Elementary Educators' Experiences Implementing Trauma-Informed Practices: Process, Integration, and System Change in Rural Pennsylvania Schools

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Abstract

This qualitative phenomenological study examined how elementary educators in two rural east-central Pennsylvania counties perceive the implementation of trauma-informed practices (TIPs). Semi-structured interviews were conducted with 13 participants (3 administrators; 10 teachers) who implemented TIPs for at least one year. Analysis followed a hybrid coding approach (deductive alignment to SAMHSA's principles with inductive codes for emergent ideas) and second-cycle thematic synthesis. Findings, organized by three research questions (implementation process; curricular integration; system-level change), showed (a) Implementation as transformation, driven by leadership modeling, peer coaching, and a shift from consequence-first to connection-first; (b) Curricular integration through safety, voice, and choice, with teachers embedding predictable routines, brief regulation breaks, and options for task response; and (c) System shifts, including reframed walkthroughs, strengthened staff coherence, and early evidence within the first year of calmer classrooms and improved relationships. Nine teachers described initial challenges balancing instruction with decoding trauma responses; all three administrators emphasized coaching and consistency. Implications include phased rollouts, coaching structures, and observable indicators that align TIPs with pacing and standards. Limitations include a single-region sample and self-report data. The study contributes practitioner-ready guidance for sustainable TIP implementation in K-6 settings.

Keywords: trauma-informed practices, elementary education, SAMHSA principles, qualitative phenomenology, rural schools

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Introduction

Trauma exposure is prevalent and consequential for learning, behavior, and school climate, yet implementation quality varies widely across districts (Perfect et al., 2016). In rural elementary settings, educators face the dual challenge of meeting academic standards while building predictable, emotionally safe classrooms (National Child Traumatic Stress Network [NCTSN], 2017). This article reports on a phenomenological study of administrators' and teachers' lived experiences implementing trauma-informed practices (TIPs), asking: How was implementation experienced? How did TIPs integrate with existing curriculum? What system-level changes followed? The contribution is a practice-focused, role-differentiated account that translates lessons from a district rollout into actionable guidance for school leaders and K-6 teachers.

Brief Literature and Framework

Trauma-informed schooling adapts the SAMHSA principles (Substance Abuse and Mental Health Services Administration [SAMHSA], 2014) - Safety; Trustworthiness and Transparency; Peer Support; Collaboration and Mutuality; Empowerment, Voice, and Choice; Cultural, Historical and Gender Responsiveness - to classroom and school routines. Implementation literature emphasizes predictable environments, relationship-rich instruction, and coherent systems such as walkthroughs, professional learning, and coaching that prevent re-traumatization and support regulation and readiness to learn (Blaustein & Kinniburgh, 2019). This study uses SAMHSA as an analytic frame and organizes findings by research questions to clarify where practice meets system demands.

Existing outcome studies on trauma-informed schools have highlighted reductions in disciplinary incidents, improvements in school climate, and the importance of leadership support and sustained professional learning for implementation (Dorado et al., 2016). Much of that work, however, has drawn on K-12 frameworks or secondary settings in larger or urban systems, with less attention to how trauma-informed approaches are taken up in elementary classrooms and daily routines. Rural implementation is especially under-described, even though many rural districts have smaller staffs, fewer on-site mental health providers, and limited access to external partners (NCTSN, 2017).

Qualitative and phenomenological studies of educator experience suggest that practice change is often negotiated through day-to-day routines, workload, and local histories of initiatives rather than through policy documents alone. Yet there is limited research that applies a phenomenological lens specifically to teachers' and administrators' experiences of trauma-informed implementation in rural K-6 settings, or that differentiates administrator and teacher perspectives during early phases of this work. This study addresses that gap by examining how K-6 educators and building leaders in rural districts in the Northeast Region of Pennsylvania describe implementing trauma-informed practices, integrating them into instruction, and navigating system-level changes during the first years of practice.

Methods

Design and Setting

A qualitative phenomenological design was used to capture educators' lived experiences of trauma-informed implementation in rural Pennsylvania elementary schools (Creswell & Poth, 2018). The study took place in K-6 schools across Northeast, Pennsylvania where trauma-informed practices had been in place for at least one full academic year prior to data collection. For this study, at least one year of implementation meant that staff had completed district-sponsored trauma-informed professional learning, that schoolwide expectations and routines explicitly reflected trauma-informed principles, and that these practices had been used consistently across a full school year. In this study, rural refers to state-designated rural districts characterized by small K-6 schools and low population density in the Northeast Region of Pennsylvania.

