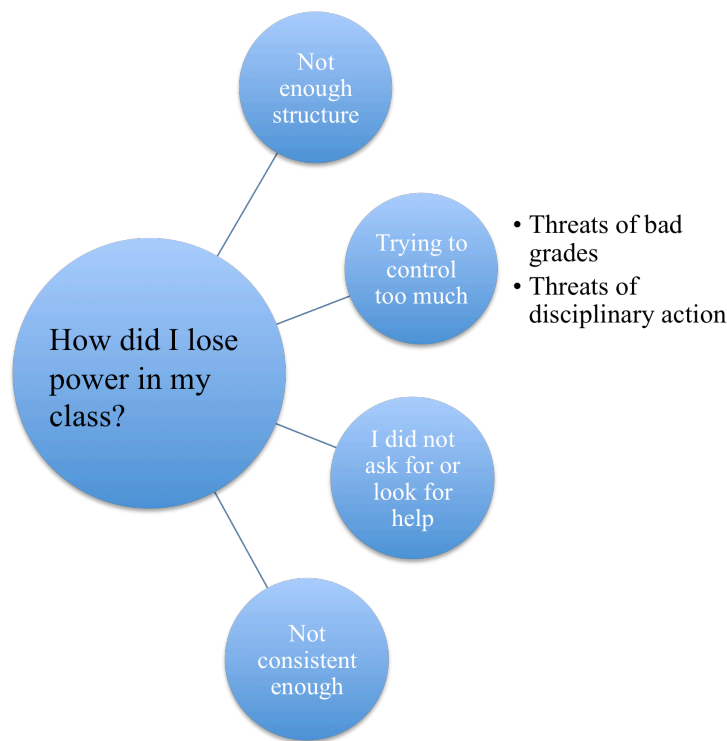
The teachers then got their chance to present graphic organizers that reflected their learning. The next section was dedicated to practical use of the CBT model, though Fatima said that teachers could use whichever tools made sense to them. Because teachers were beginning to define their professional learning communities that served as spaces for collaboration and peer observation, participants broke into groups by subject matter to practice using CBT. Delphine, the special education teacher, opted for the humanities group. As the teachers worked in groups to make CBT applicable to the classroom, each group generated a discussion. The humanities group was made up of one non-focal teacher and focal teachers Tammy, Nicole, Frank, Emily, Summiyah, and Delphine. Emily was particularly disturbed by the cell phone battles that she engaged in frequently with students. Cell phones were against school policy, yet she felt that it was not always enforced school-wide and her attempts to confiscate phones often erupted into unpleasant struggles with students. Other teachers concurred that this was an issue but a few felt like it was not where they wanted to direct their energy. Summiyah’s method was to teach students cell phone etiquette: put the phone on the vibrate setting and do not use it in class. If students had an emergency phone call, she directed them to take it outside. Other suggestions were student tardiness and truancy. This led to a fuller discussion about the difficulty of teachers enforcing school-wide policies when there was a sentiment that the administration did not reinforce them. For the purposes of creating their CBT chart, however, the group decided to use the cell phone example. The chart that this group created is seen below in Figure 6:

Figure 6. Poster Presentation: English Language Arts / Social Studies



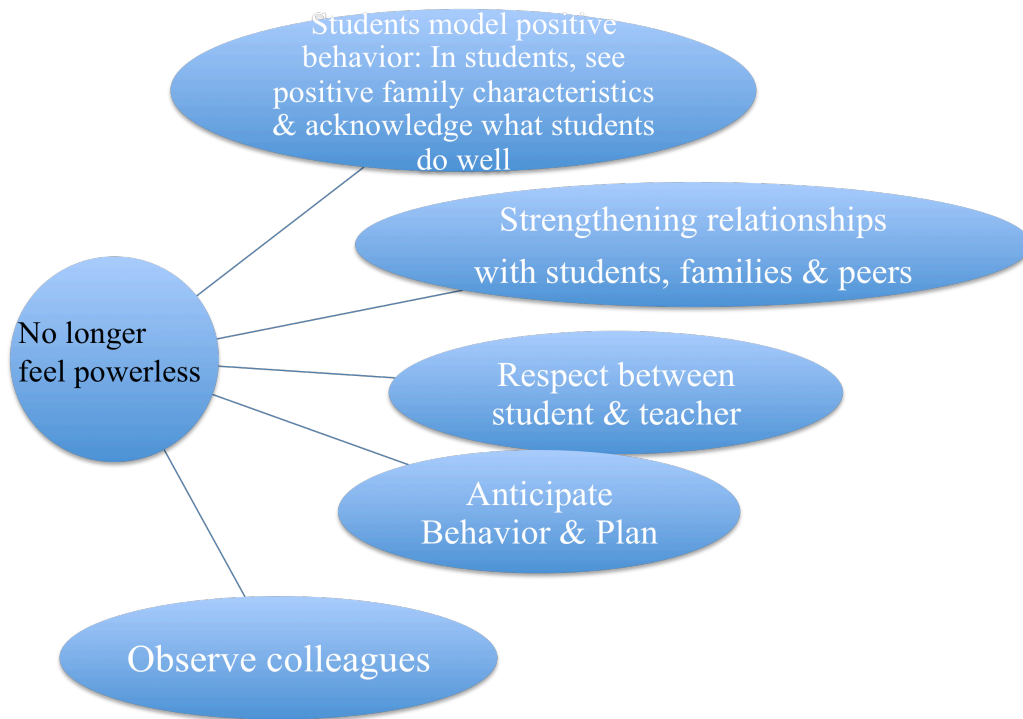
Interestingly, the professional learning communities were somewhat gendered. The humanities teachers were female, with the exception of Frank, and the math and science teachers were all male. In the math and science group, focal teachers Khalil and Marvin were joined by two non-focal teachers. Their discussion, led by Khalil, tapped into his personal feelings of maintaining power and control in the classroom. This generated agreement from his group and their discussion is captured in their graphic representation that follows in Figure 7:

Figure 7. Poster Presentation I: Math / Science



The math and science group additionally thought through a process by which they wanted to address the problem of control and balance the power dynamics. They mentioned building strong relationships with not only the students but students' families as well. This group also used an asset-based frame, where they would actively look for examples of students' positive characteristics. Their contributions are shown in Figure 8:

Figure 8. Poster Presentation II: Math/Science



As teachers presented back to the whole group, participants noticed that the two teacher groups contrasted in their approaches. The discussion that ensued on the part of both groups reiterated that Khalil had made a poignant observation about the teacher need for power. Yet, Emily seemed to disagree. In her opinion the teacher was supposed to be in control of the classroom.

Fatima reiterated that if teachers were experiencing challenges in the classroom, they should reflect on themselves first but they could also help their students understand how their behaviors affected others. At this point teachers had several tools in the forms of CBT, a feeling thermometer, the ABC model, multi-flow maps, and the teacher-student quadrants to use for self-reflection and their work with their students.

Fatima concluded by emphasizing the importance of self-care. The final activity was a guided mindfulness practice. One of the interns led the participants in a non-religious meditation that involved sitting up straight while relaxing different parts of the body, focusing on breath, and clearing the mind. The remainder of the PD time was yielded to Summiyah and Emily who led a presentation for teachers about how to conduct effective peer observations for their professional learning communities.

Before the final stage of PD, Fatima then prepared to conduct another class intervention, this time working with her interns and a teacher who could keep the mental health interventions

at Tubman sustainable. This class make-up differed from the previous class that she taught in that Summiyah's class was a random selection of students taking an ethnic studies class, instead of the most highly traumatized students of the school. When Summiyah, already a teacher leader on campus, volunteered her class it seemed a natural fit.

Phase III: Classroom Applications of CBT

For three of the five months between the second and third sessions, Summiyah's ethnic studies class had been participating twice a week in the intervention class led by Fatima and her interns using the Cognitive Behavioral Intervention for Trauma in Schools (CBITS) curriculum. Although the class was initially focused on using this scripted curriculum, both Fatima and Summiyah agreed that a more successful approach would be to listen to the students. The students questioned the presence of the mental health therapists because they felt stigmatized. Summiyah was able to contribute artful pedagogy and make the interventions more class-like and less akin to therapy sessions. Although I attended a few sessions, my focus was on the role of the teacher.

Fatima's part-time status at Tubman posed a scheduling issue with regard to the final stage of the PD. Fridays at Tubman were a set day for staff meetings and PD, but Fatima had to work at a clinic on those days, so she was unable to lead the final PD session. However, Fatima was integral to the PD planning process and met with Summiyah to help her organize what she was going to share with her colleagues. It was agreed that Summiyah would share her experience with cognitive behavioral therapy and solicit examples from her colleagues demonstrating how CBT was applicable to the classroom.

The third and final PD session brought the PTSD and cognitive behavioral therapy training full circle as Summiyah, who by this time was certified in CBT, led the final PD session.

I helped Summiyah compile research for the presentation to the staff. She shared that 20% of school-age students suffered from mental health disorders based on anxiety or trauma, yet more than 70% of those children did not receive the help that they need (Alim et al., 2006). Although brains are naturally hard wired to connect with others, social and emotional intelligence is not generally prioritized in schools (Hymel et al., 2006).

Summiyah drew connections between mental health therapists (Carrión, 2006; van der Kolk, 2003) and educators (Alder, 2002; Duncan, 2009; Duncan-Andrade & Morrell, 2008; Goldstein & Freedman, 2003; Jackson, 2011; Mann, 2000; Valenzuela, 1999), emphasizing the importance of relationships when working with youth who have suffered from external stressors. Positive student-teacher relationships were associated with better student outcomes, both associated with academics and discipline (Crosnoe, 2004). Summiyah stressed that teacher-student relationships were a form of dropout prevention (Flaherty et al., 1996). She also emphasized the cultural context stating that Black children, in particular, thrived academically from solid school relationships with adults (De Gruy, 2005; Mann, 2000).

Though the research made it clear that building relationships was good for students, the effects on teachers were less apparent. Summiyah posed the question, "What is the benefit of developing positive teacher-student relationships for teachers?" Teachers began to contribute and continued to add to a list of responses as the PD session unfolded.

Summiyah admitted that "when [CBT] was presented at the other PD it didn't really resonate with me." She discussed her students' participation using the Cognitive Behavioral Intervention for Trauma in Schools (CBITS) curriculum (Jaycox, 2004), that teaches students

about CBT. She explained that the CBITS curriculum was “demeaning” and “oppressive” because it lacked a cultural connection to Tubman students. She stated, “I’m really sensitive to the fact that everybody’s expertise should be acknowledged, should be put into the pot.” Her collaborative efforts with Fatima and her interns at Tubman were geared toward making the CBITS scripted curriculum more engaging for students. Summiyah explained,

The kids started slowly disengaging. By the second or third time the kids started saying ‘We don’t want them therapists comin’ in. They usin’ that therapist voice. They tryna make us have problems. They act like something’s wrong.’

Summiyah shared that when she collaborated with Fatima and her interns she “shared a more pedagogical approach so that it wouldn’t be like therapy it would be more that [the students] were learning skills.” The role-playing, skits, and art projects that she introduced:

...basically allowed a space for the students to be the teachers. Whenever I see students getting bored I know that it means that they gotta be the teachers, they’re supposed to be teaching. So that was my participation in it. The collaboration was actually the therapist and the teacher combining tools and expertise to create something that...had more life in it and was applicable to our students.

Summiyah added that the role that she played in the CBITS class was sharing what she and her colleagues typically did in the classroom. Similarly, CBT employed strategies teachers were already using as well. Summiyah solicited examples from her colleagues of a time when they had to change a feeling or a thought so that they could have a better experience in their classes. Frank offered an example of a student who was getting high on a regular basis. The young man seemed concerned with his grade but didn’t realize that he was not doing his work,

...coming to class high regularly, he would just sit there and twiddle his thumbs and be all frustrated about his grade, and I was getting pissed. I mean, because it’s not rocket science, I mean, you’re coming to class high. And just having one conversation with him, I realized he’s got a lot of shit going on at home. And okay, now I see why you’re smoking every morning. Because he learned that from his dad, you know, when shit gets tough—smoke.

Summiyah asked Frank, “When you saw him act that way and then started acting differently toward him did you notice any shift in him take place? Frank responded, “at that point, once I started listening to him and what he was going through, then he was able to listen to me more. So it got to where one day he came in to class and he wasn’t high.”

Not only had the student changed, Frank noticed that he had changed as well. Frank said, “...[the student] started coming in. I was definitely more receptive and definitely on my end more willing to work with him, where he was at and uh, I guess I kind of changed my whole thought about the whole situation.”

Summiyah experienced difficulties with a particular student in her class because the young woman was often truant and came to school with art projects in lieu of the class assignments that did not appear to have been done by her. Summiyah suspended her judgment

and asked the student questions out of concern. Summiyah explained her version of what happened to her colleagues.

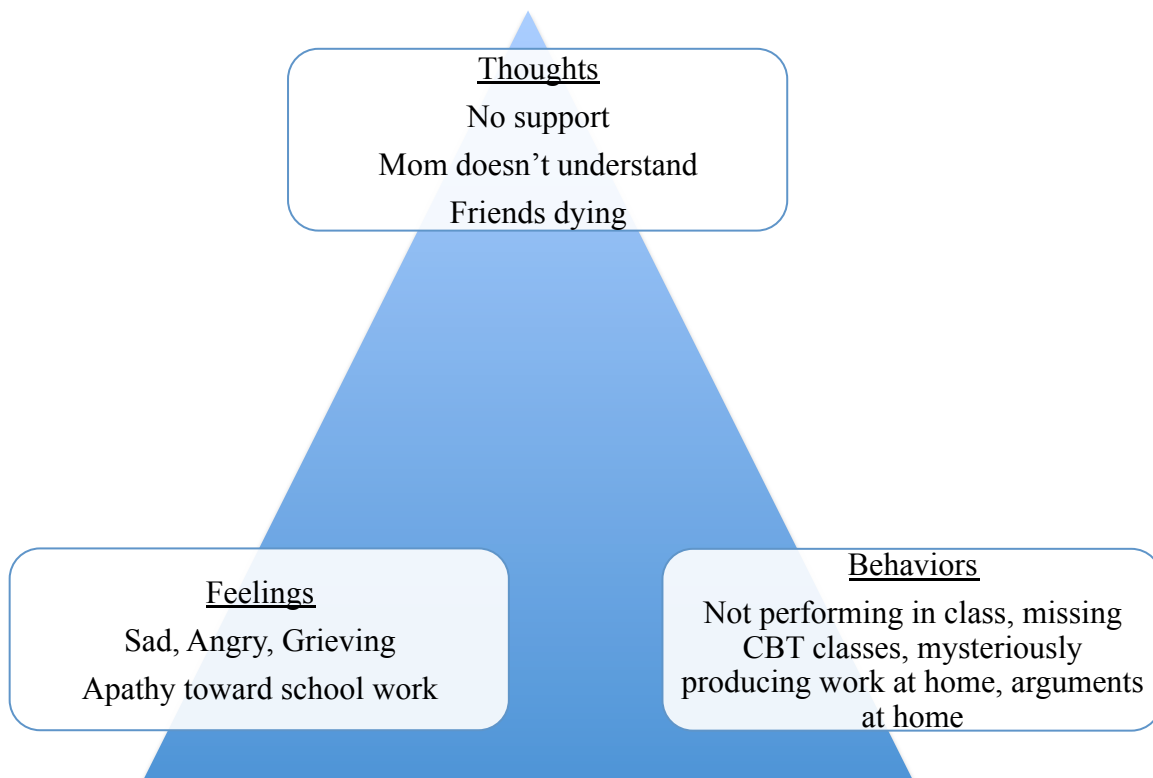
I was getting worn out and then, ding! It was that one last, ‘Okay, let me just try one more time.’ I pulled her to the side and said, ‘you know you’re on the verge of getting an F.’ ‘I don’t care.’ I was like, ‘what?’ ‘I don’t even know where I’m sleeping tonight.’ And I happen to know her mom, so I was like, ‘Oh, okay what is this? What you mean you don’t know where you sleeping tonight?’ ‘Well, my mom and I got in a fight and she kicked me out and I’m probably going over to my daddy’s but I don’t get along with my daddy.’ Okay, so she’s technically homeless.

Summiyah shared with the student that she, too, had been kicked out of her house as a teenager. Then, Summiyah gave more detail about how the young woman’s altercation between the student and her mother could be related to PTSD.

She said, ‘You know I’m angry and my mother doesn’t know that my anger is because I’m sad, because all my friends are dying.’...She had four friends that died recently. And then she started talking about this one friend. I said okay, well I’m a give you this journal.

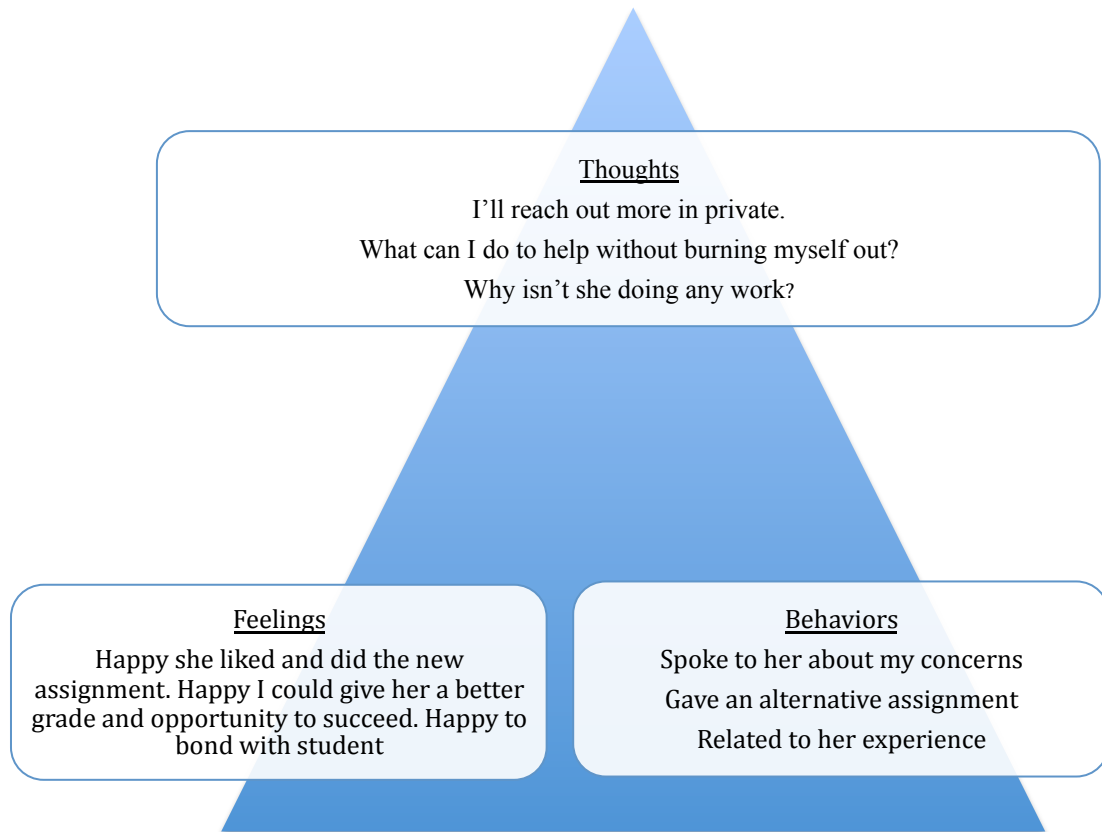
Figure 9 following is Summiyah’s graphic representation of what the student told Summiyah placed into the CBT model.

