Title: An exploration of trauma-informed practice in Irish primary schools: Experiences from teachers, principals and National Educational Psychological Service [NEPS] psychologists.

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A thesis submitted to the Department of Educational Psychology, Inclusive and Special Education, Mary Immaculate College, in partial fulfilment of the requirements for the Degree of Professional Doctorate in Educational and Child Psychology (DECPsy)

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Submitted to Mary Immaculate College, May 2025.

Word Count: 33,577 (excluding tables, figures, references, and appendices)

Abstract

Background: Trauma-informed practice (TIP) is a system that realises the widespread impact of trauma and understands potential paths for recovery; it recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re traumatization (SAMHSA, 2014, p.9). In recent years, TIP has gained widespread recognition and international attention in the field of education (Overstreet & Chafouleas, 2016). Efforts to incorporate TIP into the framework of the Irish education system are currently underway.

Aims: The aim of this research is to explore the lived experiences and perceptions of teachers, principals, and National Educational Psychological Service (NEPS) psychologists in their roles implementing TIP within Irish primary schools. Special attention will be devoted to exploring the factors that facilitate and hinder the implementation of these practices. Moreover, this research aims to explore the potential variances in TIP across different primary school setting and professional domains.

Sample: A total of twelve participants were recruited for the study, forming triads from four different primary school settings. Each school varied in size, status, context, and geographical location. Each triad consisted of one teacher, one principal, and one NEPS psychologist from each school, totalling four teachers, four principals, and four NEPS psychologists.

Method: The research adopted a qualitative design using multi-perspective interpretative phenomenological analysis (Larkin et al., 2019). Data was collected using semi-structured interviews.

Findings: The findings revealed that teachers, principals and NEPS psychologists experienced TIP as a transformational journey in shaping school culture. This journey included becoming trauma-aware, fostering whole-school buy-in, and embedding TIP into school culture. They noted that effective implementation required individualising TIP to their school needs. This included being familiar with the wider school community, understanding the students, and being responsive to the needs of the school. In efforts to implement TIP into their primary school setting, participants were faced with several systemic barriers including limited acknowledgement and insufficient guidance at a systemic level which was further compounded by resource limitations.

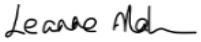
Conclusion: This research illuminates the current landscape of TIP in Irish primary school settings.

Key words: Trauma-informed practice, trauma, childhood adversity, multi-perspective interpretative phenomenological analysis

Declaration

I hereby declare that this thesis is the result of my own original research and does not contain the work of any other individual. Where use has been made of the work of other people, it has been fully acknowledged and referenced.

Name: Leanne Maher

Signature: 

Date: 05.05.2025

Acknowledgements

Firstly, I would like to express my deepest gratitude to all the participants who took part in this study. I sincerely hope that, in some small way, this research has given you and your students a voice. Without your willingness to share your experiences, this research simply would not have been possible.

To my fabulous supervisors, Dr. Margaret Nohilly and Dr. Gerard Farrelly. From the very beginning, I knew I had struck gold. Your unwavering support, expert guidance, and belief in me over the past three years have been nothing short of extraordinary. Thank you for challenging me, encouraging me, and helping me to grow both professionally and personally.

To my incredible DECPsy classmates, Úna, Ciara, Katy, Emma T, Madeleine, Elle, Emma H, and Hilary, your friendship, kindness, and solidarity have meant the world to me. Sharing this journey with you, through every high and low, has been a truly special experience. I will always treasure the memories we've made and the support we've offered each other along the way.

To all my wonderful friends, you know who you are, thank you for your patience, encouragement, and presence throughout these past few years. A special thank you to the 'Carrig Gals,' whose kindness and humour lifted me during many a 'Waffle Wednesday' when the overwhelm hit hard.

To my siblings, Damien, Stephanie, and Michelle, and of course Nelly. Thank you for being there for me in your own unique ways, even as you were navigating your own academic paths. Your encouragement and understanding have meant more than you know.

And finally, to my amazing parents, Eamonn and Una. This thesis is dedicated to you. Your love, encouragement, and unwavering support have carried me through not only the past three years but my entire life. This achievement is as much yours as it is mine. I am endlessly grateful for everything you've done for me.

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List of Abbreviations

ACEs – Adverse Childhood Experiences

ACT – Aspire, Connect, and Thrive Programme

ADHD – Attention Deficit Hyperactivity Disorder

ARTIC - Attitudes Towards Trauma-Informed Care

DCEDIY - Department of Children, Equality, Disability, Integration and Youth

DE - Department of Education

DECPsy - Doctorate in Educational and Child Psychology

DEIS - Delivering Equality of Opportunity in School

DES - Department of Education and Skills

EWO – Education Welfare Officer

GETs – Group Experiential Themes

HEARTS - Healthy Environments and Response to Trauma in Schools Programme

INTO - Irish National Teachers' Organisation

IPA - Interpretative Phenomenological Analysis

MGLD – Mild General Learning Disability

MIREC- Mary Immaculate College Research Ethics Committee

NCCA – National Council for Curriculum and Assessment

NCTSN – National Child Traumatic Stress Network

NEIC – North East Inner City

NEPS – National Educational Psychological Service

NREC – NEPS Research Ethics Committee

OECD - Organisation for Economic, Co-operation and Development

PEIN – Prevention and Early Intervention Network

PETs - Personal Experiential Themes

PRISMA - Preferred Reporting Items for Systematic Reviews and Meta-Analyses

PSI – Psychological Society of Ireland

ReLATE - Reframing Learning and Teaching Environments Model

SAMHSA – Substance Abuse and Mental Health Services Administration

SET – Special Education Teacher

SIM – Social Inclusion Model

SNA – Special Needs Assistant

SPHE – Social, Personal and Health Education

TIP – Trauma-informed Practice

WoE – Weight of Evidence

WSE - Whole School Evaluation

List of Key Terms

Trauma: An event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional or spiritual wellbeing. (Substance Abuse and Mental Health Services Administration [SAMHSA], 2014, p.7)

Trauma-informed practice: A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re traumatization (SAMHSA, 2014, p.9)

Adverse Childhood Experiences: Currently there is no consensus regarding the definition for adverse childhood experiences, however Kalmakis and Chandler (2013) propose that they are defined as "childhood events, varying in severity and often chronic, occurring within a child's family or social environment that cause harm or distress, thereby disrupting the child's physical or psychological health or development" (p. 1495).

Nurture Group: Nurture groups are in-school, teacher-led psychosocial interventions focused on supporting the social, emotional and behavioural difficulties of children and young people (NurtureUK, 2019).

Department of Education: The Department of Education originated in 1924 as a department of the government of Ireland. It facilitates children and young people, through learning, to achieve their full potential and contribute to Ireland's social, economic and cultural development. In October 2020, it formally changed its name from the *Department of Education and Skills* (DES) to the *Department of Education* (DE). Both terms will be referenced throughout this paper.

DEIS Schools: The Delivering Equality of Opportunity in Schools (DEIS) progamme is a government initiative aimed at reducing educational disadvantage (Department of Education and Skills [DES], 2017a). Under the DEIS programme, schools with the highest number of students at risk of educational disadvantage receive extra resources. DEIS schools are categorised into DEIS Urban band 1 (the most disadvantaged), DEIS Urban band 2, and DEIS rural where each category meets criteria for specific resource allocations (DES, 2017a).