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Participants

Thirteen educators participated: three building administrators (two principals and one assistant principal, A1-A3) and ten teachers (including general education, special education, and specialist roles, T1-T10) from K-6 buildings across multiple public-school districts in the Northeast Region of Pennsylvania. Participants were recruited through criterion-based purposeful sampling and volunteer response from elementary schools that met the implementation criteria described above. Following institutional review board and district approvals, a recruitment email describing the study and eligibility criteria was shared with elementary administrators and teachers through building and district leaders; those who responded and completed consent formed a volunteer pool. From this pool, participants were purposefully selected to ensure variation in role (administrator versus teacher) and grade level or assignment (K-2, 3-5, 6, and K-6 special education), and additional teachers were recommended via snowball sampling. Across the sample, years in education ranged from 3 to 25, and all participants had at least one full academic year of active involvement in trauma-informed practices in their current schools. Pseudonyms are used throughout to protect confidentiality.

Table 1. Participant demographics

Pseudonym	Title	Assignment	Gender	Years of Service
A1	Principal	Principal	Male	8
A2	Assistant Principal	Assistant Principal	Female	12
A3	Principal	Principal	Male	25
T1	Classroom Teacher	Grade 1	Female	9
T2	Classroom Teacher	Grade 4	Male	18
T3	Special Education Teacher	K-6	Male	11
T4	Classroom Teacher	Kindergarten	Female	14
T5	Classroom Teacher	Kindergarten	Female	3
T6	Classroom Teacher	Grade 6	Male	14
T7	Classroom Teacher	Grade 4	Female	9
T8	Special Education Teacher	K-6	Female	11
T9	Classroom Teacher	Grade 5	Female	13
T10	Classroom Teacher	Grade 3	Female	5

Note: Pseudonyms are used for all participants. "Years of Service" reflects total years working in K-12 education.

Data Collection

Each participant completed one 45-60 minute semi-structured interview conducted virtually, via Microsoft Teams at a time they selected. Interviews were audio recorded with consent and transcribed verbatim. The same core interview protocol, organized around the three research questions, was used for administrators and teachers, with minor role-specific prompts to elicit both building-level and classroom-level examples. For RQ1 (implementation), sample questions included "Can you describe your experience with the implementation of trauma-informed practices in your school?" and "What kind of training or support did you receive as part of this implementation?" For RQ2 (curricular integration), questions such as "How do trauma-informed practices fit into your daily work or responsibilities as a teacher or administrator?" and "Have these practices changed the way you approach instruction or student interaction? If so, how?" invited concrete instructional examples. For RQ3 (system-level change), questions asked "Since implementing trauma-informed practices, what changes have you noticed in the school environment or culture?" and "Have there been any changes in policies, procedures, or professional expectations related to trauma-informed practices?" The researcher began each interview with brief introductions and a review of consent and confidentiality, invited participants to share any questions, and used follow-up prompts such as "Can you give me a specific example of that?" to deepen descriptions. Field notes captured contextual details, striking language, and early analytic hunches immediately following each interview (Creswell & Poth, 2018).

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Analysis and Trustworthiness

First-cycle hybrid coding combined deductive and inductive codes. Deductive codes operationalized SAMHSA's six trauma-informed principles as analytic categories, such as "Safety - predictable routines," "Trustworthiness and transparency - consistent follow-through and clear expectations," "Peer support - student-to-student support or check-in systems," "Collaboration and mutuality - shared problem solving and team-based responses," "Empowerment, voice, and choice - student choices and shared regulation plans," and "Cultural, historical, and gender responsiveness - adapting practices for local context and family strengths." Inductive codes captured participants' own language and routines, for example "connection before correction," "soft start," "calm corner," "reset spaces," "re-entry meetings," and "teacher scripts for repair." Transcripts were coded manually by the primary researcher using Microsoft Word and Excel (Saldaña, 2021).