Figure 9. CBT: Student Perspective I



Summiyah’s next CBT model (Figure 10) represented her perspective as a teacher who listened to her student’s concerns and came up with an alternate assignment that included a typed paper, an art project, and her journal. On a personal level, she thought about her own self-care, “I know some educators who will just push, push, push through but I know myself and I know I will burn out.”

Figure 10. CBT: Teacher Perspective



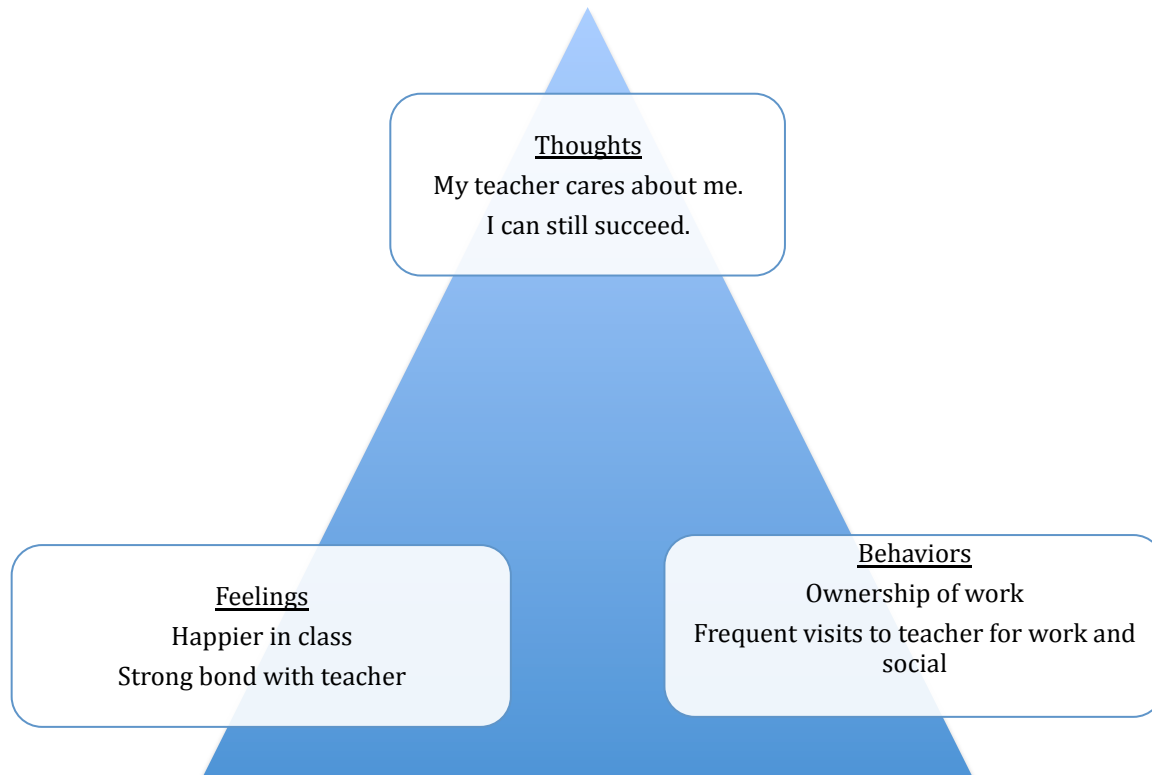
Summiyah and her student felt good about the outcome of the intervention. The student maintained responsibility for her work. She showed up with another project that she had not done herself,

But this time, she was honest about it. She said well here's my paper I did it but my grandmother took it over and I don't want this to be my project, I want to do my own project. So this time she still showed me but said this time I'm doing something different.

The student re-did her art project all by herself, wrote her paper, and was consistent with her journal. Summiyah said that she did not receive full credit because she had neglected to type her paper. The student ended up getting a C in her class but more importantly she had developed a solid relationship with an adult on campus.

In Summiyah’s words, “she kept coming back to my class. She got all new teachers and...because we had made this connection it was actually bad for her to have been switched out because now she doesn’t go to none of her classes and now she follows me for three periods and I am like, ‘Go to your class!’” Figure 11 shows Summiyah’s resulting triangle.

Figure 11. CBT: Student Perspective II



Though this particular student, as Summiyah described, “conspicuously” missed the CBITS class, it was unfortunate because this time presented an opportunity for students to learn about CBT,

...we were trying to get the students to be aware of this triangle, using scenarios from their lives and plugging it in, And it was good because they were asking tough questions, the stuff that they really deal with, you know, like relationship stuff and you know not wanting to look stupid but the idea that if I change my thought about stuff that I’m a look stupid to them, my peers...but you know I really want to try to experiment with this...

Summiyah shared what she felt was important to consider when going through the CBT process with students. The profile she developed for doing CBT follows:

1. Being flexible
2. Being reflective of personal experiences
3. Being a pristine listener

4. Being a non-judgmental listener
5. Being non-pitying
6. Posing non-judgmental questions
7. Expecting productivity
8. Having productive problem-solving skills
9. Being solution-oriented
10. Willing to have a relationship
11. Willing to engage students who display tensions or conflict

After sharing her scenario and her ways to use CBT successfully, she countered that some teachers were not comfortable building relationships. She told her colleagues that when she was shadowing her mentor teacher, she learned that academics came first and relationships were all secondary. She invited dialogue from the participants.

One non-focal teacher proclaimed that it was easier to incorporate the strategy of CBT into curriculum for people who taught elective courses but asked, “How do you give [students] something that’s going to reflect what’s going on in their life with the feeling that you can give them a grade that demonstrates mastery of the subject?”

The question was mainly directed toward the math and science teachers who answered with varying responses. Though they did not specifically address the use of CBT in their classes, they discussed how they were able to build relationships and make cultural connections while teaching their subject matter. Khalil was adamant that it was a difficult endeavor. He tried to read as much as possible so he could frame his class lectures as stories. In this way, he wanted students to feel like he did after he had heard powerful speakers, “I could feel like I read a billion page book after I left there because of their mastery of the information.” Cultural aspects were also extremely important to Khalil. He read cultural literature and blended it into his science lessons and developed assignments that allowed students to tap into their own culture. He explained a remedy book that his biology students compiled by interviewing elders about traditional healing methods. He reminisced, “One Mexican kid said they used spider webs to stop bleeding and the Black kids was like, ‘What?’ And the other Mexican kid was like, ‘Everybody knows that!’”

In Marvin’s class, his students used all different forms of mathematics, “we just treat it like an intellectual activity and try to show the cultural and philosophical foundations of the subject.” He explained that math was about “learning the techniques to solve problems.” Marvin stated that although they learn math that is reflected on the “police” or standardized tests, “We’ll play games or try to show not just their math but ours—mathematics, backgammon, cards, chess, dominoes. They get into the etymology of what mathematics already is, reviewing what we already know.

The teacher who had posed the question added, “All of us had to learn the test and I sometimes think that we do a disservice to not give [students] that.” Summiyah read a David McCulloch quote off of the classroom wall, “No harm’s done to history by making it something that someone would want to read.” She additionally shared that she attended a high school similar to Tubman and although she went on to a four-year university, most of her peers did not. Summiyah said that she did not write a ten-page research paper until she did her Master’s program and that her thesis was in a different language. She said that her drive for education came from her family. Her message was that students had different trajectories and there was no set time for them to realize what they wanted out of life or how to get it. Summiyah added that

most opportunities that people received were based on networking, which in her opinion provided a significant reason for modeling how to develop positive relationships with students.

At the end of the PD portion of the session, I revisited the question, “What is the benefit of developing positive teacher-student relationships for teachers?” The final list below reflects the responses that accumulated throughout the PD.

1. Helps with classroom management
2. Student productivity increases
3. Helps students acknowledge personal accountability
4. Makes work easier, more enjoyable
5. Allows teacher to assess own practices
6. Makes easier for teacher to assist students with other concerns, teacher becomes a student’s advocate
7. Provides a holistic picture of the student
8. Builds community because relationship extends beyond the classroom (i.e. good rapport means student tell parents about the teacher or share stories, activities, etc. that they did in school)
9. Inspires creativity for teachers, easier to make lessons relevant
10. Mutually beneficial
11. Builds trust
12. Able to tap into students’ talents and multiple intelligences
13. Preparation for the real world, networking and needing to get along with others

During the latter half of the PD session, I led teacher participation in a focus group because I noticed that the past individual interviews created a collection of valuable resources that were not being shared amongst teachers. This session fruitfully provided all teachers an opportunity to hear from each other about how the professional development sessions impacted their teaching practices.

Following the third phase of PD, I conducted a final round of surveys for teachers and an interview with Fatima as well. The responses from both Fatima and the teachers showed that they regretted not being able to have more PD trainings. Fatima said she would have additionally liked to see “more research and writing to produce some sort of document that teachers could refer back to, more follow-up for the teachers not just for that year but some marker points and benchmarks: ‘where do you want to be?’” She admitted, “Kind of a lofty goal but that would have been nice. As far as the curriculum itself...if there were a way to connect it to their practice more so in the classroom that would have helped them more.”

From the teachers’ anonymous surveys, all of the educators stated that this PD was the first time that they had been formally introduced to the notion of PTSD. Some of the teachers commented that their credentialing programs did not mention PTSD. They had studied units on teaching students with physical disabilities but not emotional disorders.

The aspects of the PD that stood out for teachers were the “applicable elements,” such as the CBT triangle, cognitive maps, teaching strategies, and the meditation techniques; the relevance; and the effects that trauma has on students. The trainings benefited teachers by creating a space for dialogue with other teachers about the topic and the opportunity to learn more about students’ behaviors and how to teach students. Like Fatima, Tubman teachers desired more mental health sessions. The teachers specifically requested “more role-playing

ways to address behavior,” “more direct application to classroom,” and the incorporation of state standards. Of note, teachers recognized the importance of the PD sessions to education. One teacher wrote, “Expand the audience to many other teachers.” Another said there was a need to “strategize on how we can spread the message at other PD events, district things, among our colleagues (continuation schools and otherwise).”

The surveys also revealed that this PD was unique to teachers because it “made us reflect from the inside out,” was “heart-oriented,” and “addressed what teachers and students go through emotionally.” Speaking on the internal processing of the PD, a teacher said, “It made me think about why things are wrong, not just that things are wrong.”

This final survey concluded the PD series and marked the final piece of data to analyze in order to find out how Tubman teachers re-conceptualized their teaching practices and transformed their curriculum based on the PD.

Chapter Five
Bridging the Gap:
From Self-Aware to Student-Aware

Oh, why do I have to carry this heavy load?
Oh, why do I have to carry this heavy load?
Say, I'm gonna keep on travelin'
Down this old, lonesome road
Hey, I get worried sometimes
Oh, I worry.
You know my burden is getting awful heavy
Lord, I know I'm so weary.

- "My Heavy Load," written and sung by Willie Mae "Big Mama" Thornton

The data analyzed in this chapter revealed how the PD sessions on PTSD helped Tubman's teachers re-conceptualize their teaching practices to better address their students' learning and development. The following chapter addresses the other part of the research question – how these re-conceptualizations affected the teachers' actual implementation of their teaching practices. Re-conceptualizations were mainly tied to ways the PD helped teachers become aware of how they were experiencing aspects of vicarious traumatization, the secondary traumas connected to teaching students who were experiencing primary traumas. The PD helped teachers identify internal elements of PTSD-like symptoms of suffering in silence, dissociation, sleep difficulties, anxiety, avoidance, and self-medication as well as external PTSD-like symptoms of outbursts, hyper-vigilance and irritability. Similar to their students, the research indicated that most of the Tubman teachers seemed to be experiencing some of these symptoms vicariously as well.

Analysis of the data collected in this study revealed findings in three major categories. A central finding was that the PD sessions actually helped teachers identify PTSD-like symptoms in their own experiences, and this process allowed them to better understand and empathize with behaviors their students were exhibiting in classes. This increased ability to "empathize" was critical to how teachers were able to re-conceptualize their teaching practices. It allowed them to connect some of their own experiences in and beyond school to how PTSD-like symptoms were internalized in particular feelings and perceptions and externalized in specific attitudes and behaviors with respect to their students. Another key finding that contributed to teachers re-conceptualizing their practices was that their increasing empathy also allowed them to see how "fragile" many of their students were. This understanding of how fragile their students really were beyond the hardened personas they often enacted also helped teachers re-conceptualize their teaching practices. A third key finding predicated on the other two was that the PD helped teachers re-conceptualize ways to better meet their students where they are recognizing the intensity of their challenges yet also their talents and strengths.

Empathy with Students

The idea of facilitating PD sessions on PTSD for teachers came from Fatima, the mental health therapist, developing a heightened sense of empathy during and after she taught a class composed of the most highly traumatized students at Tubman. Ultimately, she felt that she personally experienced PTSD symptoms of increased headaches, or somatization, and irritability. The term “vicarious trauma” is usually applied to mental health workers who serve traumatized clients or to relatives of patients with PTSD. Interviews with Tubman teachers revealed that these educators also exuded symptoms of PTSD as a result of being secondarily traumatized. Similarly to their students, at varying degrees the teachers displayed internalized and externalized PTSD-like symptoms. Earlier considerations of internalized and externalized PTSD symptoms were discussed in Chapter Two.

Attempting to understand the pain of others provided the underpinning for this entire study. The first PD session imparted the initial prompts that allowed teachers to begin understanding this pain in their students as they also realized elements of it in themselves. In the primary phase, Fatima focused on defining PTSD and vicarious traumatization, sharing her own personal experiences of working with Tubman students. As noted in chapter four, teachers learned more about PTSD and how it manifested in their students in part by creating cognitive maps where they made their own personal connections to PTSD. With this heightened awareness, Fatima cautioned them to pay attention to internalized symptoms that could reside in quiet students. In the final activity of the first PD session, teachers exhibited their understanding of externalized symptoms by enacting a role-play.

The round of interviews that followed were one-on-one sessions with the teachers that allowed me to follow up and expand upon the teachers’ personal connections to and re-conceptualizations of PTSD that had been prompted in the first PD session. Teachers had the opportunity to expand on the PTSD symptoms they came to recognize in themselves as vicarious trauma and that they were able to witness in their students. There were moments in the interviews as well as in the PD sessions when intense emotional peaks were reached. As teachers shared their experiences, tears were evoked, while others informed me that they wanted to cry as they reflected on a range of traumatic situations within and beyond the school. Ultimately, these emotional responses allowed the teachers to appreciate and make deeper, empathetic connections to the lives of their students. They identified similar, vicariously induced internalized symptoms of suffering in silence, dissociation, sleep difficulties, anxiety, avoidance behaviors, and self-medication along with externalized symptoms of outbursts, hyper-vigilance, and irritability.

Suffering in silence. It was important for teachers to recognize that for the most part they had been muting their suffering with symptoms and thereby adding to a sense that no one outside of the school community could truly understand what they were dealing with at Tubman. Emily did not discuss Tubman because she did not like for her school to be sensationalized. She said, “I don’t talk about my work to other people that much. I feel that when I talk about the crazy stuff that happens, they go, ‘oh, this ghetto school.’ Maybe [I could talk to] my husband, but not that much. It’s really useful to have a tight knit community, but if I was by myself I would go nuts.” Nicole also found herself being selective about whom she shared her truths with because she did not want to emotionally drain others. Nicole’s view was:

...I can't really talk to anybody outside of here about this stuff. Occasionally I talk to my mom, but I don't even really like to burden my mom with some of the stuff. But she understands teacher kind of stuff. The other stuff I find it hard to articulate, and the only people I feel understand are the people I work with, which, thankfully are such a strong, wonderful group of people that I can talk to. But outside of this, I don't think that I have a space to process it with someone else. So I internalize a lot.

Delphine's sentiments concurred with those of Emily and Nicole in relation to the Tubman community and the potential for staff to support each other. She said, "I talk to my partner somewhat about stuff, but I don't think she really gets it, or anybody really gets it unless you have like really been there. But I think actually people here at the school site can be pretty supportive, we could definitely use more space to discuss this."

For Delphine, there was an added tension as she talked about living and working in "two completely different worlds." Because of her experiences at Tubman, Delphine felt removed from the privileged people in her community because they seemed oblivious to people who were struggling. She explained:

In the community that I live in with money, resources, and white, privileged parents complaining about their schools, I have this reputation of being kind of a bitch. You have no idea. It's all about their kids. Not about the school community. It's a hard issue for me right now. Lately, I have been going home and crying a lot. I think about the kids here [at Tubman].

Taking her children to her neighborhood park, she felt like an outsider when talking to other parents and this added another layer of stress. For Tammy, sharing her school experiences was frustrating because she did not get the answers that she sought. In Tammy's words,

...I try to talk to others about it, like my spouse or girlfriends, but unless you are in this environment, they can't feel what I feel. They're just like, 'All you can do is be there for them.' I go home burdened. I go home wanting to be a savior, to solve it, rescue them [the students], or get them out of this situation.

Like Tammy, Khalil also did not feel that others would be able to relate. However, he did not feel comfortable peeling off the layers that insulated his emotions. He shared, "Sometimes you think you the only one going through it. Why is everybody else so happy and you stressed out? Sometimes this job will take you there. You can't tell nobody else 'I'm just tryna survive and shit.'" Khalil's comment was reflective of the students themselves struggling to function in survival mode.

Although Emily, Nicole, and Delphine made references to the staff at Tubman being a support network for them, their feelings of being silenced and isolated with respect to their experiences of traumatic conditions compounded a sense of suffering. Teachers brought up the notion of feeling like they had to shut down their emotions, particularly in situations where they felt that there was nothing more they could do. Emily explained that, "Sometimes it can be resolved amicably...but if something happened where they could not build that trust with that person...Oh my gosh, sometimes you'd be surprised." In response, Emily commented on how situations like this made her feel, "It does make me feel bad. It stresses me out...I shut down a

part of myself which is kind of sad now that I think about it. I think when there's those you can't help, you just shut down a part of yourself because you just can't do anything about it."

Delphine echoed Emily's sentiments about shutting down when she felt powerless too. She explained,

It doesn't feel like enough to just listen to the students and just say 'Oh that sounds really terrible' because it's not their fault...what are we doing for them? I get so angry and I don't know what to do with the anger. I try to shut it down and like, you know, try to walk away from it. So it's really hard.

Essentially, remaining silent about stressful situations was a mechanism the teachers used to protect loved ones from being burdened as well as to shield their feelings of vulnerability. Yet, they also felt it helped protect Tubman students from being ostracized in the eyes of those with whom the teachers interacted beyond the school.

Tubman teachers found that their increasing awareness of ways they felt silenced with respect to the stresses they experienced helped them re-conceptualize the calm exteriors of some of their students. They began to understand that silence or calm (like they attempted to project in the classrooms) did not mean that these students had not experienced trauma but that they expressed it differently from their more out-going peers. Therefore, the recognition that quiet students were perhaps bottling up their emotions was indicative of the function of silence for teachers as well. Tammy commented,

Just because you're not loud and obnoxious doesn't mean they haven't been through anything. Sometimes the quiet people go under the radar. Sometimes the ones who are quiet and reserved, they have a barrier up. Pulling away these layers, usually something traumatic has happened to them and they don't know how to handle it, so it comes out all over the place.

Frank too observed, "...and I gotta pay attention to the student whose sitting in the back quiet, like Nia, she doesn't say anything, cool as hell though but just in her own world...." Teachers' experiences with not having anyone to talk to and shutting down due to their stressors at school was linked to understanding the quiet youth in their classes and the burdens they carried.