Educate Together Schools: Educate Together is an independent school patron that works with many supporters and partners. Educate Together schools are state-funded, child-centred and democratically run.

1 Introduction

1.1 Overview of the Chapter

This chapter begins with an overview of the context and rationale of the study which focuses on trauma-informed practice in the Irish school context. It then provides an outline of the researcher's personal interest that led them to conduct their doctoral research in this area. The ontological and epistemological considerations of the study are discussed, followed by an overview of the thesis structure.

1.2 Context and Rationale

Developments in neuroscience have contributed to greater public awareness of how trauma and adversity affect childhood development and wellbeing (Cole et al., 2005; Felitti et al., 1998; Perfect et al., 2016; Treisman, 2017; Wolpow et al., 2009). In response to this growing awareness, trauma-informed practice (TIP) has gained widespread recognition across health, social, and judicial systems. In its practical application, TIP refers to a model of care that realises the widespread impact of trauma and understands potential paths for recovery; recognises the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatisation (Substance Abuse and Mental Health Awareness [SAMHSA], 2014).

Over the past two decades, TIP has integrated into education systems in efforts to provide early intervention and to mitigate against the effects of childhood trauma and adversity. More recently, global events such as war, the Covid-19 pandemic, climate change, and the rising prevalence of childhood mental health issues have compelled schools worldwide to adapt their environment and practice to address the level of childhood trauma and adversity as a result of these events.

Research on TIP within the realm of education remains a developing area of inquiry; however, its application within the Irish educational context is increasingly gaining attention. Despite its growing popularity, research in the Irish context is lacking (Delaney 2020; Hickey 2020). This research intends to expand on this knowledge and explore the current landscape of TIP in the Irish education system.

1.3 Delivering Equality of Opportunity in Schools (DEIS) School Context

The DEIS (Delivering Equality of Opportunity in Schools) programme was established in 2005 by the Department of Education (DE) to address educational disadvantage in Ireland. Under this programme, schools with higher numbers of students experiencing educational disadvantage receive additional resources. Some of these resources include a reduced teacher–student ratio, the allocation of administrative principals and deputy principals, enhanced access to a school meals programme, access to Home School Community Liaison services, access to the school completion programme, targeted literacy and numeracy supports, and increased time allocation from the National Educational Psychological Service (NEPS).

DEIS schools are categorised into DEIS Urban band 1 (most disadvantaged), DEIS Urban band 2, and DEIS Rural where each category meets criteria for specific resource allocations (DES, 2017a). Schools are categorised into these categories based on data from the National Census Small Area Population Statistics, the Pobal HP Deprivation Index and data from the DE Primary Online Database and Post-Primary Online Database. This data includes information on the number of Traveller and Roma children in the area, students residing in international protection accommodation centres, children experiencing homelessness, the prevalence of social housing, levels of community crime, and the number of students with English

as an additional language (DE, 2022). As such, the allocation of DEIS status to schools is based on important demographic and contextual information.

The Children's School Lives Study by Devine and colleagues (2024) conducted from 2018-2023 highlighted the differences in student population in DEIS and non-DEIS schools noting that students attending DEIS schools are more likely to come from areas of lower socio-economic class, have greater prevalence of minority group children, experience homelessness, and were impacted by food poverty, drug addiction and trauma. These socio-economic factors coincide with poor school attendance, school retention, academic achievement, and student wellbeing (Devine et al., 2024). Given the significant socio-economic challenges faced by many students in DEIS schools, TIP may be considered as a necessary approach in such school settings.

1.4 Educational Psychology in Irish Schools

The National Educational Psychological Service (NEPS) is the psychological service of the DE and provides educational psychological support to primary, post-primary, and special schools across Ireland. Each psychologist is assigned a group of schools within a specific area. NEPS operates on a weighting-based system depending on school population size, DEIS status, gender mix and geographical location. Schools with DEIS status receive priority access to NEPS.

The NEPS Model of Service supports schools to respond to the wellbeing, academic, social and emotional needs of all students, and includes a casework service for individual children and young people and a support and development service for school staff (DE, 2024). The focus of the NEPS casework service is to use a consultative approach, to promote better understanding of the student's

strengths and needs, to suggest evidenced-based interventions that may be helpful to include in the Student Support Plan, and to assist schools to implement, monitor and review those interventions. Moreover, the support and development service offered by NEPS focuses on building capacity, enhancing systems, policies and practices, to maximise a whole-school approach to creating environments which are inclusive to the needs of all students (DE, 2024).

NEPS also provides immediate psychological support following a traumatic event or tragedy within the school community, known as a critical incident. When such incidents occur, NEPS assists school management in assessing the impact, creating an action plan, mobilising resources, and accessing external supports. They also provide information and guidance to staff as they process the situation, support them in identifying students most in need, and help develop procedures for ongoing monitoring and referral where necessary.

However, concerns have been raised about whether NEPS has the capacity to fully meet the complex needs of schools, particularly those in disadvantaged areas. Despite DEIS schools receiving a greater time allocation from NEPS, the Organisation for Economic Co-operation and Development (OECD) Review (2024) commissioned by the DE to evaluate educational disadvantage in Irish schools reported that the current NEPS provision is insufficient to deliver a comprehensive educational psychological service. A recent study by Hickey et al. (2025), which explored the need for multi-disciplinary support in DEIS schools in Limerick City, emphasised the need for increased NEPS involvement. The study found that the number of psychological assessments allocated was inadequate to meet the level of need. As a result, some schools were reported to fundraise to support low-income

families who could not afford private educational psychological assessments that should be provided by NEPS.

Given the increasing complexity of students' needs in DEIS schools, the OECD Review (2024) reported that schools often utilised their additional funding to employ play therapists to support students experiencing trauma and anxiety. The review also highlighted a lack of therapeutic supports and staff trained to work directly with students and parents regarding trauma, and it advocated for increased psychological support for schools.

In response to these concerns, NEPS has taken steps to strengthen its support for schools, particularly through the development of trauma-informed initiatives. In recent years, NEPS has developed formal protocols for implementing TIP in Irish schools. In 2022, NEPS launched a self-paced webinar for school staff titled *'Introducing a Trauma-Informed Approach – The Stress Factor, Getting the Balance Right'*, which focused on promoting and implementing a whole school approach to TIP. In 2023, NEPS also rolled out a pilot counselling project providing one-to-one counselling support to students. In response to the OECD (2024) review, the pilot was expanded to 61 DEIS Urban band 1 and 2 schools in Dublin Southwest and Dublin City. While NEPS plays a critical role in supporting the educational and psychological needs of students across Ireland, particularly in DEIS schools, evidence suggests that current provision is not yet sufficient to meet the complexity of need.

1.5 Researcher's Positionality

My interest in the area of TIP stemmed from my professional experiences working in homeless, addiction, disability and mental health settings. Prior to

entering the Doctorate in Education and Child Psychology (DECPsy), I dedicated several years to working firsthand in these settings supporting clients who have endured significant levels of trauma. These frontline experiences offered me a unique lens through which to understand the complexities of trauma and its pervasive impact on individuals' lives. Witnessing the resilience and vulnerability of those I supported deepened my understanding of the multifaceted nature of trauma and highlighted the need for early intervention and preventative approaches that prioritise emotional and psychological safety. This, in turn, piqued my curiosity about the broader systemic impact of services in meeting the needs of those impacted by trauma.