In second-cycle thematic analysis, related codes were clustered into categories and then into themes aligned with the three research questions. This process was iterative: codes and theme labels were refined across multiple passes through the data, incorporating field-note details and returning to transcripts to check fit and to search for disconfirming evidence. Simple frequency counts by role, such as the number of administrators and teachers who referenced a particular routine or tension, were used descriptively to show how widely patterns appeared across groups and to support interpretation; they were not treated as statistical tests. Because a single researcher conducted the coding, several strategies were used to guard against confirmation bias and strengthen trustworthiness, including maintaining a reflexive journal, writing analytic memos during coding, consulting periodically with a colleague familiar with the research site for an external check on interpretations, and preserving an audit trail of coding decisions. Triangulation across administrator and teacher perspectives and alignment of themes with the research questions provided additional checks on credibility (Lincoln & Guba, 1985). The researcher also invited participants to review brief summaries of their interviews and a short description of preliminary themes and incorporated clarifications they offered. A reflexive journal and an audit trail of dated memos, evolving codebooks, and theme decisions documented how interpretations were refined across analytic cycles to support credibility and confirmability.

As an elementary principal in a rural Pennsylvania district, the researcher occupies a near insider position to the study context. This role provided familiarity with state policy, rural staffing patterns, and the daily demands faced by elementary educators, which supported rapport and depth of description in interviews. At the same time, it created the risk of assuming shared understandings of trauma informed practice or overemphasizing approaches that align with the researcher's own experience. Maintaining a reflexive journal, explicitly inviting participants to correct or complicate interpretations during member checking, and checking emerging themes with a colleague helped the researcher bracket prior experience and foreground participants' language in the analysis.

Findings

RQ1. How was the implementation process experienced?

Theme 1: Implementation as transformation (mindset, modeling, and peer leadership).

- Leaders model calm and consistency. A1 described moving beyond compliance to commitment, noting that leadership modeling of regulation mattered as much as directives. A2 highlighted scaffolding for staff through ongoing coaching and PLC refreshers; A3 leveraged peer leadership to normalize strategies, such as teacher-leaders coaching colleagues. (Administrators: 3/3)

- Teachers reframe behavior as communication. Multiple teachers reported shifting from consequence-first to connection-first, linking that shift to calmer rooms and stronger relationships. (Teachers: 8/10)

- Early implementation strain is real. Nine of ten teachers noted the initial burden of teaching content while decoding trauma responses,

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describing a learning curve that eased as routines and common language spread. (Teachers: 9/10)

One administrator summarized the early stages of this shift:

"Absolutely. When we first started noticing a rise in student behavioral incidents that didn't quite fit the typical mold- things like unexpected outbursts or withdrawal- we realized we needed to shift our approach. That's when we started exploring trauma-informed practices. I led the charge by forming a committee to assess our needs, and we introduced the concept through staff PD. It wasn't just a new set of rules- it was a mindset shift. Some teachers jumped right in, others were skeptical. But over time, as we practiced, reflected, and saw results, more came onboard." (A1)

A primary-grade teacher similarly described how professional development and daily strategies changed her perspective:

"Honestly, when we first started talking about trauma-informed practices, I didn't really know what it meant. I assumed it was just about being 'nicer' to kids. But once we went through the initial PD and I started trying some of the strategies- like daily check-ins and using calm-down spaces- I saw a change. The kids responded differently. It became clear this wasn't just another initiative- it was something that helped them feel safe." (T1)

Takeaway: Implementation is not a discrete professional development event, but a cultural reset sustained by leader modeling, peer coaching, and a shared language that privileges connection before correction.

RQ2. How did TIPs integrate with existing curriculum?

Theme 2: Safety, voice, and choice as how we teach.

- Predictability baked into lessons. Teachers embedded visual schedules, brief regulation breaks, and clear transitions as core lesson architecture rather than add-ons. (Teachers: 10/10)

- Instructional choice without losing rigor. Teachers offered options for response (write, draw, record; partner or individual), increasing engagement for dysregulated or anxious students while meeting standards. (Teachers: 8/10; 6/10 linked choice to stronger task persistence)

- Walkthroughs that notice tone and regulation. Administrators reframed observations to include tone, relationship evidence, and regulation strategies alongside objectives and pacing. (Administrators: 3/3)

Teachers offered concrete examples of how trauma-informed routines structure the school day. One kindergarten teacher explained:

"We use a soft start every morning with calming music, dim lights, and choice activities. I also integrate breathing exercises into our transition times and teach feeling words explicitly during read-alouds." (T4)

An upper-elementary teacher described using check-ins, flexible seating, and regulation breaks alongside core instruction:

"I use a class check-in form a few times a week, offer flexible seating, and allow regulation breaks. During writing time, some kids use noise-canceling headphones or sit on the floor with a clipboard. I also use grounding activities before tests or presentations." (T6)

Takeaway: TIPs integrate most naturally when leaders and teachers treat safety, routines, and choice as conditions for learning - tight on standards, flexible on pathways.