Dissociation. The idea of shutting down is an intentional act that still carries a residual burden, while dissociation or "zoning out" as a symptom of PTSD is typically attributed to losing concentration or focus as a reflex for trauma. When asked about ways that she coped with stress, Nicole disclosed, "I mostly daydream, that's probably not healthy," and that she enjoyed reading, "I immerse myself in somebody else's story." In addition, she said she liked, "...to run, turn my music on, tune out."

Often Tubman students were seen on campus and in classes with headphones in or near their ears. A blatant example of dissociation was seen in Summiyah's description in chapter four of the students who were turned off by the school psychologist's visit after the murders of their peers. She recounted, "[The students] got up and left or the ones that did stay put their headphones on, put their hoodies on, put their heads on their desks, and tuned him out." Zoning out as a student with a book was seen as a less confrontational way of reacting to trauma. In fact,

Summiyah, as most teachers who encountered students who read voraciously, described her student's hobby in a positive light, "Aisha is an avid reader. She devours novels."

Nicole further described her recognition of students who quietly displayed, among other internalized symptoms, dissociation similar to her. She said,

There are definitely the attention seekers...and the attention seekers, just by nature tend to be more vocal generally. Or more, jumping up or doing something, so your attention is always there. Those are pretty easy to recognize. The ones that withdraw or sit in the back, or they're sleeping, or they zone out, or they can't focus. Those are the ones I worry a lot about...they maybe internalize stuff a lot. And they act out in ways that would harm them and not other students.

As Nicole contrasted the way that some students displayed symptoms, she was particularly keen about her concern for students who internalized their pain because they were likely to hurt themselves.

Difficulty sleeping. Often people who have experienced trauma encounter disruptions in their sleep due to nightmares, restlessness, and insomnia. As Nicole pointed out in the section above, one of the internalized symptoms that she witnessed was students falling asleep in class. Emily, too, had an example of how stress affected her and then framed it in relation to her student.

Initially, Emily thought that she handled her stress well. She said, "I'm pretty good at compartmentalizing. I'm an expressive person. After an hour I'm not mad anymore. I think for the most part I've been okay. I think for the most part." She paused.

Then, as Emily continued to think about her situation she shared, "Sometimes I find that it builds up. Sometimes I can't sleep. I listen to books on tape. Sometimes when I try to fall asleep, it's enough, and I will listen to the story but not enough to keep me awake." Although Emily did not recognize it at first, she realized that she encountered bouts of insomnia, a common symptom of PTSD, because of the stress that she brought home from school.

The connection between teacher and student suffering came full circle as Emily spoke of a boy in her class who had a sleep disorder as well. She recognized that he would sleep in her class and at first she was perturbed. In talking to him about it, she realized that for him, her English class resembled a book on tape for her. She explained, "He loves to sleep [in my class] because it's so peaceful." This student allowed Emily to re-conceptualize her classroom space as perhaps more quiet and calm than what he was accustomed to.

Anxiety. While anxiety can be a symptom for many different forms of stress, in PTSD it is based on experiencing past trauma. For Nicole, feelings of anxiety became a reality for her as she found herself preoccupied with "her kids," both at home and at school:

...I've found myself lately being more anxious about things. Like some things I've been having unnecessarily high levels of anxiety about...it can be like, being a parent too. Sometimes it's like seeing the kids at this age and then going home and seeing my little ones. And it's like I have to make sure [my children are] not dealing with this stuff when they're that age, and what if this happens—the worry part. I worry about the kids here too

a lot. I find myself over the weekend worried. Like am I going to come back Monday and find out something terrible? And I hope all my kids are being safe.

Anxiety is common because it indicates stress due to not being able to control one's situation or surroundings. Not only were her current students causing her stress but another area of stress for Nicole was her former students. She said,

So I feel like even when you turn them loose and they graduate I kind of have residual worry. And they're out there doing things that aren't as productive as what they could be doing. Or they are, they're trying to, but they're in the same environment as they were before. So I feel like there's a lot. Some of the old students will call here or text me and say they don't have any place to stay that night, or can you help me, or I have to be out of this house today; I have no money...

In the above statement, Nicole indicated that getting students to graduate was not necessarily the last step needed for students. Having a high school diploma did not mean that her students were automatically stable. Remaining in the same neighborhood could be seen as stagnating their development.

Nicole added, "There are days where I'm stressed out like, 'Why won't they do this?'" Then she added that the students are also thinking, "We're stressed out." Khalil similarly makes the connection between adults and youth in the following:

It's stress. Like, right now we feel stress over job insecurity, how to pay my bills. We have all these things hanging over our heads and the kids have things over they heads also that aren't being acknowledged. Their struggles, their obligations, their experience is not being taken seriously or considered real.

Khalil clearly recognized that students and teachers reflected each other yet, that stress among adults was more commonly recognized than for the youth.

For someone who has been traumatized, unpredictability feels threatening. Summiyah explained how her high levels of stress in a tense classroom situation with one student who "acted like she was shooting me with a gun" caught the attention of another. She recognized,

Some students are really fragile...the whole episode upset...Camille. Her mother died in her 30's from stroke, her father is deceased too. And she was on the phone with her god-mom whom she lives with and apparently god-mom is under a lot of stress right now. Camille asked to speak to me outside and she asked me to not let Geraldine get to me because she has seen how stress can kill people and she talked about her mom. She was worried that I was too stressed by the situation.

Summiyah's student who had already lost both of her parents expressed concern for her teacher's well-being from a place of vulnerability.

Nicole reflected on a fight's aftermath and the anxiety it caused for not just the students who were fighting but the entire school community. She explained,

I think fights, are pretty traumatic. There was one today, it was pretty chaotic. I think it shatters a sense of security, kind of, for other students that aren't involved in the fight and they get really antsy and on edge and they want to talk about it but I think that's just their way of trying to process what's going on. Two weeks ago some of the kids lost one of their friends to gun violence, and they were really upset about that, justifiably so. A lot of parents and/or family members in the time I've been here...we've lost students; lost a lot of siblings of students. I feel that that's been very disruptive for everyone, not just for the student, but for everyone that interacts with the student and for us as faculty.

Nicole drew the connection between the fights and the murders that had taken place. She pointed out that although fights may occur between two people, because of past traumatic experiences students and faculty intensely internalized a hostile physical altercation. The awareness of student anxiety came from teachers being in touch with their own anxieties.

Avoidance. As a symptom of PTSD, avoidance means staying away from the source of stress. Nicole explained how school can be seen as an added stressor for students who are already facing many life challenges. She said,

One of my students has a baby on the way and I guess it's his first time saying anything. He's barely coming to class. 'I need to work.' And I'm like, 'Whoa how are you feeling about that?' 'Yeah, I'm really stressed and I been taking care of my brothers and sisters. It's hard as a teacher to be like, 'Why aren't you doing your work?'

Delphine added, "They can get really stuck in the cycles, it's kind of like a downward spiral. They feel bad then it's hard to get back into coming."

Summiyah described a situation with students punctuated by her own behavior in the form of avoidance. She explained the overarching gloominess at Tubman due to the students who were killed. Summiyah described the scene during the aftermath, "It is interesting how when we came to school, the whole campus was quiet. It was hardly any students here." She found that like some Tubman students, feeling emotionally drained and stressed led her to seek time off. Sometimes she would take her sick days for mental health, needing to withdraw from the unhealthiness of the school environment. Taking days off were important for her to rejuvenate herself and replenish her energy in order to be healthy for her family and her students.

Similarly, Marvin took days off to cope, "When it gets too stressful, I come back within." He also remarked that he had a student who displayed similar behavior.

I have a student who doesn't come to school everyday, but she's still interested in getting an education. So she may come in once every week, or every two weeks, just to come do her assignments and then she'll cut.

Student attendance was a general concern for all of Tubman's teachers. The notion of avoiding the source of stress is common among people who live with PTSD. In the cases of Summiyah, Marvin, and the aforementioned students, avoidance provided needed time off, yet potentially allowed them to re-focus on their work.

Self-medication. People with symptoms of PTSD are often known to self-medicate by using drugs or alcohol to feel less tense. Frank found that he was going out socially and drinking alcohol to alleviate his stress. He disclosed, “I never really talked about it or dealt with it.” He mentioned that during our interview was the first time he had thought about how he was coping with his stress from work by drinking. Frank said,

I definitely internalize Tubman so that when I’m outside of here I’m just like, ‘Oh work was work.’ I don’t see it as stressful. I guess I don’t view it like that but it’s definitely stressful. I noticed when I was outside, slowly but surely I started drinking more, so that was interesting to me, like, if I really think about it.

Frank continued with greater detail,

And then it got to the point where my tolerance went up, so I started drinking more, and I would never go into it like I’m drinking to get drunk...but I’d be lying if I said I didn’t like the feeling I got...when its like, ‘Ok, I like this state right here...I don’t wanna push it more, but I don’t wanna go back to nothing....’ I gotta be mindful of that. But this environment, it’s like as soon as we’re done I’m like, ‘Oh, I need a drink,’...that’s my go to.

In his reflection, Frank revealed that drinking alcohol was his way of coping with his demanding job as a teacher at Tubman. The alcohol was becoming his equivalent of stress medication. He was becoming aware of how much alcohol he needed to feel better as his tolerance went up. Self-medication is typical for people with PTSD and was prevalent among Tubman students as well in dealing with their external stressors.

Using drugs was widespread among Tubman’s students. Marijuana was the drug of choice for most, but others included pills, powder, and “bo” a street drug based on the cough medicine, Robitussin. According to Tammy, students “come to school at 8:30 high. Need smoke breaks or nicotine breaks, a habit of escape. I don’t want to feel. I don’t want to deal. I don’t want to think. I just want to numb it all.”

Summiyah additionally noticed that self-medication was an indication of a multitude of other problems. She noted a particular student who was constantly getting high had been beaten up by a group of girls,

...and her mama came up here and made her fight them so that just shows some of the stuff that they dealing with. They dealing with all the stuff by self-medicating. Time and time again, I hear so many stories. They not living with parents. They living with grandparents or aunties and that’s a blessing, I don’t see anything wrong with that...but it’s the reasons...parents in jail or on drugs, it’s that abandonment...they parents are unwilling to take care of them due to certain circumstances.

Summiyah, like Tammy and Frank, recognized that self-medication was a way of seeking release from high-intensity situations encountered. Internalized symptoms of PTSD involving shutting down, dissociation, sleep disorders, anxiety, avoidance, and self-medication are a few ways that teachers and students paralleled each other in their reactions to stress. The following sections show patterns that emerged from teachers’ and students’ external displays of PTSD symptoms in

the forms of outbursts, hyper-vigilance and irritability. Recognizing these symptoms contributed to teachers feeling empathy with their students.

Outbursts. Though self-medication is perceived as an internal way of coping with stress, the effects of the drugs could potentially manifest externally in outbursts. Summiyah noticed that mood swings were prevalent among students who were high which posed different challenges. Their mixed emotions in a self-medicated state led to unpredictability. She stated that some students were actually easier to deal with when they were high, but other intoxicated students brought negative energy to the classroom. The lunchtime break seemed to be a common time when students used drugs. Summiyah said,

I had a student who came in high after lunch. She's really goofy...cute-acting...but (Summiyah increased her volume so that her students could hear her) some of y'all come vicious...I had a student and she was calm and wanted to do better, on top of her game. The next semester I had her after lunch and she had violent, angry mood swings.

Because of their traumatic stressors, some highly emotional and self-medicated students were prone to having vulgar outbursts in class. In the following, Summiyah shared an example of a disrespectful encounter with a student when she was attempting to assist her class. She recounted,

I felt that I would be trying hard to accommodate students, going table-to-table helping students and not fast enough. A student said to another student but loud enough for me to hear, 'This bitch, something, something, something.' So that was a big trigger for me, I am helping but that was not acknowledged.

Frank also had times when students insulted him derogatorily, as in the following examples from students, "Nigga, I ain't takin' no test, fuck you," "Bitch, tryna hate on me...", and "Bitch, fuck you, you don't know me, Mr. Frank." The last phrasing shows the complications of disrespectful discourse in the terms "bitch" and "fuck you" but at the same time the respect of addressing Frank as "Mr." Frank. Emily satirically announced that to teach at Tubman, "You have to be able to take abuse. You have to not mind that [students] cuss you out." In Nicole's opinion,

...sometimes, I feel that just the language that students are using is... intolerant... Certain words, of course. I really have a hard time with anything I see as bullying or intimidation. That's one of the things for me, like my whole life. Certain words that they use drive me crazy, like things that I think are very demeaning and disrespectful to one another in this space...it goes back to the normalization thing. They think [these words] are so normal. 'Who doesn't say that?'

While Nicole commented on the language students used amongst each other, Frank experienced rounds where students used the same language toward their classmates on his behalf, "Ya'll need to shut the fuck up. Mr. Frank is tryna talk."

As Marvin described the discourse used at Tubman, his explanation showed an acceptance of the way that students speak. He expounded,

...it's the rawness of the language...the students expressing themselves, they don't use a lot of academic vocabulary, they don't use a lot of formal language because they're telling you what's going on. It's a lot of profanity, non-standard English, hood talk. From there you find out a lot. It's almost like going from 2-dimensions, to 3-dimensions. It's like a whole different reality that students are going through that they're sharing with you.

Notions of language and outbursts were evident in the way that students would cling to their cell phones. In fact, for some, cell phones seemed to represent a parallel for the aforementioned idea of teachers needing support networks. Emily struggled almost daily with the cell phone battles in her class. She often had to call for the safety officer to help her deal with the situation. Emily described an encounter that was typical for her,

She had her phone out, so I said, 'Put your phone away.' I see her phone in her hand again and I say, 'I already told you if I see you with your phone, I confiscate it.' She flipped out and then I had to call [the safety officer]. I firmly believe that if I say I'm going to do something, I do it...It's just a line that I don't want to cross.

She said, "It's the small things that set students off. Something not serious to me is so serious." As seen in chapter four, the idea that students would use their phones in class and then not want to follow through with the consequences was a serious issue for Emily.

However, Tammy explained that for students, "phones are their lifelines." This perspective aids in understanding how students perceived their cell phones as their keys to communication with those who comprehended their situations. Like the teachers, students having access to people who understood them was imperative, therefore having a phone confiscated was seen as a threat similar to being gagged.

Hyper-vigilance. In relation to PTSD, hyper-vigilance takes shape as a protective mechanism to guard a person from an unpredictable threat. Frank mentioned a time when he lost his composure in the classroom, yelling at a student when it was more about where the student was located that set Frank off than what the young man said. In Frank's words,

I remember one time I was in class last year, and they were getting into it like, 'This shit is too hard.' 'You're too much.' 'Go to [a comprehensive high school] if you wanna teach.' And then the students started going back and forth, and getting pumped up and then...Jaleel wasn't even in the discussion, he just happened to walk behind me and say something—no different than what everyone else was saying—and in reality it was probably less. But it was right in my ear, and I don't like people being behind me; and so immediately I took my aggression and frustration out on him.

This example of hyper-vigilance showed that Frank perceived his student as standing in a threatening position and invading his personal space. He wished that he had handled the situation differently and recalled with compunction,

...when I was teaching every period in a row for that two month period-I didn't get a chance to address it, which I know is the effective way of conflict resolution...But when I did talk to him, I would say he did kind of understand, but it still affected him because he didn't have too much to say, he was just kind of like, 'Okay.'

Frank seemed to regret his reaction to his student being behind him and came to the realization that it was extreme. This situation also inspired a re-conceptualization of his classroom management and affirmed the need to deal with conflict in a timely manner.

Nicole shared an example of how hyper-vigilance manifested in one of her students. She said he was walking around her classroom with a negative affect, unable to sit still, staring at other students. Nicole expounded,

One of my students he came in and he just looked...an absolute mess. First of all I was like, 'Is he high? Is he on something right now? No, he's not.' He was really anxious and moving around a lot. He like could not pull himself together...He was like you know going through it, I'm homeless, my dad lost his place. I'm bouncing around from couch to couch. I'm basically just trying to focus on eating, just find a meal...I kind of talked him down. He was fixating on other people at school looking at him funny, feeling like he had to fight. He was really in defense mode but the underlying issue was that he felt no security whatsoever. No food, no shelter, really.

In this example, Nicole was in tuned to the way that this student was exuding his symptoms of trauma and knew that she needed to get the full picture of what was happening to him. Perceiving threats, both Frank and Nicole's student had behaved in a hyper-vigilant manner reflecting symptoms of PTSD.

Irritability. Feeling irritable due to the emotional discomfort of a situation is recognized as a common symptom of PTSD. In the following examples, teachers shared their accounts of outbursts of anger in the classroom when they became irritated during class. Nicole and Frank both use the term "flash," which is a word taken from the students' vernacular meaning to become irate.

As Nicole processed a time when she got mad at her class, she realized the instance was about more than disrespect. Her students made her upset because they replicated a trigger that she encountered at home. She recalled,

I like flashed yesterday really bad. We were doing their poster projects and it was really stressful. Some of the students were putting stuff on my desk. We have an established system but they're leaving their stuff there. They are tossing their stuff in the garbage can, so many kids. 'No more things on my desk!' I just need some space. I think it's...a reminder of stuff I haven't done. I just need like a sliver of peace, it was just the clutter and messiness and people in my space who are not respecting or using my space. So anyway, I do the same thing at home. Really? I have to come home to dishes in the sink? And that became the representation for everything else, I just feel like there is so much on me. And I really don't know how to make it lighter, I really don't.

Nicole's narrative shows her feelings of being completely inundated both at school and at home. An attempt to provide students with an assignment that was relevant, engaging, and meaningful to them was met with a messy classroom. Similarly, after working long hours and preparing meals for her family, her nurturing act led to more household chores.

Nicole described a student who also showed signs of irritability. She said that the young woman

...had problems...pretty consistently...she's been lashing out at other students. She's quick to fly off the handle at everyone else, which is exhausting...Then I come to find out that the living situation has changed and she's not living with her parents anymore, and you know there are a bunch of other things going on. And so she's almost gotten into several fights in class because she's like, 'Well, I'm going through it.'

The student Nicole described appeared to be irritable because of her situation at home and took her emotions out on her peers.

Frank mentioned, "I've had times where I just lose it in class and its only been three or four times, total to date where I've flashed on the students and I'm just like, 'Whoa, what am I doing?'" Frank elaborated on what made him upset in those moments:

I think the triggers were that I was trying to explain a part of the lesson, or help a student, or quiet the class down, or even trying to break up an altercation; and for me it gets to the point where I respect every student whether I would like to or not...So especially in the class setting when I'm respecting the space and the environment I feel like, not only are you guys disrespecting each other, you're disrespecting the space and the learning environment, but now you're disrespecting me. And that's when its almost like I can relate to the students whenever they reach that point, whatever the point is, I think I've gone off.

Frank's comments showed that everyone in his class, including himself, was vying for respect. Important in this example was the admission that Frank sees his reaction as completely linked to his students' reactions to being disrespected. He went further to describe the scene of a fight that he helped to break up where he saw firsthand the importance of respect to his students. He recalled,

I get Demetria, and start pushing everyone back...the safety officer's got Laila, and she is kicking, scratching, clawing, trying to get to Demetria, on the ground, clothes coming off because she's squirming so much...And it was crazy because I think this goes back to the point I was talking about earlier, all the shit they have to deal with. At this point she's bawling...She had too much rage, so much anger, in a way, so much hopelessness—that's what I saw...And it escalated so much...and her friends were just around, just chilling, while the safety officer was trying to get control of her. But she said... 'Give me my knife, I'm finna stab this bitch' over and over again, she would not stop saying it. So then I run ahead and get Demetria and take her to my classroom; but the whole time I hear Laila like, 'It's not over. I'm finna get you' to the point where school was on lock down for a little bit...And I'm just like, this is a trip because, this is all they have, and that's why they're so big on respect because that's all they got.