Moreover, over the course of my studies on the DECPsy programme, I had the opportunity to attend guest lectures relating to different aspects of trauma that captured my attention. Topics included the impact of trauma, polyvagal theory, childhood grief and bereavement, and the power threat meaning framework. It was during the transition to my professional placements that I applied knowledge gained from these lectures into practice. I spent over 300 days across child psychology services including Child Disability, Primary Care Psychology, and the NEPS, where I encountered many children who had faced trauma and adversity. During my time on these placements, I realised the significance of the education system as a protective factor in mitigating childhood trauma. Consequences from the Covid-19 pandemic and influx of Ukrainian students to Irish schools further highlighted the growing responsibility of schools in supporting these children. However, I also observed that many schools felt ill-equipped in supporting the needs of students. During my placement in NEPS, I realised the influence NEPS, as an organisation, has in terms of promoting systemic change. Notably, the recent initiative to develop

a webinar for schools on trauma, '*Introducing a Trauma Informed Approach – The Stress Factor, Getting the Balance Right'*, engaged my curiosity in the role of educational psychology in the context of supporting schools adopt TIP.

1.6 Ontological and Epistemological Considerations

This study is situated in the interpretivist paradigm, which seeks to understand the subjective nature of human experiences (Guba & Lincoln, 1989). Unlike positivist approaches, which pursue objective truths through measurable variables, interpretivism prioritises depth over breadth, recognising knowledge as socially constructed and context dependent.

Interpretivism is grounded in a subjective epistemology, acknowledging that individuals cannot be separated from their knowledge. Consequently, meaning is drawn through the researchers' reflections, shaped by their interactions with participants. Ontologically, interpretivism follows a relativist stance, asserting that reality is subjective and can vary from person to person (Guba & Lincoln, 1994, p. 110). From this perspective, multiple, coexisting realities exist, each shaped by unique experiences and perceptions.

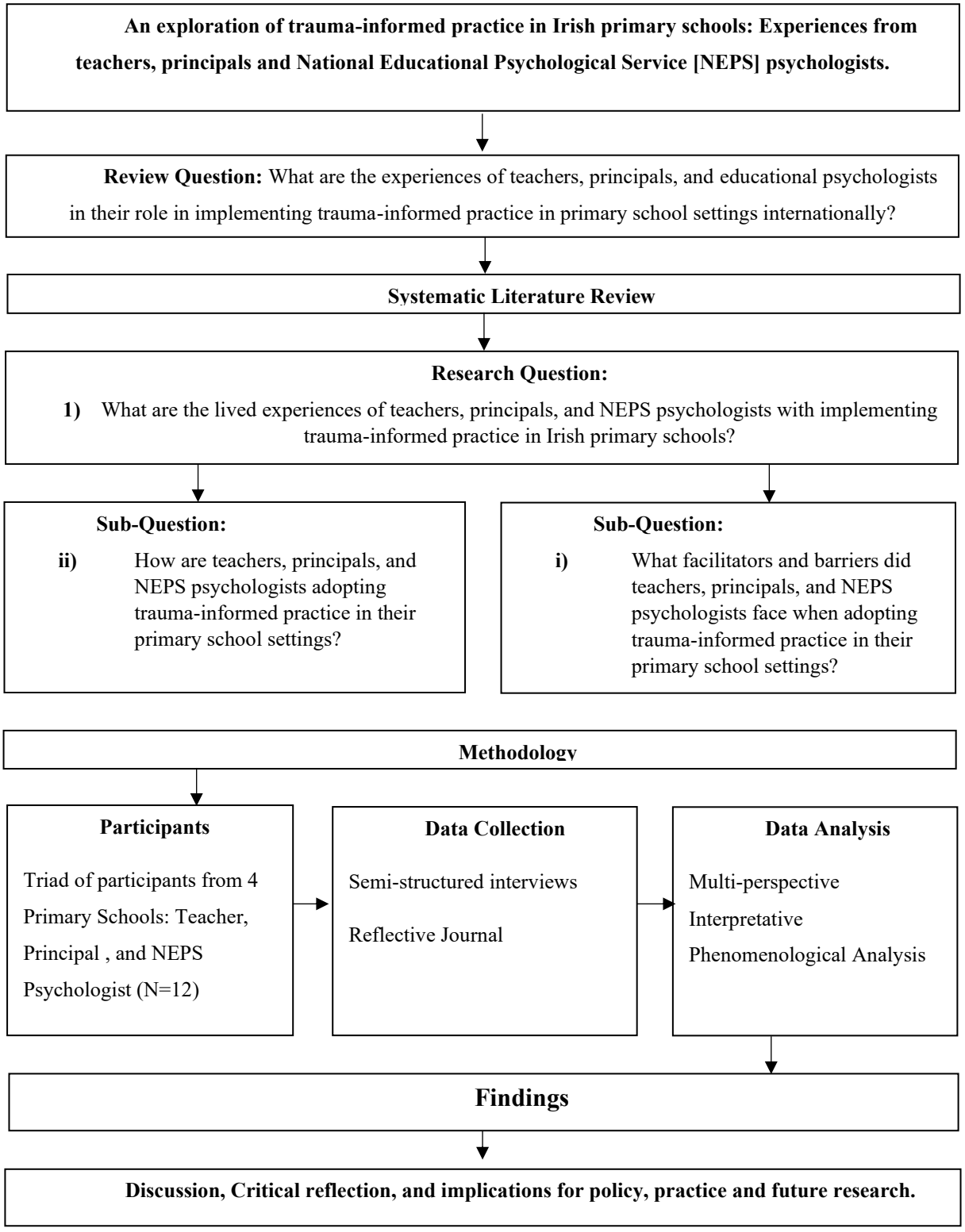
In line with this paradigm, this research utilises interpretative phenomenological analysis (IPA) as a methodological approach. IPA adopts a double hermeneutic approach, where the researcher makes sense of the participants sense-making. This process aligns with interpretivism's view that knowledge is co-constructed rather than objectively measured. By adopting IPA within an interpretivist framework, this study aims to provide a rich, nuanced understanding of how teachers, principals, and NEPS psychologists implement TIP in the Irish education system, emphasising individual meaning-making within broader social and cultural contexts.

1.7 Overview of Thesis Structure

This thesis is structured in three parts. The thesis begins with a rigorous systematic literature review outlining the current international landscape of TIP in the educational context. It systemically reviews research over the last decade pertaining to the experiences of teachers, principals, and educational psychologists in their role implementing TIP in primary school settings worldwide. The Empirical Paper outlines the current study examining the lived experiences of teachers, principals, and NEPS psychologists in their roles implementing TIP in the Irish context. The final chapter presents a critical review and reflection of the research process, as well as the implications for policy, educational psychology practice and future research. It concludes with a concise statement of the impact of the research. Figure 1.1 provides a visual map of the research process.

Figure 1.1.

Visual Map of Thesis Layout



2 Literature Review

2.1 Introduction

This chapter presents a systematic literature review that follows established protocols to identify, select, and critically evaluate research aimed at answering a specific question (Dewey & Drahota, 2016). The chapter provides an overview of childhood trauma, adverse childhood experiences, and their impact on children, as well as the global implementation and effectiveness of TIP in primary schools. The chapter then critically examines empirical studies focusing on the experiences of teachers, principals, and educational psychologists in their role implementing TIP in primary school settings worldwide. The findings are synthesised to highlight gaps in the literature, informing the rationale for the current study and suggesting directions for future research.