RQ3. What system-level changes followed?

Theme 3: Coherence, capacity, and early climate shifts.

- Distributed leadership and organic spread. Teacher-leaders and hallway micro-PD accelerated adoption, embedding calm corners, check-in routines, and common language building-wide.

Administrators also linked these routines to broader shifts in school culture and climate. A3 reflected:

"Our building feels more humane. Teachers speak to each other with more grace. Students are more connected. Even our discipline data shows fewer referrals for 'defiance'- because we've reframed what that means." (A3)

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Teachers echoed these changes at the classroom level. As T1 noted:

"The classroom feels calmer. Students look out for each other more. I've had fewer fights, fewer tears. I also think it's made me closer to my kids- I know more about what they're carrying into school every day." (T1)

- Professional learning that sticks. Staff favored ongoing coaching and PLC touchpoints over standalone workshops; administrators aligned professional learning calendars accordingly. (Administrators: 3/3; Teachers: 7/10)

- Early outcomes. Participants described calmer classrooms, more regulated student responses, and improved relationships; teachers reported feeling more equipped to respond, not react. (Teachers: 8/10; Administrators: 3/3)

Divergent views. Some staff perceived TIPs as one more thing, especially during pacing crunch periods; early resistance decreased as practical benefits became visible.

At the same time, both leaders and teachers acknowledged tensions around time and competing initiatives. A1 observed:

"Some felt it was 'one more thing,' but most now appreciate that the walkthroughs focus on connection rather than compliance. It's shifted our tone as a team." (A1)

Teachers also named the emotional toll of this work and the risk of burnout. T10 shared:

"Burnout is real. You carry a lot when you know what some of these kids have been through. I've learned to set better boundaries and to lean on my colleagues. We talk about compassion fatigue openly now, which helps. Also, we need more time for this work. It's hard to add one more thing to the plate when you're already juggling 25 things. But I believe in it. I've seen how it changes relationships with kids. That's what keeps me going." (T10)

Discussion

Answering Research Questions

- RQ1 (Implementation): Implementation was experienced as transformative culture work, not a program. Leader modeling and peer coaching produced buy-in, while teachers' lens shift from behavior to communication reduced reactivity and escalations.

- RQ2 (Curricular integration): TIPs functioned as the how of instruction - predictable structures and learner choice that preserve rigor while supporting regulation and engagement. Walkthroughs that value tone and relationships keep TIPs aligned with standards.

- RQ3 (Systems): Coherence emerged where professional learning, walkthroughs, and teacher leadership were aligned. Climate indicators such as calmer rooms and improved relationships were commonly reported early signals of progress.

Across the three research questions, participants described a gradual movement from compliance to commitment. Early in implementation, several teachers and administrators talked about trauma informed training and routines as expectations they were required to meet and at times as one more thing layered on top of pacing guides and behavior systems. Over time, especially as warm starts, calm corners, and re-entry meetings became part of daily practice, they described these moves as simply how we do school. That shift from attending a required training to owning a shared way of working was most evident when participants linked trauma informed routines to calmer classrooms and a stronger sense of collective responsibility for regulation and relationships.

Contribution to Practice

1. Shift the unit of change to routines. Anchor TIPs in daily micro-routines such as entry, transitions, requests, and corrections rather than isolated lessons.

2. Coach to observable look-fors. Example look-fors: posted visual schedule; pre-taught transitions; explicit regulation options; affective tone; student choice on task mode; teacher language that names skills, for example Take a breath; choose your start.

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3. Protect time for warm starts. Morning meetings and check-ins are academic investments that stabilize readiness and cut time lost to escalation.

4. Align observations and PLCs. Include TIP elements in walkthrough rubrics and debriefs; use PLCs for case consults on routines, not only data walls.