Seeing the two girls fight reified for Frank how important respect was for his students. He recognized that there was more to the story than just the fight and that his students had other elements in their lives that caused stress and pain.

Along with the student examples, teachers poignantly shared their moments of irritability that tended to follow patterns. Nicole recognized the pattern of unfinished work piling up and her thoughtful acts being disregarded which caused her to react. Frank was immersed in an environment where students were reacting to being disrespected and then found himself mirroring the same behavior. In the same vein, students who display irritability could be reacting to their feelings of being disrespected, overwhelmed, disregarded, and triggered from home or life experiences.

Frank also disclosed a time when his participation in questionable discourse with a student ended in him making more of a connection to the student as a result. In his class, the year before the PD training, he had a system of locking his door when the bell rang, which meant that students who were late could not get into class. On one particular occasion a student became irate about the locked door and the following situation ensued. According to Frank,

He wasn't in class and you know, I locked the door...but I guess at the time I was a new teacher, it was a new thing, so everyone didn't know that, or respect that...I was teaching, and everyone was in class taking notes, and he banging on the door—not knocking on the door—banging on the door...Then it got to a point where I thought he was kicking on the door...and then I just snapped. So I was like “Nigga, what’s up?” So then of course he comes back, because if I’m like coming at him in a hostile manner, he has no choice but to return that. So he’s like “Nigga, you hear me knockin’ on the door” and at this point I’m out of the class, door open, I had already dropped the papers on the ground. And it got serious like ‘Nigga, I don’t give a fuck, you ain’t knockin’ on my door like that.’...I came back in class and everyone was just like [blankly staring], and I’m just supposed to pick up my papers and go back to teach like, ‘Okay, so supply and demand?’ Naw. So in that sense they were shook.

Frank continued to elaborate on the situation, explaining that his relationship with the student improved after that incident, “But the way that happened...me and him are cool after that, to this day...me and him are always joking and stuff.” However, by describing the other students in his class as “shook,” Frank was saying that his class was scared and taken aback by his reaction possibly expecting a physical altercation to ensue.

Frank additionally thought about what outsiders would think. He said, “But I think for an observer coming in like, ‘Why are you cursing in the classroom? Why are you saying ‘Nigger’? But for me, if you can show me a better way, like, tell me.” In this comment, Frank revealed that he was still re-conceptualizing his classroom management and was open to hear different approaches. His account of using the same discourse as his students was an example of an attempt at meeting his student where he was, a concept that his colleagues were re-imagining in their practices as well.

By teachers analyzing how they, like their students, suffered silently with internalized symptoms or externalized with outbursts, teachers displayed sentiments of empathy.

Fragility of Students

In addition to teachers empathizing with their students, they recognized their students' fragility. Understanding where students had come from was key to being able to meet students where they were. Negative media portrayals of Tubman as "pre-prison" (LaBarre, 2006, p.1) play up negative stereotypes that frame the youth who attend as "superpredators" (DiIulio, 1996). Many of the illustrations above run contrary to the ideas of being hardened, unfeeling, and criminal. Both Summiyah and Nicole independently made references to their students being fragile. Nicole added, "They are bearing all this weight."

Part of growing up in a highly stressful environment meant exposure to adult situations at a young age. Khalil provided an analogy, "When I went to kindergarten, I remember holdin' my mom's hand. But I think these kids are holdin' their parents' hands." With this statement, Khalil referred to how quickly many of the students have had to grow up. Illustrating this point in the following example, Marvin asked his class, "Who down for young life?" To which a student replied, "I don't even know what young life is."

Frank pointed out a day when he recognized how young his students were. He had just given a verbal lashing to one of the young men in his class,

...and you would think I was his dad and he was in trouble. All the students stopped and were looking at me to the point where, I was in his face, and I was like 'Whoa, shit,' and he just walked out of the class. And that was deep for me because...at that very moment it was like, these are still kids. Because he didn't do anything to me, he didn't say anything, he didn't say shit back to me, he just had his head down, and just walked outta class. Didn't walk fast, or briskly; just walked out, closed the door gently, and that was it. And at that moment—especially in that situation—I was like, 'Damn, these are still kids.' Even though they have kids of their own, even though they're still dealing with stuff, seeing their parents murdered, or their brother, uncles, cousins. Family member's a crack-head. They're still kids at the end of the day. I almost teared up. Inside, I was just like 'Frank, that's not you.'

Frank also recapitulated seeing one of his former students with visible facial lesions and bruises who had been beaten severely by an ex-boyfriend "because she didn't wanna talk to him anymore, was ignoring his phone calls." He saw her in the street and just started choking her, "she passed out, and fell on the concrete." He said, "Talking about Hashima I'm almost tearing up, cuz I'm like, no one should have to go through that shit..." Frank continued to recall another traumatic event in a student's life and his feeling of powerlessness in the process:

But hearing the students—hearing about Rachele and how her boyfriend got killed in her arms, and her brother...I'm just like, when those personal relationships get tight with students—which I love about Tubman—they start letting you in, and I'm just like, I just sit there stuck, like my heart hurts.

Frank's poignant examples displayed both his student's and his fragility. He felt emotionally moved by his student's reaction as he vividly described the scenes of his students walking out of his classroom instead of retaliating, being beaten, and holding a deceased loved one. Frank also shared his own regret about the incident where he screamed at his student and acknowledged his uncharacteristic behavior. His account juxtaposed with Khalil and Marvin's provides a sense of

the duality that students faced in terms of being forced to take on adult responsibilities yet still being young.

Tammy explained that there were many situations that students faced in their homes which made them explosive. She explained, “You name it they have it. I work a lot with the young women; it all stems from home. Its always family—they have a terrible relationship with mom; they’re in foster care; they’ve been molested or abused by family members.” She brought up one particular student,

Her grandmother died, her primary caregiver, no one else to have her. Her auntie and her uncle took her in. Uncle. ‘I wanted to take you guys in because I thought you were cute.’ Then for 2 years her uncle raped her every night. Through the course of that she was removed from the home, was placed in a mental institution. Now anything sets her off, she’s very volatile. Three other girls had been through the same thing. That bothers me too, that these men are still preying on our girls. I take that home with me; no way I can shut that off.

Tammy continued to talk about how traumatic situations that many young women faced manifested in their interactions with others at school. She added,

Extreme cases are so volatile. Anything will set them off. It could be a look, another person talking about them. They could hear someone remotely say their name; they’re so on edge, ready to fight and defend. The power’s been taken away and they want power over what they can control. It’s the girls who are always fighting, not getting along with other girls. Usually can’t get along with teachers, don’t like the authority ‘You not gone tell me what to do’. They don’t want anyone telling them what to do; they want the control, they want the authority.

Tammy went on to explain how being violated also complicated young women’s lives outside of school.

With the young ladies it’s prostitution of some form. They’re doing it, or somebody’s seen them doing it—prostitution or very promiscuous. They don’t care. What’s been taken from me was precious so I don’t care. It comes out in a lot of ways. Generally kids who are not functioning well have been through an extreme trauma. Something has been broken and no one was there to protect them.

The above examples displayed their abrasiveness and their vulnerability. In a deeper sense, Frank and Tammy’s narratives illustrated the power of recognizing that students who have faced trauma like those in this continuation school possess a fragility that is too often disregarded.

Meeting Students Where They Are

With empathy for students and a realization of the fragility of the youth they served, Tubman teachers displayed a heightened awareness of the mental health issues prevalent in the school community. For teachers this understanding along with cultural competency and their recognition of student strengths would impact the way that they taught their classes as well as

dealt with issues of discipline and were therefore able to better understand how to meet students where they were.

Tubman teachers demonstrated a high level of cultural awareness regarding structures of inequity that produced PTSD in their school community. The first interviews with teachers showed a keen perception regarding racism, white privilege, and oppression. Khalil pointed out the difference between “going through shit and putting yourself through shit.” He continued,

They think that all the shit we go through, we put ourselves through, but that’s only the oppressors’ reality...But we really going through some shit. We put ourselves through this? No. We did not put ourselves in slavery. We did not put ourselves in Jim Crow. No. These are the ramifications of that.

Khalil made clear the connection between where Black people are presently and where they have come from signifying that the domination from the past still remains. He explained that chattel slavery and apartheid have been beyond the control of Black people and have led to the mental, emotional, and physical crisis present in the Black community.

In Delphine’s words, “On a much wider society level, why does this happen? Why is it allowed to happen?” Delphine began to cry as she emotionally explained that her past attempts to take action on behalf of her students had been fruitless:

Many times I feel like, ‘What do I do with this information?’ I go to CPS and they close the case. And I’ve done that a couple of times. It’s really hard because I feel very powerless because I see it at epidemic proportions. What happens to these kids? There’s an added piece to it for me because I am a white woman and I feel like I’m trying to figure out, ‘how do I fit into this continuing oppression?’ How do I fit into this community here? There is the whole like things are going on, and we have so many resources, but it’s not being like shared. What’s my role in all this, you know?...So it’s really hard. What am I doing to change things? Nothing.

Delphine recognized her racial privilege as a white woman but was perplexed with how to manifest change on a broad level. At the end of her exhalation, she explained that she felt that her efforts were ineffective.

Similarly related to overarching societal tensions, Nicole said, “Sometimes it’s hard for me to watch what our kids have to go through. Harder to see the scale of suffering, what kids have to deal with in this country. I almost think it’s getting worse.”

Nicole questioned her contributions to the positive growth and development of her students when they confronted so much negativity. Nicole said,

...there are other things that make me sad on a daily basis. I think when the kids open up and talk about their lives; that’s really depressing. And their outlook on their lives, and on education’s role in their lives, it’s really disheartening. And I have to wonder, with whatever little bit that I’m doing in a quarter or semester...can I possibly combat with stuff they’ve had to deal with before? And the stuff that they’re bringing in like negative attitudes about school? Or maybe school not being an understanding place for what their lives are?

Though these realities, pose a certain degree of pessimism, it could also be considered acknowledging reality. The power that teachers had at a personal level was important to recognize and model for students because of the many societal factors that were out of individual control. As opposed to a paralysis, there seemed to be a sense of empowerment that arose from this awareness as the PD sessions continued.

In fact, in the second session there was a portion of the PD dedicated to discussing the strengths of Tubman's students. Seeing beyond the stereotypes of their students, teachers looked at the assets that their students brought to each classroom. Tubman teachers overlapped in describing the many positive characteristics of the youth in their classes. Teachers collectively compiled the following list. Resilience, humor, intelligence, street smarts, resourcefulness, generosity, beauty, wisdom, love, curiosity, pride, and empathy were acknowledged along with possessing realness, honesty, technology skills, and a sense of social justice. Student talents included being able to creatively express themselves via acting, singing, rapping, dancing, teaching, making art, writing poetry, and doing hair. Teachers also recognized that their students worked well as mentors for younger children.

By acknowledging structural frames of racism that produced PTSD as well as the potential of their students, Tubman teachers could further re-conceptualize their curriculum and discipline.

Curriculum. Teachers recognized that they did not teach at a comprehensive high school and in the third session, a conversation arose around how to deliver a curriculum that included mental health therapy and met academic standards. Frank asked,

Do I do what I'm supposed to do, what the state says I should do? None of them would pass. They need Econ to graduate. 'Cause if that's the case then like 23 people fail and not like with a 58% like 5%, 3%. Or the ones that do show up, do I just give them points for showing up?

Tubman teachers were in relatively autonomous positions to control the way their curriculum and state standards were handled in their classrooms. Although teachers mentioned different strategies that they wanted to employ, in their own ways teachers indicated on a survey that they wanted to meet students at their level.

Tubman teachers recognized that many of their secondary students had been academically disregarded before reaching their classrooms. Reading or doing math at an elementary or middle school level and being passed on previously, for example, meant that they had already experienced a different educational trajectory from their peers at a comprehensive school. In addition, the fact that Tubman students had most likely experienced trauma in some form also meant that they had experienced life differently from many youth. Marvin explicated trauma's effect on students from a math teacher's perspective. He said,

Something happens where it's a domino effect...we have a student that we know has a history of documented issues...a history of bad experiences, then by the time we get them, you know this is a high school...this is an Algebra I class; Algebra I assumes you've had at least 8 years of arithmetic. I have students who've been taking Algebra I since the 8th grade, and they're probably 10th or 11th graders, and they've just been stuck. So trying to get them out? That's the typical story. I can do an independent assessment to

see if the student has an aptitude to learn math and 9 times out of 10 yes. There is no reason for a student to have to repeat a class over three times. So how to fix all of that in a span of 20 weeks is the pinnacle of the situation we're faced with more often. And it's only compounded with the personal stress that the student is dealing with. That's what makes it difficult. Trying to relate that exact algebra that the student took for three years to the exact causes of the stress inherent in their life. Trying to relate it to reality. That's a hard one.

Marvin acknowledged the trauma that students' had faced and the limited time available to help a student rectify academic credit.

In developing curriculum that reflected the PD, two teachers surveyed said they wanted to include more opportunities for students to teach, while two other teachers wanted to increase the amount of scaffolding that they did. Similarly, a fifth wanted to use "the stages of knowledge development," possibly Bloom's Taxonomy discussed in the first PD session, in planning curriculum. A sixth teacher's goal was to incorporate more "hands-on learning." The seventh teacher mentioned "infusing community-based organizations" while the final teacher wanted to begin "working around PTSD therapy with daily lesson plans and unit pacing guides in the classroom." In these statements, teachers showed their concern for the academics of the traumatized students they taught. Scaffolding received the acknowledgment of three of the eight teachers, while two others mentioned allowing students to teach. The ideas of hands-on learning and community partnerships showed that teachers wanted to bring novel aspects into their classrooms. Finally, the last teacher discussed bringing aspects of PTSD therapy into the curriculum explicitly.

Discipline. In the second PD, Khalil brought up the idea of teacher power at the local level. He pushed his colleagues to reflect on the amount of control that they felt they needed in their classrooms. Khalil explained that teacher assertion of power could be challenged when a teacher did not provide enough structure, was not consistent enough with students, used threats of grades or disciplinary action, or did not seek help in problem-solving (see Figure 7). His group of math and science teachers also presented ways that their colleagues could change the power dynamic in their classes. Some of their suggestions were observing other teachers; acknowledging student strengths; and establishing mutually respectful relationships with students, families and colleagues (see Figure 8). The realizations of Khalil and his colleagues stood out as a pivotal moment in the PD session. The teachers verbalized their agreement on the need for a re-conceptualization of teacher power and control.

On a survey, one teacher reflected, "I think that Khalil was able to speak about the issue so poignantly when he said that it was a power issue." Teachers described further how the PD on PTSD helped them re-conceptualize classroom discipline. Half of the focal teachers said they wanted to discipline their students with more patience. A quarter of the teachers mentioned empathy, while other attributes named were respect, positive reinforcement, sensitivity, understanding, and love. One teacher said, "I'm much more mindful of where the students are emotionally and mentally." Another focal teacher commented on "trying to work from the point of view that their behavior has reasons behind it." Similarly another teacher mentioned using "a PTSD lens to view behaviors in the classroom."

It was evident that Tubman faculty recognized the trauma their students faced as they noted elements that they wanted to incorporate to discipline the youth in their classes. A

punitive approach used at the comprehensive high schools was what brought most students to Tubman in the first place, therefore by re-conceptualizing how discipline took place Tubman's faculty illustrated that they wanted to change the dynamics.

This chapter has shown that teachers displayed the capacity to have empathy for their students because they found that they could somewhat relate to their symptoms of PTSD vicariously. They showed the ability to see beyond the negative stereotypes of the youth they taught in recognizing their fragility. Tubman's faculty also established their concern for students' academic and emotional needs wanting to meet them at their level in both the way that they taught and disciplined their students. The following chapter will highlight the actual implementations based on these understandings.

Chapter Six Teaching as Healing

Wake up all the teachers time to teach a new way
Maybe then they'll listen to whatcha have to say
Cause they're the ones who's coming up and the world is in their hands
when you teach the children teach 'em the very best you can.
The world won't get no better if we just let it be
The world won't get no better we gotta change it yeah, just you and me.

*-“Wake Up Everybody,” written by Victor Carstarphen, Gene McFadden,
and John Whitehead, sung by Harold Melvin and the Blue Notes*

In addition to ways that the focal teachers re-conceptualized their practices based on elements the PD sessions helped them to see in their students and themselves, this study also found a number of ways that they actually made changes in how they implemented instruction at Tubman. My analysis of data revealed six findings in this regard. The first finding was that teachers began to put more effort into building relationships which they came to see in the PD as crucial to making connections to students who suffered from symptoms of PTSD. A second finding was that teachers scaffolded their lessons to allow more opportunities for students to grasp the material they were teaching. Thirdly, I found that teachers had increased their students' opportunities to teach. Additionally, I found that teachers developed ways to share the power that they wielded in class. A fifth finding was that teachers provided curriculum that engaged with trauma, cognitive behavioral therapy (CBT), or PTSD explicitly. The final finding was that Tubman teachers changed their discipline strategies using some of the CBT tactics learned in the PD sessions.

Building Relationships

From the first PD session, teachers learned that strong, positive relationships were connected to both effective education and mental health therapy. Consequently, in the following examples and in survey responses from the final PD session, teachers consciously worked toward building connections with their students. Because Tubman had a small school population and teachers would have students more than once, it was already conducive to building relationships. As Emily, the English language arts teacher, commented,

The great thing is that we have had the students for a long time. I've had a lot of students who struggled the first year; and they didn't like me but they come back; and then they love me. To have them again is one of the most valuable things that Tubman does. It's a small school.

In addition to a small learning community and having students for multiple classes, teachers at Tubman employed a variety of strategies to promote relationship building. These included taking students on fieldtrips, speaking to them in one-on-ones, and seeing the students as family.

On one survey a teacher stated being “more mindful of scheduling ‘breaks’ into academic work time.” A prime example of a pause in schoolwork was the excursion Marvin planned to a local art and history museum that was hosting an exhibit on the Olmecs. Learning about the Olmecs, proof of ancient African people’s presence in the pre-colonial Americas, was structured to connect and celebrate the cultures of Black and Latino youth. Though there was little connection to math, Marvin, the math teacher, prioritized students understanding their history and building relationships. Marvin explained that when he prepared for the field trip to the museum, he wanted to include everyone particularly the students who did not academically qualify. Thus, he did not make requirements for grades or attendance. “Usually the fieldtrips are selective,” he explained but he wanted as many students as possible to come and gain knowledge of themselves and their ancestral roots. Marvin said, “One student is going through it and I made sure he came.” He told the young man, “Don’t even worry about this other stuff. You got to come on the field trip. Enjoy yourself. Do this for yourself. It’s all love, granted, you not the 4.0 student, maybe I can’t stand you sometimes, but you know, come on, get on this bus. This is for you.” Marvin described the Tubman students’ entrance into the museum in the following way:

We got 45 students, a third of the school, and they were happy. We went to go see the Olmec exhibit. We go, we get there, and the first thing you notice is the shock. It’s the whole sophisticated American studies, pre-Columbian scholar, retired people there. Then you see the ghetto kids come in...Everybody was lookin’ at us crazy, up and down.