2.1.1 Childhood Trauma

There has been extensive debate regarding the definition of trauma throughout the literature. A frequently cited definition by SAMHSA will be utilised for the purpose of this research. It refers to trauma as an "event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional or spiritual wellbeing" (SMAHSA, 2014, p.7). This definition encompasses the three 'E's' of trauma referring to the event(s), the experience of the event, and the effect (SAMHSA, 2014). The discourse in the literature emphasises that the impact and perception of trauma can vary between individuals; what is traumatic for one person may differ for another. According to the SAMHSA (2014), whether an event is deemed traumatic depends on how an individual labels it, assigns meaning to it, and is disturbed by it

both physically and psychologically. This response is influenced by various factors including the individuals' cultural beliefs, social supports, and their developmental stage (SAMHSA, 2014).

The landmark Adverse Childhood Experiences (ACEs) study conducted by Felitti and colleagues (1998) in the US by Centers for Disease Control and Kaiser Permanente, highlighted the significant correlation between the prevalence and cumulative effect of childhood exposure to trauma and poorer outcomes later in life. The study focused on seven different ACEs, including domestic violence, parental substance misuse, parental mental illness, parental imprisonment, physical, psychological and sexual abuse. Over 17,000 adult patients insured through the health insurance company, Kaiser Permanente were surveyed about their experiences with childhood maltreatment, family dysfunction, and current health status and behaviours. The findings revealed that adults who had experienced multiple ACEs had poorer outcomes in later life, including chronic diseases as well as emotional and behavioural problems. Notably, not all children who experience ACEs develop trauma, but ACEs increase the risk of trauma and other negative outcomes.

Throughout the research, trauma and ACEs are frequently used interchangeably, but they differ in one way: who directly experiences the event. Trauma involves direct, witnessed, or community experiences, while ACEs can include trauma experienced by others including family members (Blodgett & Lanigan, 2018). Both, however, impact brain development in similar ways (De Bellis, 2002; Teicher et al., 2002). During childhood, the brain is especially vulnerable, and exposure to chronic stress or trauma can disrupt its development. In response to perceived threats, the body activates its survival responses which include the fight (actively confronting the source of the stress), flight (avoiding the stress), or

freeze response (shutting down) (Cohen et al., 2002; Perry, 2001; Saxe et al., 2006). Repeated trauma or adversity can intensify this survival response by over activating the brain's stress system, the hypothalamic-pituitary-adrenal axis, leading to persistently high levels of cortisol. Elevated cortisol can harm developing brain structures, particularly the hippocampus, amygdala, and prefrontal cortex. For example, chronic stress can shrink the hippocampus, impairing memory and attention, and over activate the amygdala, making a child hypervigilant to threats. As the prefrontal cortex, which governs executive functions like problem-solving and emotional regulation skills, is still developing, ongoing stress can inhibit its growth, leading to difficulties with impulse control, decision-making, and increased risk-taking behaviour. As a result, those who have been exposed to trauma may find themselves frequently "stuck" in a state of hypervigilance, quick to react with fight, flight, or freeze, even when the threat is no longer present (Butler et al., 2017). Over time, the brain adapts towards surviving this trauma, which in turn compromises long term cognitive, emotional, and social functioning (Center on the Developing Child, 2014; Perry et al., 1995; Perfect et al., 2016; Rotenberg & McGrath, 2016; Van der Kolk, 2003).

In addition to their profound impact on individuals, ACEs and childhood trauma are recognised as a pressing public health issue due to the significant financial burden they place on society (Hughes et al., 2021; Struck et al., 2021). A recent meta-analysis highlighted the global prevalence of ACEs in 22 different countries encompassing 206 studies published between 1998 and 2021 and found that 60% of people have experienced at least one form of childhood adversity (Madigan et al., 2023). Approximately 13% have experienced two ACEs, 9% experienced at least three ACEs, and 16% had experienced 4 or more ACEs. In

response, international efforts have increased over the past two decades to create "trauma-informed" systems (Lang et al., 2015). A ‘trauma-informed’ system refers to a system, organisation, or programme that adopts the core assumptions and principles of TIP (SAMHSA, 2014), as outlined in Section 2.1.3.

2.1.2 Prevalence of Childhood Trauma

School life can provide significant difficulties for trauma-impacted children. When children live in a disorganised physiological state of fight, flight, or freeze reactions due to trauma or adversity, they face additional challenges dealing with stressful experiences, which can manifest in various school related difficulties. Research suggests that some trauma impacted children face difficulties concentrating, maintaining attention, recalling new information and using the cognitive skills required for learning (Anda et al., 2006; Bos et al., 2009; Bücker et al., 2012; Delaney-Black et al., 2002; Fry et al., 2018; Kinard, 2001; Johnson et al., 2021; Lansford et al., 2002; Lund et al., 2020; Pears et al., 2008; Pechtel & Pizzagalli, 2011; Perfect et al., 2016; Ryan et al., 2018; Shonk & Cicchetti, 2001). As such, some children have difficulty succeeding academically. For example, a systematic review carried out by Perfect et al. (2016) examining school-related outcomes of traumatic event exposure and traumatic stress symptoms found that children who have experienced trauma are at greater risk of experiencing difficulties in cognitive functioning, academic performance and social-emotional behavioural problems.

Moreover, children who experience trauma or adversity often present with increased levels of aggressive behaviours, impulsivity, hyperactivity, perfectionism, defiance, or withdrawal in response to a perceived threat or danger (Chen et al., 2019; Ford & Courtois, 2014; Jaycox et al., 2009; Sitler, 2009; Teicher et al., 2002).

As such, behaviour can be misinterpreted as behaviour that challenges or mental health conditions such as attention deficit hyperactivity disorder (ADHD), conduct disorder, or anxiety among others (Baweja et al., 2016; Brunzell et al., 2016; Day et al., 2015; Treisman, 2017; Walkey & Cox, 2013). It has been reported that children who have experienced more ACEs are more likely to be suspended or expelled, placed in specialised schools, have poorer attendance rates and poorer progression to post-primary education than those with less ACEs (Blodgett & Dorado, 2016; Wolpow et al., 2009).

2.1.3 Trauma-informed Practice (TIP)

SAMHSA is an agency within the United States Department of Health and Human Services that leads public health efforts to advance the nation's behavioural health. They have taken the lead in defining and promoting TIP worldwide. SAMHSA's concept of TIP is grounded in a set of four assumptions known as the 4 R's includes: *Realisation* about trauma and how it can affect people and groups, *Recognising* the signs of trauma, having a system which can *Respond* to trauma, and *Resisting Re-traumatisation*. TIP also operates on six guiding principles: Safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment, voice, and choice; and cultural, historical, and gender issues (SAMHSA, 2014). Together, these key principles create an environment that respects people's experience and manages the incidence of re-traumatisation.