5. Grow capacity via peers. Train teacher-leaders for shoulder-to-shoulder coaching, including model, co-teaching, and observe or feedback cycles.

Implications

For Principals and Assistant Principals.

Leaders can adopt a three-phase rollout that starts with Phase 1 focused on schoolwide routines and visuals, moves into Phase 2 with regulation menus and choice-based responses, and then progresses to Phase 3 with more advanced de-escalation strategies and restorative conferencing. Alongside this, they can re-write walkthrough forms so they include indicators for tone, relationships, and regulation, and ensure brief feedback loops are scheduled within 48 hours. To support ongoing learning, they can also build a coaching calendar that includes monthly labs on one specific routine, paired with 10-minute classroom try-outs so staff can practice and refine the work in real time.

For K-6 Teachers.

Teachers can script the first and last five minutes of class to pre-teach how students can ask for help, opt for a regulation break, and re-enter learning. They can provide two response modes for key tasks, such as allowing either writing or audio responses and partner or solo work and use quick 1-5 readiness checks to decide when to pause or offer a break. To keep things consistent, they can also use a common language card that helps them validate the student, queue a specific skill, offer a clear choice, and then close the loop before moving on.

For Districts.

District leaders can fund release time for peer coaching and intentionally align trauma-informed practices with existing SEL and MTSS work so that initiatives reinforce each other rather than compete. They can also include clear trauma-informed practice look-fors in induction and new-teacher mentoring, ensuring that routines for regulation, relationships, and repair are part of how new staff learn "how we do school" from the start.

Limitations and Transferability

This single-region, interview-based study limits generalizability; settings with different demographics or resources may experience different barriers. Thick description supports transferability to similar rural K-6 contexts. Future mixed-methods work could relate observed routine fidelity to office referrals, instructional minutes, and attendance. The study relied on self-reported perceptions at a single point in time without classroom observations or student outcome data, so reports of calmer classrooms and stronger relationships should be interpreted cautiously. Because participation was voluntary and the sample included three administrators and ten teachers, there is a risk of social desirability bias and role imbalance. In addition, the primary researcher served as the sole analyst, which further underscores the need for readers to consider transferability to their own local contexts rather than assuming broad generalization.

Conclusion

Elementary TIP implementation is most successful when leaders model the work, teachers own predictable routines and choice, and systems align professional learning, observations, and peer coaching. The practical message is simple: treat safety and regulation as prerequisites to cognition, and coach the routines that make that real - every period, every day. Future research could follow these educators over multiple years, use mixed-methods designs that connect educator perceptions and routine fidelity to student indicators such as attendance, disciplinary referrals, and academic progress, compare implementation across rural, suburban, and urban systems, and examine which professional learning and coaching models are most effective for supporting trauma-informed practice transformation.

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Declarations

Ethics approval and consent to participate. Approved by institutional IRB; informed consent obtained.

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Data availability. De-identified materials available upon reasonable request.

Author contribution. Thomas Bonner, Jr. designed the study, recruited participants, collected and analyzed data, and drafted the initial manuscript. Dr. Elana M. Evans provided methodological guidance, supported interpretation of findings, and contributed to revising the manuscript for intellectual content.

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administrators' and teachers' perceptions of trauma-informed practices in elementary schools, particularly in rural communities and in relation to adverse childhood experiences (ACEs). He treats trauma-informed practice as part of everyday teaching and learning, not as a separate program.

Dr. Elana M. Evans *was born and raised in Philadelphia, Pennsylvania. She received her Bachelor of Science in Elementary Education, Masters of Education in Elementary Education with a certification in Special Education, and a Masters of Education in Educational leadership with a principal certification from Chestnut Hill College. In 2015, she received her Interdisciplinary Doctorate of Leadership from Saint Joseph's University. In between her educational studies, she was hired by the School District of Philadelphia in 2006. She dedicated her educational gifts for the next decade to two comprehensive high schools in the West Philadelphia area. In 2017, she transferred to Paul Robeson High School for Human Services. Dr. Elana M. Evans has a strong passion for teaching her students as well as an even greater love of learning for herself. As a result of loving a challenge and because of her commitment to being a life- long learner, she mentors doctoral students, newly hired teachers, and facilitates professional development sessions for administrators, parents, and teachers utilizing her education to empower herself and others.*

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