He continued, “I’m observing the youth. The Europeans were talking to the youth and the youngsters was holdin’ it down. They engaged in high intellectual conversations with these white folks.” In his playful way, Marvin made sure his students understood their connection to the African history they were learning about, “That’s you, bruh. He do got your nose though.”

In the African exhibit, Marvin pointed out, “You see? This a part of humanity. Who contributed this stuff?” One of Marvin’s students posed the question, “All these white people got our stuff from around the world?” Marvin replied, “Man, they got all our stuff.”

Later when they ate lunch at a park, Marvin said that the struggling student he had earlier encouraged to join him on the field trip had generously treated his friends to a meal. Marvin said, “He made sure they ate too. He spent money on his friends getting them lunch.” This detail poignantly illustrates that the generosity that Marvin extended to his student was in turn passed on to the student’s friends. Marvin encapsulated the trip as follows:

It was a beautiful day. It was unfair because it was like if you in the desert and you thirsty and someone gives you a Visine drop of water. They are thirsty for knowledge! I was happily surprised with the way they conducted theyselves. They were very respectful. It was just a good ‘away-from-the-plantation’ environment. We had a good time ‘cause all of us bonded.

Using the expression ‘away-from-the-plantation’ was Marvin’s reference to Khalil’s description of fieldtrips and other opportunities to leave their school’s community which he saw as oppressive and stagnant. Similar to the concept of wilderness programs and residential treatment programs that affluent, traumatized youth have access to, Marvin espoused Khalil’s belief that getting students away from their environment, if only for a day, was essential to their emotional growth. It was important to him that specific students who might not be doing well in school

attend the fieldtrip. Marvin added, “In a haphazard way were dealing basically with nurturing and healing ourselves from the trauma.”

In addition to fieldtrips, Marvin and other teachers worked to foster relationships with students by making time to talk to them. This corresponded to surveys that teachers handed in at the final session discussing their attempts to communicate more with students. One teacher noted allotting “more time for conversation, re-framing for student agency.” Another teacher set aside “time for conversation and interpersonal learning.” A different focal teacher wrote, “I strive now to be more open and transparent with my students so that they in turn open up and trust me to share the personal issues they bring to class.” Marvin engaged students in conversations on a wide range of topics. The following is an excerpt from a dialogue where he was trying to convince a student who has been in trouble in the past to go to college:

Marvin: The best thing I could tell you? College is fun. It’s some responsible kind of fun but we go to college ‘cause it’s fun!! You still gon’ have to deal with certain realities but what you got in your mind is so limited.

Student: But school is easy though.

Marvin: That’s the whole point! But how many people do you know that got academic scholarships?

Student: I don’t want to leave my hood.

Marvin: If I didn’t leave, God knows where I would have been, on the streets, in jail. The world is my hood now.

The young man seemed to express that he was fearful of being in an unknown environment. Marvin commented further on their discussion. “He feel like when he turn 18, he gon’ get gray hair or something. He don’t wanna get old. All he can see himself doing is have his bag packed with nowhere to go...He has that *Cartoon Network* type thinking, simple, get it the simple way.” In this dialogue, Marvin made a connection to his student in a powerful way. He explained that he was once in this young man’s position and he made life choices that benefited him and gave him a different perspective.

While Marvin used his own personal stories with his students, Summiyah brought a practice of affirmation from her spiritual meditation as a ritualized way to make connections with her class. These personal words of positivity to her students took place individually at her desk. She used the following dialogue in one-on-ones with her students:

Summiyah : May I acknowledge you?

Student: Yes, you may.

Summiyah : I would like to acknowledge you for being...

Summiyah would then use one of describe her student with words or phrases such as intelligent, warm, caring, sensitive, committed to your work, committed to bringing joy to others through laughter, a great listener, generous, etc. Then she would follow with an example of how they exuded that quality.

Summiyah : Do you receive that?

Student: Yes, I receive it.

In this acknowledgment, Summiyah looked at her student eye-to-eye and made a personal connection. This was her way of honoring the positive traits that the youth brought into her class. In addition to the affirmations, she also addressed her students in one-on-ones about other issues. In the example she gave in chapter four, Summiyah explained how an in-depth conversation with her student impacted the assignments she gave her based on the relationship they had built and the understanding of the traumatic life situations she was facing. The student shared that she was kicked out of her home and that four of her friends had been killed. Summiyah offered her alternative assignments for her ethnic studies class which included a therapeutic art project and keeping a journal.

Nicole, like Marvin and Summiyah above, found that personal check-ins were an important aspect of relationship building in her class. She reflected,

I always greet everybody and ask them how they're doing. There's usually a good chunk of time in the lesson where there's independent work and it actually gives me space to rotate around and talk to everybody without everyone hearing...usually I try to have a pretty upbeat classroom so that, regardless of what's going on it's not a downer. And I do check in with them—I think I'm pretty good about that; so they do share a lot of things. Also being able to pull students outside if I really see students struggling. I try to be pretty perceptive of their personalities their behavior and anything out-of-the-ordinary.

Nicole's practice of speaking to each student on a daily basis allowed her to be conscious of bizarre characteristics that students displayed. She also structured her lessons in a way that allowed for personal time and tried to maintain a positive and emotionally comfortable classroom.

By speaking of students as family members, teachers further humanized their students. As seen in chapter five, Nicole approached her concern for students from a motherly perspective, "...am I going to come back Monday and find out something terrible? I hope all my kids are being safe." Khalil also saw his students as an extension of his family and associated food with relationship building. He said, "I love my people and I love my kids." He also felt that partaking in meals with his students was familial, "I cook for my kids. I feel bad that I can't cook for them all the time." His generosity to his students was abundant because similar to the ideas Marvin expressed, he did not want students with a hard past to feel like they had to constantly earn privileges. Khalil asserted that forgiveness was an internal process,

They don't have to feel like they gotta be guilty about their past. They're never gonna be forgiven from the system. You have to forgive yourself. The system is crushing us as well. Their growth is stunted because they haven't forgiven themselves.

Khalil felt that to be a successful teacher of youth who had survived emotional and physical trauma, "You gotta go outside your job description." Khalil stressed self-reflection, "You have to be critical of yourself." He added that with the PD,

I am trying to build a relationship where at least I have the patience for students to express themselves alone with me. Actually two students today, one student's uncle passed away due to cancer and he was really shook up about it. He was thinking about his cousin. So I know they know about not having a father.

Both Khalil and Frank commented on the challenges they faced as Black men working in a community where some fathers were absent. Khalil took the responsibility of being a fatherly role model in his community seriously. He recognized the issues of his students because he knew many of the students' families from growing up in the area. He explained,

Personally, I try to advocate for students that have been through trauma. I pointed out to a teacher that those young men's father was murdered. (Khalil shows me two students in a picture) I got several throughout the year. (Khalil points out another student in a picture.) Not only his father, but his uncle. They don't have the guidance. These behaviors come out in various ways. It bothers me when I think about how Bobby was murdered. I used to play ball with his uncle. I am trying to take his little brother fishing with us the next time we go.

In this anecdote, Khalil shows that several young men were struggling with the loss of other males in their lives. He felt compelled to speak up for and reach out to these young men. Frank noticed that in building stronger relationships, he found that he encountered fewer issues with the boys yet still had difficult encounters with the girls. He explained,

There's very few young men that I've ever had a problem with...More often than not they fall in line really quick; they take to me really quick, so to speak...I always—not always, but up until this year—had to work on how to deal with young women...Being a black male present, all the time...I'm gonna be here no matter what. But with them, it's a struggle. It is a struggle. I find myself playing more of the big brother role.

For Frank, he preferred looking at himself as an older sibling rather than a father figure. In that way, he was attempting to put himself in a less confrontational position with a population of youth who often did not connect with their fathers. Frank, the youngest teacher on the Tubman staff said, "I look at a lot of them as little brothers and sisters, so that definitely has a lot of effect on the way I come at them in class or my teaching style." Frank noticed that he addressed subject matter with a different lens from the previous year taking into account the tribulations his students had faced. He provided the following example:

In government especially, the stuff I notice is when it is kind of a sensitive subject area, Supreme Court cases, like abortion and stuff, I definitely do give them the option of doing independent work...I know they've got tons of experiences.

In class discussions, Frank noticed that he was protective of people who volunteered to share their stories. He explained,

...on that, my classroom management tightens down. 'If y'all hear peers experiences, y'all can't just be disrespectful.' Especially with some of the stuff we talk about in government. Nobody's ever broken down but I can tell when they just retreat inward. 'If you need a break just come back.' In that sense definitely it's influenced by the PD. It's more than just teaching the case. Last year, I might have done it without engaging the emotional aspect but it's heavy stuff.

In this statement, Frank showed that he had become more sensitive to the subject matter that he was teaching. Frank also said that he was “a little more relaxed than last year ‘cause last year it was like shape up or get out.” He noticed that he was able to respond to students differently, “They just have a lot of energy, and so I’m seeing beyond. Like someone will bring up prom and they’re all joking and laughing and then I’m all, ‘Okay, back to work y’all.’” By “engaging the emotional aspect,” Frank was able to understand his students better and create a more open feeling in his classroom.

It was evident that by having positive relationships with students, noticing their strengths came naturally for Tubman teachers, as seen in the list in chapter five. Summiyah and Khalil employed students to braid their children’s hair. By students sharing with teachers and teachers sharing with students there was a strong sense of community built at Tubman. The idea of unconditional giving on the part of teachers is integral in this section as Marvin organized a field trip for all of the students without prerequisites; Summiyah gave personal affirmations to students; and Khalil cooked for the youth. For Marvin, along with Summiyah and Nicole having one-on-one time with students was important to them in being able to establish positive relationships. As seen in the examples of Nicole, Khalil, and Frank, teachers commented on the familial aspect of their work with their students. Khalil and Frank, as two Black male teachers, also recognized further challenges in fostering relationships with students who may not have their fathers in their lives.

Increasing Scaffolding

As mentioned in previous chapters, it was understood that trauma had a severe impact on the academics of Tubman’s students. Therefore, comments that reflected scaffolding were brought up by a quarter of the teachers on their surveys as a strategy they employed more often in the classroom. One teacher remarked, “The pace is somewhat slower to encourage all students where they’re at, rather than where I want them to be.” Another teacher gave students more time “to process, reflect, write, and complete the lessons.” In the following examples, half of the teachers explained the components they used to break down larger projects and presentations that their classes would take on.

In ethnic studies class, Summiyah had students develop presentations on topics that were meaningful to them. However, before students could present, she made sure that her expectations were modeled first. Members of the community “came to the classroom such as...an independent filmmaker and the founder of a museum. They got to see what good presentations look like...” This allowed her students to analyze what made a “good” presentation. During the question and answer portion after the presentations, students posed questions to the presenters about the information as well as meta-cognitive questions about how they prepared. Their class discussions following each talk consisted of noting details such as the voice projection of the speaker, the engagement of the audience, the visuals presented, the speaker’s knowledge of the topic, and the relevance to ethnic studies. This helped her class to produce a rubric for their own presentations. They also had a class conversation about how to feel less intimidated about public speaking.

In order to prepare well-researched presentations, Summiyah said, “I prepared a lot,” in addition to securing guest speakers she also spent time “finding websites they would look at.” In her past experiences, Internet research had sometimes been fruitless because students would surf

the Internet and find it difficult to stay focused. However with this project, she noted, "...all of them were on appropriate sites for the project." Students did comprehensive research on their topics, wrote reports, and created visuals in addition to presenting to their class. Allowing students to teach and choose the topics that they wanted to present had a positive impact on Summiyah's ethnic studies class. This student-driven unit of inquiry allowed students to share aspects of their lives that were important to them. The following are the topics of her students: Photography, featuring Gordon Parks; Media Propaganda; Kajukenbo, a martial art; women trafficking; laughter and Black comedy; women and hip-hop; Black dance; racism; graffiti; Black hair; Native American culture; and the drawbacks of gang life.

One student was trying to keep a positive outlook on life. He told Summiyah that although people try to argue with him, "they can't take the smile off my face." She helped him develop a presentation about Black comedy. Summiyah expounded,

We looked up the benefits of laughter together. He read through the article and found that 'Oh, you're healing people when you make people laugh.' It had a lot in the article about a philosophy that he shared, how a sense of humor and preparing to laugh boosts the immune system and helps deal with crisis."

Summiyah described him as having "changed completely from last year." She said that he was previously not as focused and that she had seen a noticeable shift in his commitment to school. By scaffolding this assignment, Summiyah was able to break a large project into smaller, more doable tasks that ensured the success of her students. In addition the scaffolding led to student presentations that were well thought out, well researched, and confidently delivered.

In the women's studies class there was a form of self-research taking place. Tammy's class developed what eventually became a curriculum called "Pink Peace" which was an anti-violence campaign for young women. The project began with frank discussions about the issues young women in her class faced, exploring why girls fight, whether or not fighting resolved a situation, and what the consequences of fighting were. As a group, her class attempted to answer these questions in an effort to better understand their reasoning behind fights. This process illuminated the reasons why girls fought, who their audience was when they fought, and why they should work together instead of against each other.

Tammy explained that the Pink Peace objectives that her class determined were "to heal relationships between young women on an urban campus and give back to our community." She said that through this endeavor her students were able to "share what they have learned and experienced as young women." She created a space for the students in her women's studies class to use the wisdom and information that they had compiled to develop skits about issues that young women face. Their performances reflected their in-depth reflections. Due to the scaffolding, the class had worked together throughout the entire process building a base with all of the young women in the class, reflecting on violence among women, designing a curriculum, and becoming comfortable in front of large groups.

Emily, the English language arts teacher also discussed how she scaffolded her unit on urban fiction where students would ultimately write their own urban short stories. In the process of story writing, many lessons were learned by both Emily and her students. Emily said in urban fiction, the main characters typically "ruined their lives and they change or they just end up in a bad predicament." One book that she read for example, talked about "...two sisters who had been abused by their father and one becomes a prostitute." Though it was a stretch for her, she

decided to add this style of literature to her curriculum because her students inspired her. Emily admitted that engaging in this topic was a little out of her comfort level, “I don’t feel genuine teaching those books. I made copies of the books to go over them with the students to be able to read them critically.” However, in undertaking this unit, Emily discovered a novel way of teaching code-switching where the background of the story is written in Standard English but the dialogue is in the vernacular of the students. She worked on Standard English grammar lessons in order to prepare students for their stories.

Students also discussed how to write a story, Emily said, “To create a plot line, I told them to think of movies, their favorite movie.” In some cases, students re-wrote the films that they liked with various nuances. Emily listed, “Ghetto stories, Shottas, Menace II society, I don’t know but there is definitely a set canon of movies that they all love.” She said, “Some students chose to do that. Car pulls up and they run, they go to a drug place.” While others wrote with more imagination, “Some of them, I think they were their fantasies of their own lives. One boy wrote about going to prom with four different girls—on the same night.”

Students also participated in peer-edits to review their ideas and their work. Students relished in the process of brainstorming, writing, and reading each other’s stories. Some students went above and beyond the page limit in order to craft their stories to their satisfaction. Emily’s spouse participated in the project as well, “My husband helped me grade the papers and he really enjoyed reading them.” When Emily shared her students’ stories with the librarian, the librarian suggested creating an anthology that could remain in the library so that other students could read her students’ work. The ultimate goal of producing a literary piece that was based on student interest was balanced with many of the English language arts standards. By scaffolding this unit, Emily was able to incorporate lessons on critical reading, Standard English, story plots, and peer-editing.

As Marvin, the math teacher, taught mathematical proofs to his classes, his objective was for each student to be able to write, draw, and explain the proofs in front of the class. He said, “You gotta do it on the board and it’s gotta be crystal clear showing proofs. You got two triangles; show me they congruent using side angles.” Marvin found, “. . . it’s like some students want to copy quickly. ‘I did it,’ and then I ask them to explain it to me.” Generally, this act of simply writing the proof did not lead to full comprehension. He was convinced that they needed to be able to speak fluently about the proofs and use visuals. He showed them how not to do the proofs, then said, “This is a asinine way of doing things, you can’t have no proof without a picture.” Next, Marvin modeled how he wanted students to be able to diagram and break down the proofs. He encouraged them to “pay attention to detail.” In order to follow his example completely, he had them duplicate the effort. Marvin said, “So that way, I have them do it on the board.” While each student had the opportunity to teach the proofs in front of the class, the repetition also allowed for class mastery. By scaffolding in his own way, Marvin was able to get full participation from his class.

By scaffolding their lessons, Summiyah, Tammy, Emily, and Marvin created exemplary models of well-planned lessons that met students where they were and pushed them to reach higher heights with their learning and their teaching. Each of their classes experienced success in that students were highly engaged in the activities, teachers and students displayed satisfaction with the results, and their students’ positive efforts were multiplied. Clearly, as elective teachers, Summiyah and Tammy had more autonomy over what was taught in their classes yet the examples from Emily’s English class and Marvin’s math class showed that core teachers could also benefit from this teaching strategy. Interestingly, the scaffolding in Summiyah, Tammy,

and Marvin's classes worked toward the end goal of students eventually teaching the class. Additionally, Summiyah, Tammy, and Emily worked on units that were student-driven. Scaffolding curriculum that provided opportunities for students to teach and allowed students to have a level of control over what they learned led to higher class participation rates for teachers.

Passing on the Knowledge

As mentioned in the previous section, allowing students to teach was an important element in successful lesson plans. This notion is important to highlight because too often students, especially like those at Tubman who were under-performing, are seen as needing to learn more but not often acknowledged for having knowledge to pass on to others. This section will highlight examples of teachers providing a space for their students to teach.

Marvin detailed his strategy on how to get everyone in the class to fulfill the requirement of teaching proofs. He explained that he chose one particular student who "can kind of be a poo butt sometimes. You know, slow, kinda humpty dumpty. You know how you got a class clown, right? The students was like, 'Oh, he don't ever do nothing blah, blah, blah.' I showed him the first one." The student had already demonstrated an attention-seeking personality and Marvin offered him an alternative way to earn attention in his class. He continued,

This one day I said, 'I'm gonna show you how to do it but you gotta do this, man.' I think it was like a Friday and then we reviewed on Monday. And he came to class first and went straight to the board. And people was comin' into class...and they see this fool at the board, doing hella math.

Finally, when the student had done the task satisfactorily, Marvin said, "Okay, you basically convinced me and showed me that these sides are equal..." He continued to describe how his actions affected the other students, "It was just one of them things and then it's like everyone has to do it and everyone did...and it was partially 'cause, 'If he could do it you know it ain't no reason I can't do it.'

Marvin challenged his entire class to teach by reaching out to the student who was, in the eyes of his peers, not serious and empowering him to be an expert in the concept first. He said this was a "way that we try to address students' needs. It's a cohesive kind of effort. It's not an individual kind of thing. We all gotta lift each other up." By prioritizing a struggling student and providing him tools for success, Marvin was able to boost his student's self-confidence and in turn bring his entire class up to the same level.

In Summiyah's class the subject matter that her students taught varied. Some presentations were interactive such as the two on Kajukenbo and Black dance where "after teaching us the origin and history," the presenters taught students basic martial arts and dance moves. Other students were interested in political and cultural issues. Summiyah expressed pride in her students' work as her colleagues began to request her students as guest speakers for particular topics in their classes.