TIP has been implemented across various sectors, including healthcare, social services, and the judicial system in response to trauma. More recently, schools have adopted TIP to address the impact of childhood trauma and ACEs on students' learning and their ability to navigate school life effectively (Chafouleas et al., 2016; Perfect et al., 2016). Research indicates that childhood exposure to trauma and

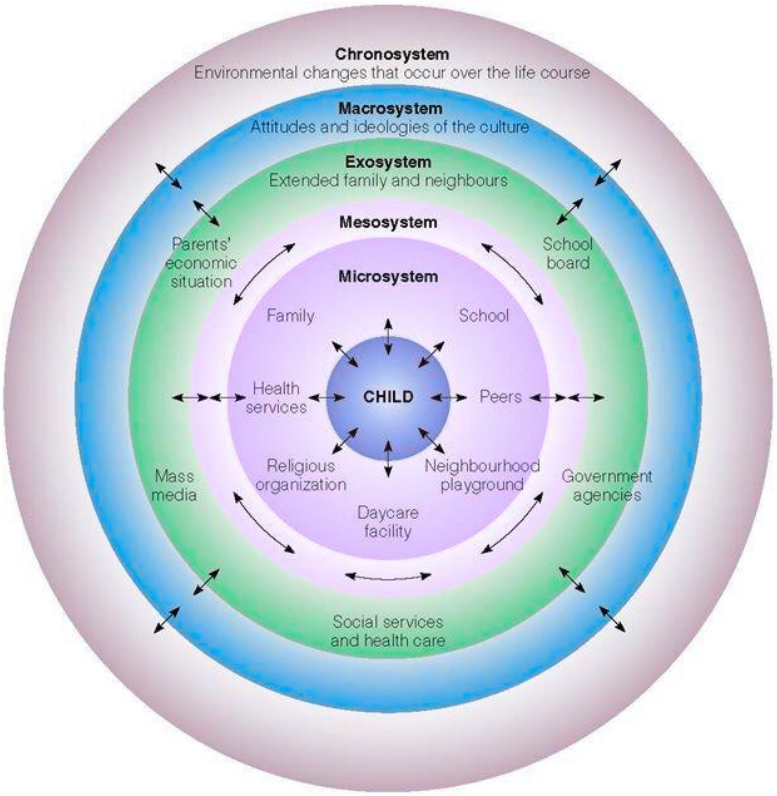
adversity is not necessarily deterministic (Oshri et al., 2020). Some children develop adaptive skills in response to trauma, supported by protective factors such as social support, positive relationships, access to education and healthcare, and a sense of belonging within their community (Racine et al., 2022). Schools offer a vital space for healing, helping children regulate stress responses and repair disrupted attachment patterns, which are essential for their overall development and ability to learn (Brunzell et al., 2015). A key protective factor for trauma-impacted children is a positive and supportive relationship with an adult (Post et al., 2020). For some, their teacher may be the only stable and consistent adult in their lives, positioning teachers as crucial in promoting healthy development and reducing the effects of trauma (Berardi & Morton, 2017; Post et al., 2020; Venet, 2019). Additionally, schools create safe environments with nurturing, stable relationships, providing the security children need to thrive both academically and emotionally (Berardi & Morton, 2017; Hilt, 2015; Perry, 2006; Walker & Walsh, 2015; Venet, 2019).

Moreover, TIP is an ecological approach to addressing trauma (SAMHSA, 2014). It acknowledges the role that the broader systems that surround the child, such as organisations and communities, play in hindering or fostering trauma recovery (Harris & Fallot, 2001). Within Bronfenbrenner's ecological systems theory (Bronfenbrenner & Morris, 2006; Bronfenbrenner, 1979), schools are well-positioned to support trauma-impacted children. A school is a critical component of the environment that influences a child's development and interacts with multiple layers of the framework. These layers are categorised into five levels: the *microsystem, mesosystem, exosystem, macrosystem* and *chronosystem* (see figure 2.1). The school is primarily located within the microsystem as a direct influence on the child. However, it is also influenced by and connected to other systems like the

mesosystem, exosystem, and macrosystem, which together shape the broader context in which the school operates and thus affect the child's development. As a central environment where various systems intersect, schools play a crucial role in supporting children and mitigating trauma (Blodgett & Dorado, 2016; NCTSN, 2017; SAMSHA, 2014).

Figure 2.1.

Visual Representation of Bronfenbrenner's Ecological Systems Theory (Bronfenbrenner, 2005; Bronfenbrenner & Morris, 2006)



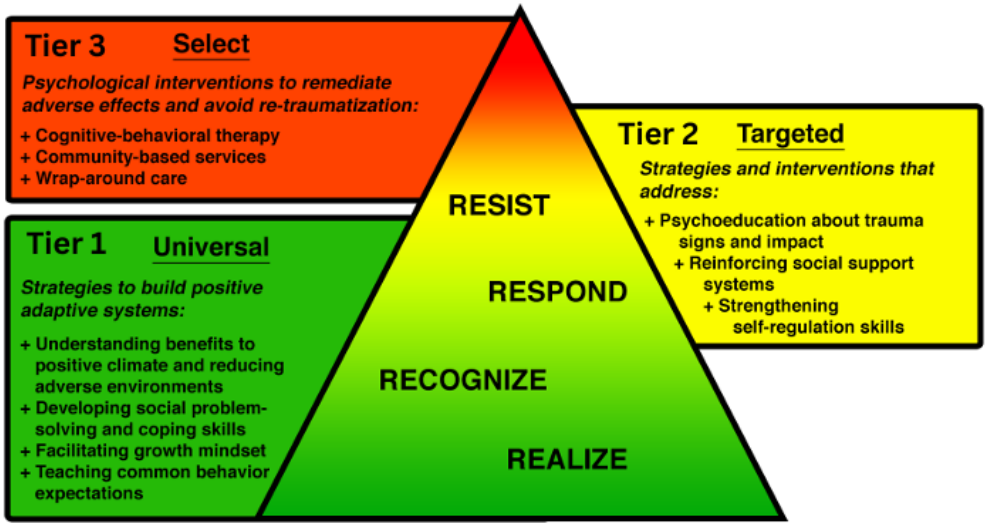
2.1.4 Implementation of Trauma-informed Practice in Schools

According to Harris and Fallot (2001) and SAMHSA (2014), developing a trauma-informed approach requires integration of trauma-informed principles into

multiple levels of the organisation including governance and leadership, policy, the physical environment, engagement and involvement, cross sector collaboration, screening and assessment, training and workforce development, progress monitoring and quality assurance, financing, and evaluation. While it is acknowledged that it is not a prescribed checklist, it provides guidance for organisations such schools to adhere to these guidelines to ensure TIP is implemented effectively. Throughout literature, TIP requires a multi-tiered whole-school approach (Chafouleas et al., 2016; Dorado et al., 2016; NCTSN, 2017; Overstreet & Chafouleas, 2016; Wiest-Stevenson & Lee, 2016). A multi-tiered approach is grounded in early identification of risk, varied levels of intervention support designed to teach skills and prevent more serious problems, and includes ongoing, data-driven evaluation of progress and response (Chafouleas et al., 2016). This approach allows the integration of TIP across a continuum of support. For example, tier 1 is a universal approach that focuses on preventative measures for all student, ranging from whole-school training, trauma screening, or classroom training for students (Chafouleas et al., 2016; Dorado et al., 2016; Overstreet & Chafouleas, 2016). Tier 2, or targeted support, is aimed at students who are at risk and may benefit from specialised psychoeducational group interventions (Chafouleas et al., 2016; Dorado et al., 2016). For tier 3, the students with the highest level of need are identified and provided with individualised support, typically delivered by educational psychologists or specific school staff (Chafouleas et al., 2016). Figure 2.2 illustrates the multi-tiered approach as represented by Chafouleas et al. (2016).

Figure 2.2.

Multitiered service delivery framework representing trauma-informed practice in schools (Chafouleas et al., 2016).



There is a significant variation in how TIP is implemented globally in school settings (Thomas et al., 2019; Maynard et al., 2019). While a multi-tiered approach is recommended, research often employs the term TIP to describe isolated interventions that aim to reduce trauma symptoms, rather than employing the principles of TIP into the school framework or culture (O'Toole, 2022). Such interventions include Cognitive Behavioural Intervention for Trauma in Schools (CBITS), Bounce Back, or Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS). While these are evidenced based interventions for childhood trauma, they do not constitute TIP as defined by the principles of SAMHSA (2014).

Moreover, the lack of clearly defined, concrete guidelines impact the successful implementation of TIP in schools (Baker et al., 2016; Carter & Blanch, 2019; Maynard et al., 2019). Although frameworks like the SAMHSA principles

offer general guidance, they require schools to adapt these principles to their unique contexts. This lack of clear operationalisation makes it difficult for teachers to translate training into daily practice, leaving many unsure of the specific steps needed to create a truly trauma-informed school environment.

2.1.5 Effectiveness of Trauma-informed Practice in Schools

While the effectiveness of TIP is still emerging in the literature, specific models of TIP in schools have reported improved outcomes for students. For example, the Healthy Environments and Response to Trauma in Schools (HEARTS) programme in San Francisco showed significant benefits, such as improved understanding of trauma and use of TIP by staff, better student attendance, and on task behaviour (Dorado, 2016). Additionally, the programme led to fewer behavioural problems, reduced disciplinary actions, and a decrease in trauma-related symptoms such as adjustment, affect regulation, intrusions, attachment and dissociation among students. Other studies carried out in the United States and Australia have reported improvements in academic performance, emotional regulation, relationship building, school engagement, and staff awareness of trauma (Crosby, 2015; Holmes et al., 2015; McConnico et al., 2016; Perry & Daniels, 2016; Phifer & Hull, 2016; Saint Gilles, 2016; Stokes & Turnbull, 2016; Wilson-Ching & Berger, 2023). Some limited evidence for reduction in PTSD and mental health concerns have also been reported (Berger, 2019; Ellis et al., 2013; Gudino et al., 2014; Holmes et al., 2015; Langley et al., 2015).

Despite these findings, researchers have reported difficulties evaluating the effectiveness of TIP in schools, as highlighted by several systematic reviews (Berger, 2019; Maynard et al., 2019; Avery et al., 2021; Cohen & Barron, 2021). Lack of clear definitions, inconsistent terminology, variability in implementation,

and specific focus on targeted trauma interventions pose challenges in evaluating its true effectiveness. Maynard and colleagues (2019) emphasised the need to clearly define what a trauma-informed approach in schools entails. It is important for schools and evaluators to distinguish between implementing TIP, which involves creating an overall school environment sensitive to trauma, and using specific, evidence-based interventions aimed at preventing or treating trauma. Without this clarity, it can be difficult to accurately assess whether schools are truly adopting TIP or simply using targeted interventions.

2.1.6 Trauma-informed Practice in the Irish Education System

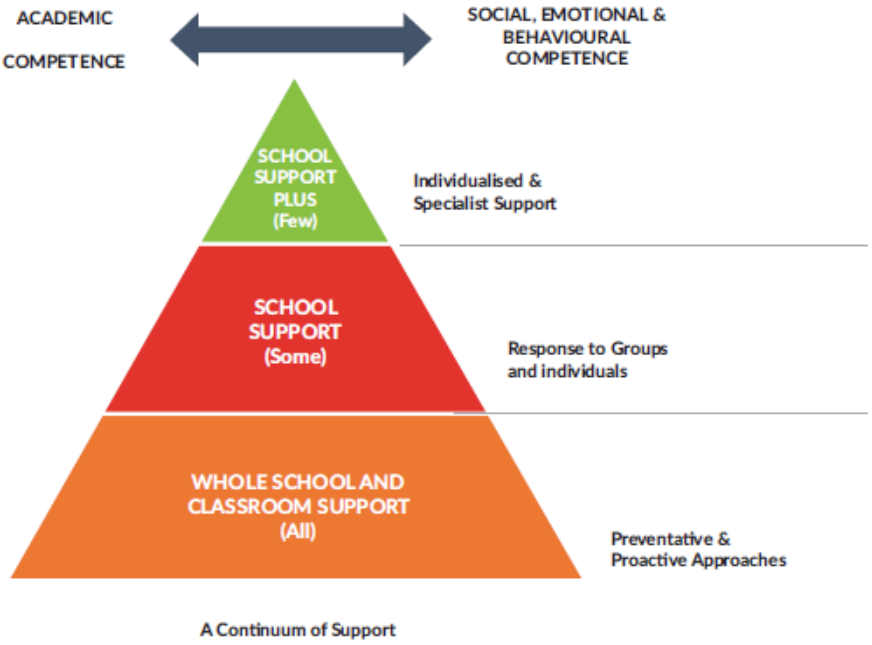
While there is some limited research on TIP within Irish educational contexts, it is still largely under explored. Hickey et al. (2020) conducted an inquiry-based study on ACEs and TIP in a second-chance education setting (Youthreach), and Sheehan et al. (2024) explored TIP within Early Childhood Education and Care settings. However, to date, the only study focused specifically on Irish primary schools is by Delaney (2020), which examined the effectiveness of a professional development programme involving teachers, special needs assistants, the school principal, and the educational psychologist in a DEIS Band 2 primary school. The professional development training encompassed Module 1 and 2 of the 'Trauma-Sensitive Schools Training Package' (Guarino & Chagnon, 2018) which was designed and written under the U.S. Department of Education. Findings revealed significant improvements in trauma knowledge and understanding among participants compared to a control group of participants in a similar DEIS band 2 primary school in the same locality. The study also found increased self-efficacy and more positive attitudes toward trauma-sensitive practices among participants.

Despite these encouraging findings, the researcher calls for further research on TIP in schools in the Irish context.

The Prevention and Early Intervention Network (PEIN) is a national network that represents organisations and individuals working in children, family and community services in Ireland. According to their 2019 report, there is currently no legislation in Ireland that explicitly addresses ACEs or childhood trauma or provides schools with guidance on supporting traumatised students (PEIN, 2019). They have criticised this gap, urging the country to develop policies similar to those in other nations such as the United States, Scotland, and Northern Ireland that directly address childhood trauma. Although not explicitly designed to support TIP, the National Educational Psychological Service (NEPS) of the Department of Education (DE) works in partnership with schools to address students' educational, social, emotional, and behavioural needs. Ideally, depending on staffing resources, each school (primary, post-primary and special schools) is assigned to an educational psychologist that works with the school along a continuum of support. The NEPS Continuum of Support (2010) is a framework designed to help schools meet the diverse needs of students through a multi-tiered approach. It involves three levels: *Classroom Support* (universal strategies for all students), *School Support* (identification, targeted prevention, and early intervention for those at risk), and *School Support Plus* (individualised, targeted intervention for students with more complex and enduring needs). This model encourages early intervention and ongoing assessment, allowing schools to provide appropriate support at each stage, with guidance from NEPS psychologists as needed. This continuum of support allows schools to identify and address the needs of children that potentially are impacted by trauma. Figure 2.3. illustrates the NEPS Continuum of Support.

Figure 2.3.