Summiyah said that one of her students "held her own as a guest presenter in another class." Her topic was about international and domestic female sex workers. Another student spoke on women in hip-hop and Summiyah said, "She is a very talented hip-hop artist herself." She had performed in front of the school for assemblies on several occasions. Not only was her presentation informative about female rappers in the music industry, she concluded her talk by

encouraging each audience member to “sign a pledge to protect the younger generation from abusive hip hop.” Summiyah also had a student who “joined our class at the end of the second quarter, but she courageously presented on her indigenous American culture, dances, ceremonies and dress. She began by reading her warmly written autobiography.” Though the student enrolled in the class late, she was invited to speak to other classes as well. The original idea of students teaching Summiyah’s class was expanded to creating a circuit of talented speakers who would share their knowledge with other members of their school community. She wanted her students to be able to have a tangible skill once they left her class. Summiyah said hopefully, “Who knows, maybe they will get paid to present someday.”

In Tammy’s words, “the Pink Peace curriculum took on a life of its own,” as it grew from a discussion to a presentation that would eventually tour the district, specifically targeting middle school girls. Her class performed their test run for their own peers at Tubman and there were five presentations in total. She said, “They stepped outside of themselves to perform.”

As Tammy’s Women’s Studies class performed the skit that they developed to teach the curriculum of Pink Peace, the students’ performance skills improved each time. The young women opened with a highly dramatic skit that began with a verbal altercation that progressed to a fight. They paused to explain, “There are three groups of people who want you to fight.” One student said, “The student body – They want to be entertained. Never be anybody’s live TV show. You will be free entertainment; have more pride in yourself than that.” Another young woman said the second group was, “boys – they love to see a ‘chick fight.’” A third presenter said the last group was, “your girls – most of the time your friends will pump you up the most to fight.” Then she asked her audience, “Is that the definition of a true friend?” After getting responses from the audience, another young woman profoundly explained, “Most girls fight when they feel disrespected. This is an effort to reclaim their power. If you don’t have power at home, in society, or in your personal life you will demand that power from your peers if they disrespect you.”

With helpful visuals, Tammy’s students then presented the acronym THINK which offered girls a thought process to go through before reacting with violence in a situation.

- T Take responsibility for yourself. You can’t control anybody but yourself. You cannot control people’s actions or words, but you can control your reaction to them.
- H Heart – have a heart or empathy for what the other person might be going through for them to act the way they do. You don’t always know what people go through away from school.
- I Inspect the situation - Why don’t you like her, why doesn’t she like you? Admit the wrong you have brought into this situation. Are you guilty of bullying? What will fighting cost me?
- N Never fight over a boy. It’s never worth it. If he wants to be with you he will draw the boundaries with other girls.
- K Know yourself. You need to be secure and confident with who you are as a person. Be stronger than words. If you know yourself, you don’t have to defend yourself.

After going through each letter of the acronym in detail, they shared their ideas on how and why it was important to co-exist on campus with other young women. One presenter said minimizing

body language, looks, and talk that “show you don’t like the person” could prevent fights. It was made clear that girls “should not fight anyone else’s battles.” Another young woman pointed out that getting along with other women “is a skill that you will have to use for the rest of your life at college, at work, social settings, at home.” The Pink Peace ensemble concluded with a question and answer session that allowed them to interact with their audience.

Fatima, who attended one of the middle school performances, was thoroughly impressed. Fatima summed up some of the notions presented in Pink Peace, “including bullying, self-image, and sexuality. How the world used them as women of color.” She raved, “They did an awesome job! The performance today was stellar. Sitting in the audience, I heard the young girls saying how much they loved it and how fun it was. It even made me jump to my feet! They were so wonderful.” Tammy added, “They were local celebrities.” Aside from the congratulatory responses received from the young women in their audiences, the process of developing Pink Peace had a positive impact on everyone involved. Tammy said, “they had a sisterhood—going against all of the disunity—that built them as a team.” Student unity, talent, creativity, and wisdom with regard to violence among young women were evident in the Pink Peace curriculum that Tammy and her students designed and taught.

Delphine’s class provided another example of students teaching. She paired up with the school librarian to teach an elective class called the Academic Mentors Program. Tubman students learned early literacy strategies for kindergarteners and had placements at three different elementary schools’ after school programs and one pre-school. “Students had to create lesson plans,” Delphine explained, “they couldn’t just go in and wing it, we really wanted them to work on specific strategies for the kids.” Beyond providing a way for high school students to mentor younger students, this class was an indirect attempt at helping Tubman students build on their own reading skills as some of them read at elementary school levels. One student felt that her success was due to preparation. She explained, “I felt prepared with my lessons. Gave them options with what they wanted to do. They learned the reading strategies as well.”

Delphine described the program as “rigorous” but mentioned that it could also be rewarding as “one of [the students] even got a job as a basketball coach...and another student was offered a job as a tutor...” Another student spoke about the joy teaching brought to her. She said, “I felt great that I got to do something I’ve always wanted to do. When I got there the students enjoyed me and they made me feel so wonderful inside to see that I was doing a good job. It made the staff feel good that I was a mentor that they could depend on to help their students.”

The previous examples of students teaching showed that by engaging students in this manner teachers were able to develop students’ academic and presentation skills as well as provide a sense of accountability. Having a wider audience meant needing to know a topic well.

Changing the Power Dynamics

After participating in the PD on PTSD, the message of centering students became clear for many teachers. On a survey, one teacher wrote, “I work with students more than I used to.” Inspired by their students, teachers developed ways that approached their curriculum by taking into account student needs and affinities. Khalil described in the second PD, it was about teachers giving up some of their domination of the class.

Attendance had been an issue for Tubman students, but Marvin acknowledged the positive, “Some show up and want to get the knowledge.” Marvin explained, “...if we’re ever

feeling doubtful or unsure, we check in with the youth, first and foremost....” He engaged those who did come to class in a conversation about the problem and “something that came out of the discussion, it just be such low vibrations, the routine....” He further discovered that “sometimes if the weather is great, it makes students not show up.” Marvin said he felt compelled to make a change in his curriculum because students who were asking for change were the ones who consistently showed up to class. “And it was them, because they come; they here. I would feel bad giving them the same old, same old. I gotta at least repay them.” Marvin felt like he owed it to his students to be creative in his teaching. He added, “They bringing parts of themselves and sharing them with me.”

Marvin decided to take his students outside to hold class in a different environment. He said, “It was a nice sunny day and just from the classroom discussion I said, ‘Let’s do something. We gon’ do some math but let’s do it fun.’ I grabbed the sidewalk chalk and we just went in the parking lot and graphed slopes.” He pointed out a few of his students in pictures of the lesson,

This boy, this one right here, Insane Clown Posse...that’s his cultural mythology, that’s how he deal with reality. Picking his brain, he is a pretty intelligent dude. He’s just bored in class.

The young man Marvin spoke of is a member of a local turf gang. He continued to point out other students in the pictures,

That’s Kevin. He good too—ankle monitor. These are the consistent group of students who show up all the time. He came late. They had already did theirs so they had to show him how to do it. Before that, this is what he would give me in class...”

Marvin pulled out a paper of with two incomplete math problems on it. He continued to reflect,

I’m telling you, man, they could follow instructions well. So, they making sure he doin it. Of course I gotta show ‘em by example, ‘Look, this how you do it.’ And the whole thing of, ‘I get to write on the ground with the chalk!’ Yeah, they drew they little stupid stuff. I’m like, ‘Yeah, y’all do that on the side.’ But they was on it. They tried to make it perpendicular but not quite. A good deal of destruction they was able to cause in the parking lot.

In addition to the math problems, students had written R.I.P. or Free before the names of deceased or incarcerated peers or relatives. Marvin created a sensorial learning experience for a challenging math concept that allowed students to express their thoughts at the same time. He was visibly excited about the success of his new lesson plan. He planned to continue to bring innovative pedagogy to his students. He went on, “I do intend to use the computer lab for geometry sketchpad assignments and to do outside classroom labs at the field across the street.” Listening to his students was the impetus for Marvin to incorporate an interactive lesson plan into his curriculum. He was open to receive the feedback and willing to respond. Since the students commented on others missing class because of the weather, Marvin brought the students outside to enjoy the weather and do math.

Summiyah showed how she allowed students to have power in class. Her ethnic studies class was reading college-level articles about race. Of note, one of the articles was brought in by

a student whose sister was taking a similar community college course. Summiyah facilitated in-depth discussions and had students create their own class test based on the questions they posed. The relevance of the articles along with the fact that they were deciding the test material elicited engagement from the students.

In addition to student-centered exams, Summiyah said, “another big thing is that I have created another way of grading.” She explained,

They are creating their grade. I’m not giving them a grade. When they’re working at a ‘professional level’ or what is the equivalent to an A, B, or C, we have these integrity scores. ‘What level am I working at?’ Most of them are working at a B or A. A few of them are at the professional level...I have a few at the ‘victim level.’ Didn’t have a pencil and didn’t ask for a pencil. Victim level!

The “professional level” was the equivalent of an A+, while the “victim level” was another way of saying D or F. The labels Summiyah employed are important to dissect. To be a professional meant working at an expert level and students could associate this term with sports and business. On the other hand, the word “victim” had a negative connotation and it was seen as a detrimental position to be in, similar to being a victim of crime. By changing the verbiage in how Summiyah termed her grades, she had developed an expression that made D’s and F’s undesirable.

Summiyah spoke about one of her misconceptions about a student and how she dealt with it. She explained that the student was grading herself higher than Summiyah expected but then found that her student was in fact doing satisfactory work. Summiyah said, “One student I found myself doubting her. I found myself a couple times thinking she was not focused. I apologized to her, sorry for my moments of ‘forgetting who you are.’ ‘I’m sorry I let you down.’”

By making this apology, Summiyah displayed humility in how she approached her student. She said that now, “I have more trust in the process.” Summiyah was attempting to give students more control, which can be unnerving, but realized that they were exceeding her expectations.

Emily was striving to allow her students more autonomy but had a moment where she too felt a challenge in offering independence. Emily said, “I really changed my curriculum a lot this year. I let students have more say in their books and have more flexibility in their projects.” To make her decision about the unit she was going to prepare, Emily had consulted with the school librarian about what books students had been checking out. The librarian told her she had purchased urban street novels the previous year and students checked those novels out more than any other genre. In essence, students had voted on her subject matter by their self-selections at the school library.

On one occasion, Emily found herself getting upset and feeling unable to relinquish control because she did not like the topic of a student’s story. She said, “I was trying to get him to change his story about Kobe Bryant drowning Kim Kardashian...I was unsuccessful. I wasn’t being particularly sensitive at the time. He started getting really upset.” Then the student used her words against her, “If you can’t say anything nice, don’t say anything at all.” In previous years, his comment would have set Emily off as being disrespectful. She would have maintained her frustration that he did not heed her suggestion to switch his topic. Emily admitted, “Previously, I would have made him apologize or tried to make him recognize that what he said was completely crazy.”

Emily continued and showed how she had changed, “So I pulled him out. ‘You have to give me a chance to be a good teacher.’ And I just thought, ‘I am just gonna send him in and let it go.’ And I never had another issue with him after that. I don’t really have many run-ins with students anymore.” Though difficult for Emily, her goal was to follow the student-driven curriculum that she had planned for her class. She may not have appreciated her student’s topic but by the time she stepped outside with him, she was able to maintain her composure and deflect an altercation. Emily was pleased that she was able to diffuse the situation in a way that she would not have chosen before participating in the PD.

As seen in the aforementioned examples, allowing students to have a certain amount of power in a classroom demanded trust, embodied humility, and at times called for restraint. Marvin felt that he wanted to provide novelty in his instruction to repay the consistent attendees of his class. Summiyah allowed her students opportunities to create their own tests and grades and recognized her desire to have more faith in her students. Emily found that she needed to sustain judgment of her students and allow them the space to create.

Teaching about Trauma

Having learned from the PD sessions, teachers implemented various practices that incorporated topics directly related to PTSD in their curriculum that reflected the notion of building trauma-sensitive classrooms. Providing examples of addressing the issue of PTSD on a global level and on a local level, Nicole engaged her World History students in fruitful discussions and activities on traumatic events that had occurred throughout the world and in students’ personal lives. Her rationale for looking at trauma from a global perspective was “I want the kids to be thinking about their lives as not this isolated thing but making connections with other groups in other places. Then she thoughtfully added, “But in doing so, I don’t want them to become more depressed.”

Her world history classes read about Sierra Leonian child soldiers in *A Long Way Gone: Memoirs of a Boy Soldier* by Ishmael Beah. Below are excerpts from two students’ responses from their blogs. The first came from Tamia:

100's of thousands of children in Sierra Leone are children soldiers, instead of being formatted with the right tools for education they are supplied with murder tools. Children under 18 fighting both government armies and armed opposition groups. Children are being kidnapped into this ludicrous war and others join in hopes of food shelter and protection [sic].

Tamia pointed out that both government and rebel armies were using children. She also recognized that instead of education being a means to attain goals for children, becoming a soldier was a way to supply basic needs. The second was written by Bilal:

A child soldier is a child that is taken away from their family and some times often force to watch his or her parents killed then taken to camp were they some times had limbs cut off. And forced to fight in a war they did not belong in. I feel like no child should have to be taken away from their family for any reason at all. I feel as if this problem has been going on years and some one of a higher authority should step in and fix this problem that is going on in other countrys [sic].

Bilal expressed empathy and concern for children being taken away from their families and exposed to horrendous experiences. He felt that governmental authorities needed to be accountable for the problems children were facing.

In discussing migration and refugees, Nicole displayed cultural competency in bringing in examples from Latino countries as well, extending the unit to include

...Columbian refugees from the civil war. So we've talked about the situations that may push people to migrate. So they did a scenario activity...where they basically had to put themselves into someone else's shoes. They basically have to think about 'wow, what would happen if a hurricane hit and half of my city is destroyed and I have a family and I have these people to take care of and what am I going to do?' These are really horrible things that people have had to deal with, really tough choices that people have to make in order to provide for their family and feel safe.

As students read about atrocities that took place at an international level, students were able to see outside of their own struggles. Nicole described her students as "very empathetic. They tend to be like, 'that's messed up.'" Her class also segued into a discussion on human rights, which incorporated the struggles of youth throughout the world.

We went over the Universal Declaration of Human Rights, we were going through all of the articles...just putting it into simpler language, and...how like these are great ideals but they can always think of examples of times where it doesn't happen. And some of the things, I think, are really traumatic like everybody should basically have a right to not be arbitrarily detained or arrested.

On that note, a student in class had said, "Well, I remember when the police ran up on me and arrested me and my friends. And how do they know that I did anything?" Nicole encouraged dialogue, "I gave them a space for discussion and it was like the most lively discussion we've had the whole year but it was really good because they were really thinking about a lot of these things." Later in a pair activity, students examined scenarios and discussed where human rights were either violated or respected. Nicole added,

We have talked a lot about different types of trauma that people have had to go through, like being displaced, being homeless, sexual violence and things like that. Without explicitly talking about people's personal experiences we're talking about things that may help clear out what they hold in.

The youth displayed empathy as they participated in activities that encompassed thinking from the perspective of others. From Nicole, students learned that people suffered throughout the world. However, she additionally brought in resources from the community to process personal trauma as well.

Nicole's community partnership with a university poetry group brought an opportunity for students to creatively express themselves. Once a week, university students worked with Tubman students in a poetry-writing workshop that was also a healing activity. One of her students was affected by the death of his friend earlier that year and Nicole remarked, "He wrote

this amazing poem” to deal with his grieving. She said another of her students bravely disclosed her experience with “sexual abuse in the house.” Nicole further explained,

They usually do poems on stereotyping, like a profiling poem, a homeland poem, so another student did a poem called ‘Home hasn’t been the same since my father died’ because her father died this past year. The poetry has really helped build some community and allowed [students] to tell their own stories. And sometimes it’s a nice mix because some people are really more like joking and upbeat and for some, it’s like this is the first chance that they’ve gotten to talk about some really heavy stuff. And it’s actually really powerful to me that they feel safe to share it with the rest of the class.

In this example, university students not much older than Tubman’s students were able to facilitate workshops that engendered a therapeutic outlet for painful experiences students had encountered.

Following the same theme of healing through writing Emily, the language arts teacher, described the unit she designed that allowed students to write urban fiction short stories. She stated, “I heard about PTSD but never in the frame of urban violence. I don’t think I knew enough about it until this year.” After discovering that the novels with the highest checkout rates among Tubman students were urban fiction, Emily decided to read some of the books on the list. She recognized that students were self-selecting books that had examples of PTSD in the stories “not explicitly, but a lot of the books were addressing some of the issues of community violence.” According to Emily, “The writing the students generate, most of them write urban lit... They have death, violence, guns, drugs, romance, abuse by family members, or prostitutes.” She reported that “...in the story project last quarter only three stories were not urban lit and two of those were like, *Fear and Loathing in Las Vegas* stories.” The previously mentioned reference was Emily’s literary way of describing the students’ stories that referred to random occurrences in an intoxicated state but her reference to drugs could also be indicative of PTSD. Basically, the only story that did not relate to trauma in some way was a love story that resembled a cultural folktale. Though students wrote about sensitive issues, their enthusiasm showed Emily that she had engaged her students with this lesson plan as she had a high level of participation.

Khalil focused on healing and addressed symptoms of PTSD directly with his science classes. He announced to his class, “Some of y’all got post-traumatic slave syndrome and post-traumatic stress syndrome. You have been exposed to violence and traumatic situations just like some of the soldiers coming back from Iraq.” Noting that some of the symptoms were difficulty sleeping, anxiety, and paranoia he taught students about the calming effects of chamomile tea. He explained that chamomile reduces stress, anxiety, fear, aches, restlessness, and aids in sleeping for students who experienced insomnia. As Khalil explained the benefits of the tea, one of his students shouted, “Oh yeah, I need to get some of that.” Khalil passed out samples of the chamomile and remarkably, even students who at first seemed uninterested wanted a teabag.

He also used mint leaves from Tubman’s garden to make mint tea and explained that mint leaves were naturally good for digestion. He explained that another symptom of PTSD was stomachaches. In addition to teas, Khalil excitedly purchased a juicer and said, “I bring in juice so we can all get healthy together.” He made various juices out of fruits and vegetables, openly disclosing the ingredients in case of allergies. He had students research the vitamin and mineral content of the different ingredients as well as the health benefits. One student commented, “I

never liked beets before Mr. [Khalil] gave me that juice.” In this way, Khalil was providing natural, healing alternatives to the self-medication that students were partaking in.

Summiyah had volunteered her Ethnic Studies class for sessions on cognitive behavioral therapy with Fatima and her interns, which may have been the most immediate intervention in the school. This proved to be an enlightening experience for all as it represented the collaboration of a mental health therapist and an educator. As the mental health specialists became aware of the limitations of the CBITS curriculum (Jaycox, 2004), Summiyah offered provocative ways that the curriculum could be adapted to fit Tubman students. Her suggestions of incorporating role-playing and art went into effect immediately.

The role-plays were important. As Summiyah stated in chapter four and as illustrated in this chapter, “Whenever I see students getting bored, I know that it means that they gotta be the teachers...” The scenarios presented in the CBITS scripted curriculum did not seem to fit Tubman students. Jaycox (2004) displayed blatantly, low levels of cultural competency. One such example (Jaycox, 2004, p.36) described how most Europeans thought the world was flat and they “were afraid to sail too far themselves, in case they fell off the edge” to depict how fear could hold people back. The problem with the illustration that Jaycox provided was that it introduced a scenario where eventually Europeans not only conquered their fear but people of color as well which ironically as chapter two suggests is foundational for mental health disorders in communities of color. Another example (Jaycox, 2004, p.70-71) was a boy asking a girl to a school dance when she did not want to go out with him but for Tubman students, issues of sexual violence were a more prominent concern. Therefore having students act out their own skits to show their personal situations helped them to bring in their culture, address their concerns, and embody CBT in their thought process.