NEPS Continuum of Support



In recent years, the DE have placed a strong emphasis on wellbeing promotion in schools and have introduced polices to support this process. '*Looking at Our School 2022: A Quality Framework for Primary Schools and Special Schools'* was developed by the DE in 2022 to assist schools in reflecting on their current practice and to focus on areas for improvement in relation to learning and teaching or, leadership and management. In line with this, the '*Wellbeing Policy Statement and Framework for Practice: 2018-2023'* (2019) was developed by the DE to issue all primary, post-primary and special schools in Ireland with a vision to embed wellbeing promotion as a focus for their School Self-Evaluation (SSE) by 2023. This timeframe was modified to 2025 in light of school closures during the COVID-19 pandemic. The DE's Wellbeing Steering Committee was responsible for the implementation, coordination, and review of this policy. The committee was

made up of representatives from the Curriculum and Assessment Policy Unit, the Teacher Education Section, the Inspectorate, and NEPS. Representatives from NEPS have played a pivotal role in the oversight of the implementation of this policy, as they were responsible for coordinating the work of the Wellbeing Steering Committee.

To implement the Wellbeing Policy, schools are required to apply a six-step SSE process. They initially select a topic, gather relevant information, analyse and make judgements, create a school improvement plan, implement the plan, and then monitor and evaluate actions. Given the connection between TIP and wellbeing, some schools could identify TIP as a priority need to embed wellbeing in their SSE. Although there is no national policy specifically addressing trauma in schools, these frameworks offer a pathway for schools in Ireland to focus on trauma and consider implementing TIP into their school context.

2.1.7 Gaps in the Literature

Previous systematic reviews have explored TIP in the context of its effectiveness (Cohen & Barron, 2021; Maynard et al., 2019), outcomes (Perfect et al., 2016), multi-tiered, whole-school implementation (Avery et al., 2021; Berger, 2019), teacher preparedness (Oberg & Bryce, 2022) and experiences of specific trauma-informed interventions (Cohen & Barron, 2019). Each review yielded between 0 and 13 studies highlighting the need for further research in this area. Given the challenges in evaluating the implementation of TIP in schools, it is important to explore the experiences and perceptions of those involved in implementing these practices. As such, the experiences and perceptions of teachers, principals and educational psychologists will be the focus of this review. As noted by Maynard et al. (2019), there remains a lack of clarity about the specific practices

schools are employing when they claim to use a trauma-informed approach, often making it unclear what this looks like in practice. Understanding the perspectives of teachers, principals and educational psychologists' on how TIP is implemented could provide valuable insights into the practical application of these practices in primary school settings internationally. Additionally, synthesising their experiences could help guide future research directions in this area.

2.2 Methodology

2.2.1 Methods

This study employs a systematic literature review approach. The review methods were informed by the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines (Page et al., 2021). The PRISMA (2020) guidelines, originally published in 2009, were developed to assist systematic reviewers in clearly reporting the purpose of their review, the methods they used, and the findings they uncovered. The PRISMA (2020) statement now replaces the 2009 version, offering updated reporting guidance that incorporates recent developments in the processes of selecting, apprising and synthesising research for systematic reviews and meta-analysis (Page et al., 2021). This systematic review aims to address the question: *What are the experiences of teachers, principals, and educational psychologists in their role in implementing trauma-informed practice in primary school settings internationally?*

2.2.2 Search Strategy

A comprehensive search of literature was conducted in February 2024. Searches were conducted in the following electronic databases: PsycInfo, PsychArticles, ERIC, and Academic Search Complete. These databases were selected because of their relevance to education and psychology. To supplement the

database search, Google Scholar was used to manually search for further studies from key papers. The same inclusion and exclusion procedures was applied. To identify all articles related to the experiences of teachers, principals, and educational psychologists in their role implementing TIP in primary school settings, the following search terms were used (see Table 2.1).

Table 2.1

Search Terms Utilised in the Literature Search

Databases	**Search Terms**
ERIC, PsychARTICLES, PsychINFO, Academic Search Compete	'Trauma Informed' OR 'Trauma Focused' OR 'Trauma Sensitive' OR 'Trauma Responsive' AND 'Educators' OR 'Teachers' OR 'School Staff' OR 'Principal' OR 'Psychologist' AND 'Experiences' OR 'Perceptions' OR 'Attitudes' OR 'Views' OR 'Feelings' OR 'Beliefs' OR 'Thoughts' OR 'Perspectives' AND 'Primary School' OR 'Elementary School' OR 'Grade School' OR 'Primary Education' OR 'Elementary Education'

Filters were employed to remove articles that were not full texts, peer-reviewed, or published before 2014. Table 2.2 presents the inclusion and exclusion criteria employed for screening articles. 13 studies in total met the inclusion criteria (see Table 2.3). Studies excluded from this review, with identified rationales, can be seen in Appendix A. Summaries of the included studies can be seen in Appendix B. Figure 2.4 presents a PRISMA flow diagram that summaries the search process.

Table 2.2

Inclusion and Exclusion Criteria

	Inclusion Criteria	Exclusion Criteria	Rational
Criteria 1: Year of publication	Published from the year 2014 onwards.	Published before the year 2014.	To ensure the research being reviewed is up-to-date and relevant.
Criteria 2: Language of the study	The study must be written in the English language. No restrictions on the country in which research has taken place.	All or part of the study is not available in the English language.	Translation services are not available to the reviewer and there is limited research conducted to date in Ireland on the given area of interest.
Criteria 3: Type of publication	A full-text study that is published in a peer-reviewed journal.	Not a full-text study that is not published in a peer-reviewed journal.	Full-text peer-reviewed publications are of a greater academic standard and calibre, as they have been evaluated by expert reviewers and have met quality standards.
Criteria 4: Study type	Empirical studies involve the collection and analysis of primary data.	Studies that are not empirical do not involve the collection and analysis of primary data.	Collection and analysis of primary data ensures the originality of findings.
Criteria 5: School type	Studies based on Primary schools or equivalent.	Studies that are not based on primary schools or equivalent e.g. preschools, second level, and third-level education.	The area of interest for this review is primary school education.
Criteria 6: Focus of Study (experiences/perspectives of using trauma-informed practice)	Study based on experiences/perspectives of supporting students in schools using trauma-informed practice.	Study is not based on the experiences/perspectives of supporting students in schools using trauma-informed practice.	The area of interest for this review relates to the experiences/perspectives of supporting students in schools using trauma-informed practice.
Criteria 7: Participants	Teachers, principals, educational psychologists or similar school staff.	Participants who are not teachers, principals, educational psychologists or similar school staff.	This review is examining the experiences of teachers, principals, and educational psychologists.