Fatima said, “A student who looked like he had it all together created a CBT triangle that reflected his internal process. CBITS wants students to write words, etc...He couldn’t find the language.” For his feelings, he found a National Geographic picture of a Grizzly bear with its mouth open. This picture depicted his rage. Under thoughts, he pasted several scattered words showing his difficulty focusing. To show his behaviors, he found a robot made of steel with no expression. His behaviors were controlled and robotic. Fatima said he had later shared, “‘There’s something happening with me,’ and that he was in foster care, abandoned by his parents, and on the outside never causes trouble, not stereotypically symptomatic but his PTSD level was 35.” The average traumatized student typically scored 17. By incorporating Summiyah’s recommendations of skits and artistic representations, students were more engaged, more willing to participate, and more willing to try using CBT in their lives.

According to Tammy, the Pink Peace curriculum was inspired by her participation in the CBT portion of the PD series. What resonated most for her was the idea that, “thoughts were the key to changing behaviors.” She was also influenced by the female energy at Tubman as there had been a few fights on campus among some of the young women. Evidence of how CBT was reflected in her curriculum was the frame for the acronym from Pink Peace, THINK, as seen in the previous section, which presented a thought process to help young women evaluate their situation before fighting. Tammy illustrated a keen sense of awareness of CBT as she described how she facilitated conversations in her women’s studies class in the following:

I always help them to shift their thinking, and help them think, ‘Okay, how do I move on? And not have all these crutches and vices, looking for love, trying to make up. No. How can I go on and live a productive life? In spite of what’s happened to me, how can I be a

better parent one day and not do what my family did to me? Shift the focus, and not so much dwell on that hurt...strategize is what we can do from here forward. Help them focus, take what they have, and move on, and empathize with them.

Tammy talked about some of the questions that she tried to brainstorm with her students. Her point about how she helps them “shift their thinking” highlights her use of CBT. In the following, she called attention to her lack of mental health credentialing, yet she had a profound understanding of how therapists think and respond.

Now, I have no counseling degrees or anything and most of the time I’m just sitting there and I’m stuck like, ‘Oh my gosh, what could I possibly tell them? You don’t have a clue what they’ve been through.’ But I am sorry for what they been through. All I can say is, ‘I can imagine but I don’t know how it feels.’

Though Tammy shared the insecurities she sometimes felt when students disclosed their personal traumas, she was extremely proficient in using mental health strategies.

Delphine, like Tammy, had a similar perspective when she spoke of the mindset she had when she discussed issues with students. She said,

I try to be really conscious of never making any judgments, I feel like, I try to think, I am totally not a therapist but I am like, ‘Oh my gosh, what would a trained professional do in this situation?’ I kinda just do the listening thing, and I ask them questions about what it is that’s happening, and then I say, well that sounds really terrible or scary and a lot of times a lot of the students agree with that and they kind of just go on and tell more of their stories.

Delphine, like Tammy, does not claim to be a therapist, yet she displayed perceptive qualities of sustaining judgment, listening, and supporting her students.

Though Delphine, the special education teacher, cherished her individual time with students, she also decided to co-teach the Academic Mentors program elective class based on her awareness of students struggling with literacy with the school librarian. Challenges with reading reflect language difficulties that are prevalent among traumatized youth. Because the class was about learning literacy strategies to pass on to younger children, attendance was critical but many students had difficulties coming to class. For the final exam, Delphine, inspired by the PD, researched CBT resources on-line and came across an assessment that she tailored with her students (see Appendix B). Using a CBT assessment, her class analyzed their interactions with the kindergarteners, the after school staff, and their teachers as well as student engagement with creating and implementing lesson plans. One student wrote about teaching her success in teaching one child who didn’t get along with others. She expressed, “I was glad that I was able to work with him when no one else could and I was happy that he was willing to learn.” Another student mentioned learning that as a teacher she should “not wear low cut shirts.”

Delphine commented on the written version, “Definitely I am not a therapist but I would love to be able to, instead of just giving them a paper, I wish I had the training to be able to talk them through it.” This was important because she wanted to be able to reach all of her students. Understanding the value of having training on PTSD and CBT as a teacher Delphine said, “This training is essential. We really need it.”

Teachers varied in the ways that they incorporated lessons about trauma in their classrooms. The social studies lessons Nicole designed about trauma happening at the global level, tapped into her students' sense of empathy. Her partnership with a university group that presented poetry workshops along with Emily's urban fiction unit provided a space of healing through writing, while Khalil focused on herbal healing by introducing teas and juices to his science classes. As the core teachers implemented the above strategies, the elective teachers primarily focused on CBT. Summiyah's class challenged the scripted CBITS curriculum by adding skits and artwork and she was able to apply CBT directly to an encounter with a student. Interestingly, Tammy and Delphine made comments about not being credentialed therapists yet both also displayed competent use of CBT. There was marked difference between Delphine's interviews before the PD on CBT and the one that took place afterward. Delphine embraced CBT as a tool that she could apply and it visibly seemed to relieve much of her anxiety in offering her students a way to process their behaviors. Her students additionally used the CBT assessment to analyze their attendance and more detailed outcomes will be discussed in the following section which illuminates how teachers changed how they approached discipline in their classes.

Changing Approaches to Discipline

Teachers implemented a plethora of discipline strategies that reflected their participation in the PD sessions. One surveyed teacher highlighted the connection between mental health and academics, which could be seen as a preventative measure for discipline. "I've realized the importance of students feeling emotionally settled prior to sitting down and getting academic work done!" Other teachers mentioned wanting to understand students more holistically, beyond the behaviors they displayed in the classroom. Tubman's faculty wanted to approach discipline with patience and empathy among other qualities reflective of care and concern for students. In looking at new ways to discipline their students, many teachers seemed to look within. The following sub-sections detail how different teachers dealt with various aspects of school discipline like attendance, tardiness, self-medication, cell phones, vulgar language, altercations, and disruptive behavior, applying aspects of their PD training. Although teachers may have had diverging ways of handling these different issues they were based on the PD on PTSD.

Attendance. In Delphine's Academic Mentors Program class, the biggest obstacle, which reflected a greater school-wide problem, was attendance. Delphine estimated that "about 70% were inconsistent with attendance" and said that the kindergarteners were disappointed when their Tubman mentors did not show up. Delphine explained further that her students

...did a self-reflection on their attendance, how their behaviors and actions influenced others, like, 'What was the impact on the kids at the site when they didn't show up? Because the kids would get really upset... They had to think about what their thoughts were behind the actions like, 'What were they thinking when they decided not to come to class?' And then, consequences for their actions. So they were actually really thoughtful responses for some of the kids. And then the final piece was 'How could you change your behavior in the future?' 'What would you do differently?'

One of the students with poor attendance noted, “Not showing up would make a child feel sad and left out. Being there made the children happy and wanting to have fun.” Another student talked about how she “lost trust with the staff,” and how it “upset the kids when I wouldn’t show up.” Students also commented on what they would do differently, “Being better at showing up regularly and notifying someone if I can’t be there. By pushing myself so that I won’t let the children down.”

Delphine explained that when students get caught in a downward spiral they feel “really down on themselves and then it’s really hard to get them back into coming. And then, also, how the reverse can be true, like, if they’re coming to school and connecting with people and with their kindergarten students, they want to keep showing up.” She said that some of the students spent over two hours thinking and writing about how their behavior affected other people.

Delphine found that her students “can be really insightful. There’s a lot going on inside their heads that, like visibly, there’s a lot going on that I don’t know, when they’re just like, I’m not going to do this or I’m not going to do that.” She added that through the process of using CBT, “They’re becoming more self-aware about decisions and choices that they’re making.” Delphine and the librarian agreed that they wanted to run the class again but according to Delphine, the aspect they would change in the future was, “when we start to see kids falling off, we would do the assessment earlier on instead of waiting until the end.”

Tardiness. Tardiness was an annoyance that Frank previously dealt with by locking his door as seen in chapter five, but as he found that it contributed to students not coming to class, he ceased the lockout policy. Marvin’s tactic for dealing with tardiness was peer-teaching. He taught the students who arrived on time and then had them teach the students who arrived late. As seen in other examples above, he supported and encouraged peer-teaching.

Self-medication. The realization that students had faced traumatic experiences made it difficult for teachers to follow up on enforcing the school’s drug policy. Imagining herself in her students’ position, Delphine recognized that students who were self-medicating were suffering from some form of pain. She felt that punishing students, just as forcing students to work, was ineffective. She said,

...maybe someone doesn’t want to do their geometry because maybe they have these huge issues in their lives and they can’t do their geometry right now. I don’t do that ‘you have to do this right now, you have to get this grade,’ because that just doesn’t work. That’s such a foreign idea when you are just trying to get through the day. And I’m not saying that everybody is like that but they come to school and they’re high a lot of the time and I’m like, ‘You know what? I probably would be too because of what you are going through.’...And you know, it’s supposed to be like this punitive thing, but like if you’re not at school, where else are you going to be? What options do you have, really? It’s so complicated.

Delphine opted to provide safety in lieu of vilifying her students who came in high. Feeling conflicted, Frank seemed to resonate with Delphine’s sentiments. He said that although students who came to school high were “...not supposed to be in class, well, this is the safest place they got.” However, he shared a relevant way that he had taken action with a student who came in high to his American Government class. Frank recounted that his class

...elected like a president, vice president, secretary of homeland security, and an attorney general. So I was like, 'yo, squad up.' So everybody just came, and there were four of them, and they were all around him; so at this point everyone's like, 'What's going on?' And I'm like "Well David is high!" and I'm just making a big thing about it...So now the students are getting involved...and we're having this dialogue...I'm like, 'This applies directly to what we're doing, right?' You gotta take what you can get and when it pops up you can roll with it.

The governing body decided on three options. David could choose to run laps around the courtyard with his shirt off for the last 15 minutes of class; do 50 push-ups in a row and each time he pushed up say, "I will not come to class high," or leave class. Frank continued,

He's like, 'Okay, I'm a do the push ups.'...So he's like 'I will not come to class high,' and everyone's like, 'One!' ...and when I say everyone...the quiet people were just smiling, and the loud people were doing too much as they always do. So he got to 36 and...his arms are shaking...and he's like 'I can't do it!'

Since David could not complete the 50 push-ups, he had to face the consequences. Frank explained to David, "You know why I'm kicking you outta class right? ...Two reasons: we had a deal, you didn't hold up your end of the agreement. The other half is, 'Don't come to class high!'"

Frank creatively linked his curriculum to disciplining a student who was high in his classroom. By infusing the lesson with discipline he came up with an election of students to serve as the governing body, alternative forms of punishment, and a final decision on the case which emulated government and judicial systems. In this narrative, Frank was able to get his entire class to participate in the challenging spectacle of one particular student. Watching another student become the target of a class intervention also served as an example for the other students to refrain from self-medicating before class.

In the final session of the PD, Frank also shared that by having a conversation with David, he found out that his student's self-medication replicated the way that his father dealt with stress. Frank's perspective shifted and he felt more willing to work with David. Frank said that once he listened to his student, he noticed that David was able to listen to him and eventually stopped coming to class high.

Cell phones. As seen in chapters four and five, Emily was a proponent of cell phone confiscation. On further consideration, Emily made the decision to stop enforcing the cell phone policy. Below she explained why,

I have been a lot less on it about the cell phone. I don't pay attention as much as previous years. I don't want to deal with this...I just felt annoyed. What got me mad was "the pain-in-the-assness" of this. Confiscating the phone and then calling [the safety officer]. Students being verbally disrespectful...

In making this decision, Emily found that her struggles with students diminished significantly. Summiyah, on the other hand, continued to train her students to keep phones on the vibrate setting in class and take emergency phone calls outside.

Vulgar Language. Using derogatory words in class elicited different responses from teachers. Marvin explained, “It’s the communication between the teacher and the student. If they speak the common language, they can share their common experiences.” Marvin also had a way of not shutting down the students’ language but introducing other words to their vocabulary. As an illustration of Marvin’s notions of language, he used the term Nazi to describe people who espoused white supremacist values—including Black people who seemed to hate other Black people. He also used the words “bruh,” short for brother, and “j-cat” to describe someone who was acting out of line, in reference to Category J, a prison code used to label insane inmates. He used these words so frequently that students picked up on his language and began to use these terms as well, often as a replacement for “nigga” in their everyday vernacular. For Marvin, using language was a way of expressing one’s self in the truest form and he did not want to deny his students of that. He additionally saw language as an exercise in expanding their vocabulary.

Another view on language usage was that negative, derogatory language did not have a place in the classroom. Nicole felt very strongly against students using bullying, bigoted language and she made it known to them that this was not acceptable. Nicole iterated “...sometimes, I feel that just the language that students are using is uh, intolerant. In order to create a safe space she did, “regular checks on that, like ‘you don’t know who you’re offending or who’s sitting next to you that might be offended by that.’” She added,

Certain words, of course, I really have a hard time with anything I see as bullying or intimidation. That’s one of the things for me, like my whole life. Certain words that they use drive me crazy, like things that I think are very demeaning and disrespectful to one another in this space...but again it goes back to the normalization thing. They think [these words] are so normal. ‘Who doesn’t say that?’

Nicole took issue with pejorative language because it created a hostile and offensive learning environment. She also associated derogatory discourse with disrespect and intimidation. Nicole stated that the words were used so frequently that they had become normalized for students and did not accept this in her class.

Delphine was also offended by the language that students used but she held herself back from confronting students about it when she dealt with them on a more personal level. She said, “I try to understand what the student needs in the moment.” Her one-on-one work with students made it more difficult to confront language that was offensive to her. She gave the example of one specific student, “He has this thing where he will say something really derogatory about women...and I want to address it but it becomes this conflicted thing in my head.”

Unlike Nicole, Delphine felt uncomfortable calling attention to the fact that she was personally offended. She recognized the impact of negative discourse on her emotionally when she disclosed, “I feel my heart sink” yet at the same time, Delphine recognized that as a white woman, she was culturally different from her predominately Black, male students and made efforts to connect with them as she supported them academically. She expressed that she made efforts to “reserve judgment” which framed her positioning as her opinion and not as right versus

wrong. However in using this approach Delphine reiterated that the tensions wore on her, “It’s really hard. I get really angry with myself.” For Delphine, using the CBT method in her group class was helpful but in working one-on-one with students, the language issue was difficult because it was more personal.

Summiyah had an innovative idea for dealing with vulgarity. Instead of being punished for using negative discourse, she thought about the psyche behind why those words were used. Summiyah interpreted students who used pejorative words as needing a hug because they were potentially stressed out. A big poster that read “Big hugs = No Cursing” hung on the wall above her desk. After receiving a hug, the student was expected to stop using offensive language.

Altercations. Verbal and physical altercations occurred on campus but at the classroom level, fights were rare. Typically, there could be an argument in class but teachers generally deescalated verbal altercations before they could progress. Marvin encouraged students to participate in a dialogue when they had issues with each other. He explained,

Basically the ones that are difficult are the domino effect. It starts with one or two students having a small conversation. Then depending on how sensitive the conversation is, it gets all ign’ant a lot of sharing, and venting. So I don’t want to abruptly stop someone from venting...let’s not project it onto another person, but vent...I don’t have that posture of being abrupt, we don’t do that. I try to encourage the students to check themselves, and bring themselves to a halt, but it doesn’t always happen.

From Marvin’s community-oriented point of view, if students began an altercation in front of other students, he tended to want them to bring closure in front of the class as well. However, he admitted that sometimes students did not have the self-control to stop.

In order to diffuse an escalating situation, Nicole took students who displayed out-of-character behavior to have one-on-one conversations with them outside instead of engaging with them publicly. She said, “I always want to check in with them outside of the classroom to see what in particular set them off or why they’re feeling on edge today...but I never do that in front of the other students.” By taking students out of the classroom environment to converse with them, she was offering them an opportunity to privately discuss their side of a story, removing them from the eyes and ears of their peers.

The issue that Nicole faced was trying to reconcile with the rest of the class after a conflict had erupted. She admitted that she wanted to work on

...processing with the other kids. Because it’s inevitably so disruptive that they can’t focus easily. So say a fight breaks out, or there’s really intense yelling or cussing...and they always want to have their opinion on things...my way of dealing with it a lot of times is to just keep them working; maybe take a second, breathe a little, let’s get back to work ‘cause I don’t want to engage in all of the ‘he said/she said’ stuff. And I don’t know if that’s the best way to deal with it but I’m like, I have stuff I need to do, so we’re not gonna spend the whole period talking about a fight.

Though Marvin and Nicole had differing opinions on how to resolve conflict in their classes and were not completely satisfied by how they dealt with it, they seemed to agree with the idea that all students were affected by altercations in the classroom. Marvin tried to facilitate students

handling altercations amongst their peers, while Nicole was more akin to separating students and talking to them individually.

Disruptive behavior. Sometimes students displayed behavior that was different from the norm and it disrupted their classes. For many of Tubman’s teachers, Fatima’s presence on the campus played an integral role in how they dealt with the challenging behavior of individual students. Instead of referrals to the office, administrative personnel remarked that more students were being sent to Fatima for mental health assistance than to the office for disciplinary reasons.

Khalil had a particular way of laughing through pain. When his students displayed inappropriate behavior he used his sense of humor to show them his deep-seated belief, that “The only thing that is going to get us out of this situation is excellence.” He continued, “You know in Africa, they give you a name and you have to live up to that name. Our kids, they have these beautiful African names. If they not living up to the name, I call ‘em Betty.” Khalil added, “...You want a doctor whose been getting high in college? In Africa, you can’t be an Imam if you done sold crack. Over here there are not certain standards. They got opportunities; it’s been paid for in blood...” By these words, Khalil was going back to African ancestral roots and the high cultural standards. He also honored those who had fought for the rights of Black people. Underlying Khalil’s philosophy is a strong love for his students and the desire for them to fulfill their potentials.

Summiyah placed importance on “basically being highly sensitive and in-tuned to the cues and subtle cues. Gauge where students are at. Don’t take it personally.” Nicole stated a similar idea with regard to paying attention to students. She expounded,

I try to be pretty perceptive of their personalities their behavior and anything out-of-the-ordinary. They’re being lethargic and instead of going immediately for the ‘punitive’ I go for the ‘pick your head up.’ ‘Do you need some breakfast? Are you hungry?’ Check. You’re not focused. This is out of character maybe there’s something going on? Let’s go outside and talk for a minute.

Nicole attributed the positive rapport that she had with her students to the fact that she emphasized creating a safe space where rudeness was not tolerated and had one-on-ones with students to honor confidentiality. Notably, Nicole’s idea of discipline was completely intertwined with how she established relationships in her class.

Taking into account the punitive measures that most students had faced before entering Tubman along with the traumatic experiences students had encountered, it was evident that teachers reflected deeply and reacted intentionally in their implementations of discipline. In some ways, learning about trauma made teachers more permissive with their discipline. In the cases of tardiness, self-medication, cell phones, and vulgar language, there were teachers who admitted to not enforcing school policies. However, there were other teachers who came up with alternatives to the school policies that generally involved teaching. For attendance, Delphine used the CBT assessment to help students to process their reasons for not coming to class. Marvin taught the students who arrived on time, while late students learned from peers. Frank showed a time that he used his class lesson to discipline a student who was high. Summiyah taught her students about appropriate cell phone usage. Marvin, with his own discourse, was teaching students alternatives for the n-word. Khalil used his sense of humor, culture, and history to curb behavior.

Other ways that teachers disciplined students were seen in the way teachers handled disruptive behavior. Summiyah and Nicole noted paying more attention to classroom cues as a preventative measure while teachers also had an outlet of sending referrals to Fatima for more assistance. Nicole outlawed offensive language in her class and chose to remove students from the classroom if they were in an altercation or displayed any disruptive behavior in order to talk to them privately outside. Marvin preferred having students who were involved in an altercation try to work it out within the classroom. For Tubman teachers, discipline was not necessarily viewed synonymously with punishment; it was a way of teaching self-control and accountability.

Conclusion: Healing Lessons

As Tubman teachers implemented lessons learned from PD sessions into their teaching and discipline practices, it is important to note that the teachers had successful practices in place prior to the PD as well. Thus, their engaging practices were often accentuated by their participation in the training. From the first phase of PD to the third and final phase, teachers were exposed to healing practices that could engage students in meaningful ways.

The previous sections described the various translations of the PD on PTSD into their classroom practices in the areas of building relationships, scaffolding, allowing students to teach, changing classroom power dynamics, employing explicit lessons that dealt with trauma, and disciplining with PTSD in mind. The ability to apply professional development to all subject matter is typically a contentious issue among secondary teachers. Yet, the focal teachers provided curricular examples that illustrated the mental health PD series' success in reaching teachers from the various disciplines of math, science, social studies, language arts, ethnic studies, women's studies, and special education.

According to the data, the underlying obstacle for the eight focal teachers was that they needed more time to incorporate strategies from the PD into their curriculum for both academic and emotional reasons. The time challenge in working with students was already evident in the way that some youth stayed at Tubman for an extra year due to lacking enough credits to graduate. Being a two-year senior was a reality for some students. Tubman teachers did strive to reach the state standards and the majority of them already placed emphasis simultaneously on culturally relevant pedagogy. With the PD on PTSD, teachers additionally prioritized relationships, scaffolding, students teaching, shifting power, and implementing lessons and discipline that were explicitly related to PTSD. In other words, heeding all of these considerations, teachers generally moved at the pace of their students and depth was more often prioritized over breadth.

Chapter Seven Looking Forward

Dragonfly out in the sun you know what I mean, don't you know
Butterflies all havin' fun you know what I mean
Sleep in peace when day is done
That's what I mean
And this old world is a new world
And a bold world
For me.

-*"Feeling Good,"* Written By Michael Buble,
Sung by Nina Simone

Though it could be argued that public schools reproduce the system at-large, these sites have also traditionally been at the revolutionary forefront of socio-political change. Oppressed communities have historically pushed public educational institutions to provide resources for youth who have been systematically disregarded. Desegregation of the Civil Rights Movement, free breakfast and lunch programs of the Black Panther Party, bi-lingual initiatives of political Chicano/Latino communities, and programs for children with special needs are just a few examples. Mental health should also be prioritized as it impacts the well-being of children, particularly children of color who are living in violent, hostile, survival-based climates. However, according to Bell's critical race theory analysis in the interest convergence principle (1980), it is important to acknowledge that mental health issues are universal also affecting white, affluent youth. Therefore, a move toward accessible mental health care in schools could potentially serve all children.

Post-traumatic stress disorder (PTSD) has largely been absent from the discourse of educators. However, as this research shows, professional development in the area of mental health is a valuable tool for teachers, particularly those who work with students in highly stressed environments. As discussed previously, 99% of the youth at Tubman, which served students who had been pushed out of the comprehensive high schools, displayed symptoms of PTSD. This meant that mental health issues and education collided by design. The district did not offer extra funding to support the youth at Tubman, although they were suffering in the aftermath of the violent deaths of their peers. Therefore, the school made an independent partnership with a community clinician, Fatima. In working with Tubman's most severely traumatized youth directly, she experienced vicarious traumatization. Empathizing with Tubman's teaching staff, she offered to conduct professional development training on PTSD for them to which they collectively agreed. Fatima facilitated two sessions and prepared Summiyah to conduct a final session.

Through this PD training, teachers learned a great deal about their students as well as themselves. The Tubman faculty recognized the impacts of students' symptoms of PTSD and the effects that their trauma had on their academics and classroom behaviors. It became evident that serving a population of students who suffered from PTSD resulted in vicarious traumatization for teachers. By becoming aware of the trauma that they, as teachers, faced, they were in turn able to empathize with their students. Teachers displayed an increased awareness of

both the internalized symptoms and the externalized symptoms of PTSD present in both themselves and their students. This allowed them to be more in touch with quiet students who may have been suffering but did not exude outward symptoms as well as recognize that students' angry outbursts and hostile behavior had root causes.

The PD made it clear that not only did their school population embody the tension of trauma and under-performance in academics but the methods of healing, such as building relationships, providing rituals, and using CBT, or positive thinking, corresponded to elements of effective education. This study found that teachers re-conceptualized their practices through ways of better empathizing with their students, recognizing their fragility, and meeting students where they were. This profound understanding affected how they implemented the PTSD training in their subject areas as well as in the discipline of their students. I found that Tubman teachers implemented various techniques that ranged from building relationships, scaffolding their curriculum, allowing students to teach, empowering students, teaching explicitly about trauma, and incorporating techniques used from the PD into their discipline practices.

Mental Health Care

Additionally, it became clear that self-care among members of a traumatized school community must be prioritized. One of the most accessible sources of healing for teachers was allowing for discussion amongst colleagues to process challenging situations that occurred at the school. This communication proved especially necessary because teachers mentioned not being able to talk to outsiders about events that they encountered at Tubman. Teachers also took advantage of the resources that Fatima promulgated. In addition to finding ways outside of school to manage their stress, they sought out free counseling sessions provided by the school district. Teachers also referred their students to Fatima for mental health therapy when emotional situations arose.

Although the effect of how this training affected students, administration, and the school as a whole, were outside the scope of this study, there were indicators that the impact was positive. After the third phase of the PD sessions, one of the office administrators commented that teachers had decreased their student referrals to the office for disciplinary reasons and instead sent referrals for mental health therapy.

Student Focus

Students were present throughout my research and in casual conversations seemed to appreciate the topic of my study. Although I made it clear that my research was about teachers, some students voluntarily shared their own traumatic experiences.

Traumatized youth are a vulnerable population which may contribute to the lack of research on this particular group. However, more research should be done to explore the impacts on students who have experienced learning in classrooms with teachers who have been trained in mental health issues. A study that extends to include students' perceptions could be revelatory for the field of education as well.

Teacher / Mental Health Therapist Collaboration

An idea that was touched on in this study was the Cognitive Behavioral Interventions for Trauma in Schools (CBITS) course that Fatima co-taught with Summiyah. The CBITS curriculum (Jaycox, 2004) was developed for a predominately Latino population of students of Los Angeles Unified School District at the middle school level. Summiyah was able to offer valuable assistance in helping Fatima develop a curriculum that related more to Tubman students. She helped to fill in the spaces and gaps where Fatima and her interns were struggling to connect with the students. This collaboration would be valuable in creating future resources applicable to youth who suffer from PTSD. This provides a space for future research in that it is the co-teaching of a mental health therapist and a certified educator.

Cultural Competency

Mental health therapist Fatima and the Tubman faculty displayed high levels of cultural competency which appeared to be a prerequisite for this type of training. Fatima made a conscious decision to use the framework of post-traumatic stress disorder as opposed to post-traumatic slave syndrome. Although the Diagnostic Statistical Manual acknowledged PTSD, yet did not recognize racism as a cause for mental health disorders; Fatima did. She espoused the ideas presented by De Gruy-Leary on post-traumatic slave syndrome (2005). Yet in her role as a facilitator, she was in a position to discuss mental health issues with an ethnically mixed group of distressed teachers who served traumatized students. As a mental health professional, her use of PTSD respected the emotional needs of all of the teachers and provided an inclusive training that teachers could embrace.

Possessing cultural awareness was an asset for educators as well. Lesson plans and interactions that reflected cultural competence allowed for deeper connections with students. This awareness fostered trusting relationships that are crucial for a trauma sensitive classroom. Cultural competency in lesson plans also reminded students of the trajectory of their ancestors and promoted the idea of them having a place in history and a responsibility in society.

Implications

All of the focal teachers mentioned that this PD was the first time that they had ever seen PTSD and education linked together. It was also stated that this was the first PD that they had attended that recognized teacher mental health issues. None of the teachers had participated in a certification program that brought attention to emotional disorders, like PTSD. One teacher surveyed additionally recounted that in a credentialing class, emphasis was placed on students with physical disabilities, however the teacher had yet to encounter a student that this training applied to.

Though there was low exposure to previous mental health training for educators, there was a consensus that professional development in this area was beneficial. Not only did it provide a background for the behaviors that teachers encountered, but also it helped them to understand their own reactions. Teachers felt that their PD sessions were relevant to their work and wanted to see it continue. Unfortunately, the school year did not provide any more professional development days and Fatima worked at a mental health clinic on the day of Tubman's staff meetings. However, it would seem that a school, like Tubman, where 99% of the

student population displayed symptoms of PTSD would not have trouble securing resources for mental health. Schools that serve similar populations of youth who reside in highly stressful areas should strongly consider teacher participation in professional development on mental health.

State education policies currently do not make mental health training a requirement for credentialing programs. Because mental health is an issue that affects all people regardless of age, gender, ethnicity, or socio-economic background, state policies should make mental health education a requirement for teacher certification. This mandate could potentially impact high school dropout rates (Han & Weiss; cite) as stated in chapter two.

The fields of mental health and education must come together to provide Black youth the services necessary for their survival and their healing. As provided in chapter two, examples of privileged communities show that the possibilities for healing exist. They have simply not been available to poor children of color. As previously mentioned, underprivileged Black children have rapidly become targets for the foster care system and the school-to-prison pipeline. In these institutions, a small percentage of youth who become wards of the state are allowed limited access to public residential treatment programs (RTPs) and access to mental health care. These programs provide subpar assistance in comparison to that which affluent, predominately white children receive in private RTPs. As Tubman recognized, the schoolhouse can serve as a place of healing making therapeutic changes in classrooms that are accessible to students instead of helping only young people who exhibit the most severe needs. This dissertation is just scratching the surface on the possibilities that can materialize.

I conclude with words from Khalil and Marvin. Khalil felt that healing the Black community was the next frontier, “Our work is the new underground railroad.” Marvin concurred as he spoke on how he stayed focused, determined, and committed to his students:

Just remembering, what we’re a product of, you know? Our communities, our people, we struggle, and the struggle continues. So we come here prepared to do the work, to fight for the liberation of the minds of our children. Now I know what they mean when they say teachers are on the front lines...I would just say, stay grounded, stay around love. Give what you want, receive what you give, keep it simple.

As this dissertation began by making the analogy between war veterans and Black urban youth, Marvin’s words “fighting for liberation” and being “on the front lines” also parallel teaching with war. Yet, he juxtaposes this notion with the duality of humility and love. Being able to connect with students on a human level allowed for teachers to empower their students, build on their talents, and amplify their positive characteristics.

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**Appendix A:
Email Flyer from Fatima of Mental Health Services**

Post Traumatic Stress Disorder

The definition of, and how this disorder may present itself in the classroom. Tips can be provided to teachers of possible triggers for youth, and how PTSD may affect a student academically.

When should I call for help?

When should I refer a student for mental health services? Assisting staff in understanding what types of behaviors are referable for services, and how to make a referral.

Trauma and Crisis on the campus: What's the plan?

Trauma and Crisis: What teachers can do in the event of a school wide crisis. When and how should staff access the assistance of the Mental Health Mobile Crisis Team.

Avoiding Teacher Burnout: Self-Care

Teacher Burnout. Exploring and learning about vicarious dramatization. What is it and how would I know that it is affecting me?

Teachers Learning the ABC's

The ABC's of youth behavior, role-play and interactive workshop. (Antecedent, Behavior, and Consequences).

This is Your Brain on Drugs:

This is Your Brain on Drugs: the affects of Marijuana and other drugs on learning. Illicit drug use as a method to self-medicate trauma.

Teens Who Hurt (based on the book by Dr. Hardy and Dr. Laszloffy)

Exploring youth violence in America and on the school campus.

Possible Parent workshops:

Parenting a young adult.

Conscious Parenting Family Circles Support Groups

Effective Black Parenting Classes

Parent Support group for Chicano and Latino Parents

**Appendix B:
CBT Assessment for the Academic Mentors Program**

Delphine adapted the worksheet based on a resource that she found at:

<http://www.kpchr.org/research/public/acwd/acwd.html>

Grading Rubric:

Depth of Answers and Explanations

Points awarded based on your responses

0--- Answer “I don’t know” or “I don’t care” or leave it blank

1--- 1 to 5 word simple responses with little or no explanation for behavior, feelings and consequences

2--- 5 to 9 word responses with minimal insight into behavior, feelings and consequences

3--- 10 word or more responses with thoughtful analysis and insight into behavior, feelings and consequences

Regarding your in class attendance:

<i>Behavior</i>	<i>Expected or Unexpected Behavior**</i>	<i>How it made the staff or children feel?</i>	<i>Consequences of the behavior</i>	<i>How I felt about the behavior</i>	<i>How might I change my actions in the future to result in positive consequences ***</i>

Regarding your placement attendance:

<i>Behavior</i>	<i>Expected or Unexpected Behavior**</i>	<i>How it made the staff or children feel?</i>	<i>Consequences of the behavior</i>	<i>How I felt about the behavior</i>	<i>How might I change my actions in the future to result in positive consequences ***</i>

Regarding your tone and quality of interactions with Delphine and the librarian:

<i>Behavior</i>	<i>Expected or Unexpected Behavior**</i>	<i>How it made the staff or children feel?</i>	<i>Consequences of the behavior</i>	<i>How I felt about the behavior</i>	<i>How might I change my actions in the future to result in positive consequences ***</i>

Regarding your tone and quality of interactions with the after school staff:

<i>Behavior</i>	<i>Expected or Unexpected Behavior**</i>	<i>How it made the staff or children feel?</i>	<i>Consequences of the behavior</i>	<i>How I felt about the behavior</i>	<i>How might I change my actions in the future to result in positive consequences ***</i>

Regarding your tone and quality of interactions with children:

<i>Behavior</i>	<i>Expected or Unexpected Behavior**</i>	<i>How it made the staff or children feel?</i>	<i>Consequences of the behavior</i>	<i>How I felt about the behavior</i>	<i>How might I change my actions in the future to result in positive consequences ***</i>

Regarding the quality and preparation of your in class assignments:

<i>Behavior</i>	<i>Expected or Unexpected Behavior**</i>	<i>How it made the staff or children feel?</i>	<i>Consequences of the behavior</i>	<i>How I felt about the behavior</i>	<i>How might I change my actions in the future to result in positive consequences ***</i>

Regarding the quality and preparation of tutoring lesson plans and activities:

<i>Behavior</i>	<i>Expected or Unexpected Behavior**</i>	<i>How it made the staff or children feel?</i>	<i>Consequences of the behavior</i>	<i>How I felt about the behavior</i>	<i>How might I change my actions in the future to result in positive consequences ***</i>

Appendix C: Pink Peace Outline of Curriculum

Created by the students in Tammy's women's studies class

Pink Peace

Our Mission: To heal relationships between young women on urban campus

Who we are: A group of high school students from the Women's Class at Tubman High School. We would like to give back to our community and share what we have learned and experienced as young women.

Explore:

1. Why do we fight each other?
2. What was the final outcome, did it really change the situation?
3. Consequences

Solutions:

Develop a thought process and a strategy to deal with the drama

Know the facts:

1. There are three people who want you to fight:
 - a. The student body – They want to be entertained. Never be anybody's live TV show. You will be free entertainment, have more pride in yourself than that.
 - b. Boys – They love to see a "chick fight"
 - c. Your girls – Most of the time your friends will pump you up the most to fight. Is that the definition of a true friend?
2. Most girls fight when they feel disrespected. This is an effort to reclaim the power. If you don't have power at home, in society or in your personal life you will demand that power from your peers if they disrespect you.

Develop a thought process before reacting:

- T Take responsibility for yourself. You can't control anybody but yourself. You cannot control people's actions or words, but you can control your reaction to them.
- H Heart – have a heart or empathy for what the other person might be going through for them to act the way they do. You don't always know what people go through away from school.
- I Inspect the situation - Why don't you like her, why doesn't she like you? Admit the wrong you have brought into this situation. Are you guilty of bullying? What will fighting cost me?
- N Never fight over a boy. It's never worth it. If he wants to be with you he will draw the boundaries with other girls.
- K Know yourself. You need to be secure and confident with who you are as a person. Be stronger than words. If you know yourself, you don't have to defend yourself.

3. Learn to Co-exist on campus with girls you don't like
 - a. Minimize body language and looks that shows you don't like the person
 - b. No "air talking"
 - c. Know that this is a skill that you will have to use for the rest of your life at college, at work, social settings, at home.
 - d. Don't fight anyone else's battle

How to know if your school needs Pink Peace:

1. Consider:
 - a. How many girls have fought this year on campus?
 - b. How many girls have been suspended or expelled for fighting?
 - c. How many verbal altercation or "near fights" do you break up each month?

Is your staff tired of the drama?

Then allow us to come and present!

Contact: Tammy @ Tubman

**Appendix D:
Sample Tubman Teachers' Survey Questions**

Survey conducted by Dawn Williams Ferreira

Graduate School of Education, UC Berkeley

dawnw@berkeley.edu

Where did your understanding about PTSD in urban education come from?

What from the PTSD PD sessions stand out to you?

What has been beneficial about the PD sessions on PTSD?

What would you change about the PD sessions on PTSD?

What if any changes have you made in how you approach your curriculum since the PD about PTSD began?

What if any changes have you made in how you conduct a lesson since the PD on PTSD began?

What if any changes have you made in how you approach the discipline in your classroom since the PD on PTSD began?

How did this PD differ from other Pads you have attended?

**Appendix E:
Sample Interview Questions for Teachers of Tubman**

Survey conducted by Dawn Williams Ferreira

Graduate School of Education, UC Berkeley

dawnw@berkeley.edu

What did you know / have you learned about Post-Traumatic Stress Disorder?

Where did your understanding come from?

What from the PD sessions stands out to you?

What has been beneficial about the PD sessions for you?

If you have any students who exhibit symptoms of PTSD, which symptoms do you see in your classes?

How do you deal with those situations?

What do you know / have you learned about vicarious dramatization?

What are you doing for self-care?

**Appendix F:
Sample Interview Questions for Mental Health Therapist of Tubman**

Survey conducted by Dawn Williams Ferreira

Graduate School of Education, UC Berkeley

dawnw@berkeley.edu

How did you become involved with Tubman?

What is your professional experience?

How long and in what capacity have you worked with BUSD youth?

How does racism if at all contribute to mental health issues?

Did this impact the way that you framed the PD around PTSD?

What factors did you have to consider as you developed the PD for teachers?

What were the strengths of the PD sessions? What was your overall feeling about the sessions you presented?

What would you have done differently?

Why did you choose CBT as the preferred intervention?

What worked from Jaycox's CBT curriculum that you used with the students?

What were the limitations?

Is there any information that you would like to add that was not covered in this questionnaire about your participation in the mental health PD sessions for B-Tech?