Figure 2.4

PRISMA Flow Diagram for New Systematic Reviews (Page et al., 2021, p.5)

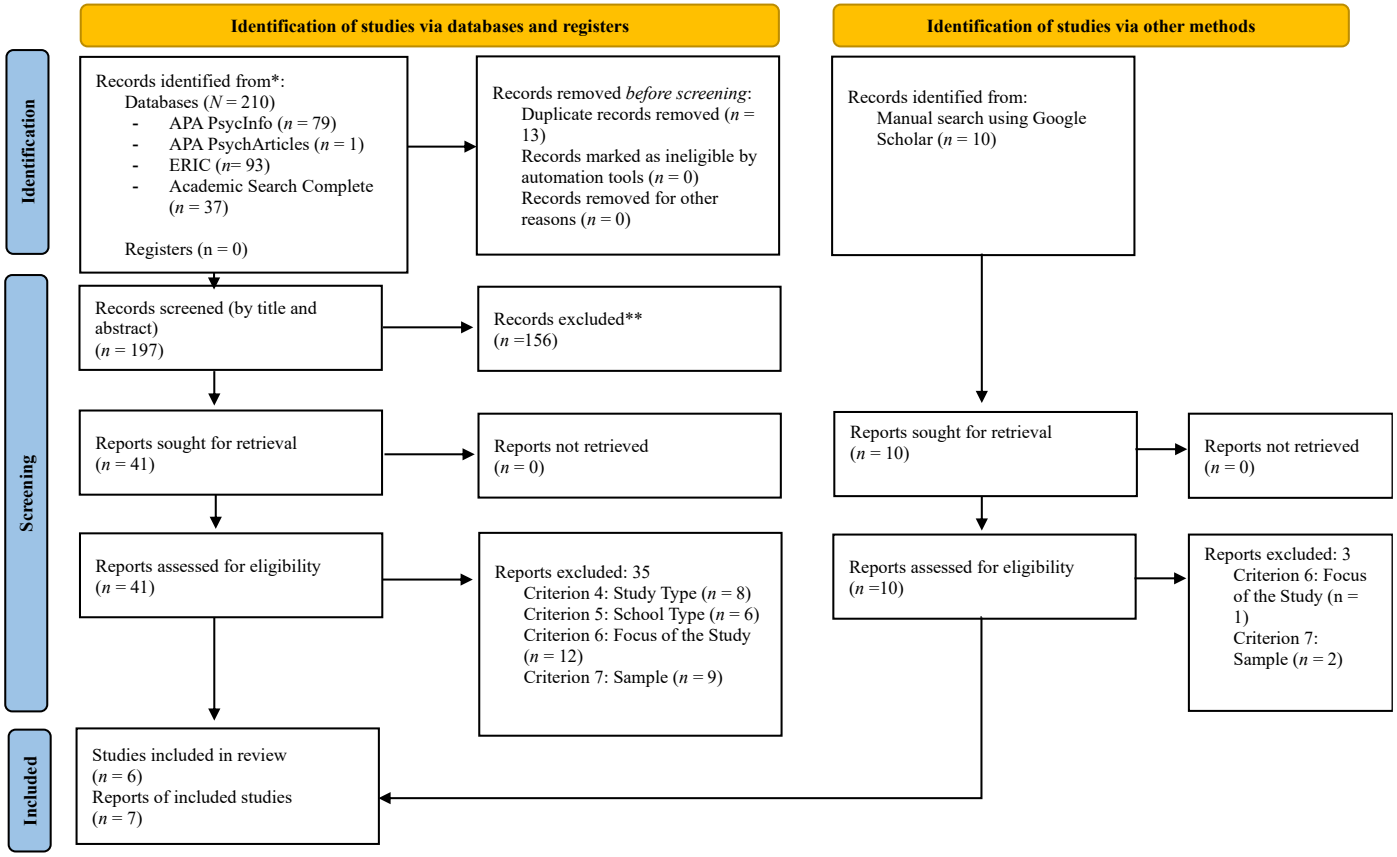


Table 2.3

Articles Selected for the Review

1.	Avery, J. C., Galvin, E., Deppeler, J., Skouteris, H., Roberts, J., & Morris, H. (2023). Raising Voice at school: Preliminary effectiveness and community experience of culture and practice at an Australian trauma-responsive specialist school. *Trauma Care*, *3*(4), 331–351. https://doi.org/10.3390/traumacare3040028
2.	Avery, J., Deppeler, J., Galvin, E., Skouteris, H., Crain de Galarce, P., & Morris, H. (2022). Changing educational paradigms: Trauma-responsive relational practice, learnings from the USA for Australian schools. *Children and Youth Services Review*, *138*, 106506. https://doi.org/10.1016/j.childyouth.2022.106506
3.	Ballin, A. (2023). Embracing a trauma-sensitive approach: One school's transformative experience of creating equitable schooling. *Journal of Teaching and Learning*, *17*(1), 93–110. https://doi.org/10.22329/jtl.v17i1.7274
4.	Barrett, N., & Berger, E. (2021). Teachers' experiences and recommendations to support refugee students exposed to trauma. *Social Psychology of Education*, *24*(5), 1259–1280. https://doi.org/10.1007/s11218-021-09657-4
5.	Berger, E., Bearsley, A., & Lever, M. (2021). Qualitative evaluation of teacher trauma knowledge and response in schools. *Journal of Aggression, Maltreatment & Trauma, 30*(8), 1041-1057. https://doi.org/10.1080/10926771.2020.1806976
6.	Berger, E., & Samuel, S. (2020). A qualitative analysis of the experiences, training, and support needs of school mental health workers regarding student trauma. *Australian Psychologist*, *55*(5), 498–507. https://doi.org/10.1111/ap.12452
7.	Berger, E., Chionh, N., & Miko, A. (2022). School leaders' experiences on dealing with students exposed to domestic violence. *Journal of family violence*, *37*(7), 1089-1100. https://doi.org/10.1007/s10896-021-00310-4
8.	Brunzell, T., Stokes, H., & Waters, L. (2018). Why do you work with struggling students? teacher perceptions of meaningful work in

trauma-impacted classrooms. *Australian Journal of Teacher Education*, *43*(2), 116–142. https://doi.org/10.14221/ajte.2018v43n2.7

9. Ellison, D. W., & Walton-Fisette, J. (2022). "It's more about building trust": Physical Education Teachers' experiences with trauma-informed practices. *European Physical Education Review*, *28*(4), 906–922. https://doi.org/10.1177/1356336x221096603
10. Koslouski, J. B., & Stark, K. (2021). Promoting learning for students experiencing adversity and trauma. *The Elementary School Journal*, *121*(3), 430–453. https://doi.org/10.1086/712606
11. Luthar, S. S., & Mendes, S. H. (2020). Trauma-informed schools: Supporting educators as they support the children. *International Journal of School & Educational Psychology*, *8*(2), 147–157. https://doi.org/10.1080/21683603.2020.1721385
12. Puchner, L. D., & Markowitz, L. J. (2023). Elementary teachers experiences with trauma-informed practice. *International Electronic Journal of Elementary Education*, *15*(4), 321–332. https://doi.org/10.26822/iejee.2023.303
13. Russell, B. S., Wink, M. N., & Hutchison, M. (2023). Mixed methods illustration of teachers' trauma-informed attitudes and practice. *Journal of Child & Adolescent Trauma*, 1–14. https://doi.org/10.1007/s40653-023-00583-5

2.3 Critical Appraisal of Studies

To systematically review the included studies, the Weight of Evidence (WoE) framework by Gough (2007) was applied. The studies were assessed based on their methodological quality (WoE A), their methodological relevance to the review question (WoE B), and their topic relevance to the review question (WoE C). WoE D represents the overall WoE score attained by each study.

2.3.1 Weight of Evidence A: Methodological Quality

WoE A is a non-review-specific judgment about the coherence and integrity of the evidence presented in the research study (Gough, 2007). Nha Hong et al.'s

(2018) Mixed-Methods Appraisal Tool was used to analyse the methodology of the 13 studies and indicated that eleven of the selected studies should be assessed using the qualitative methodological quality criteria and the two remaining studies should be assessed per the mixed-methods methodological quality criteria. The presence or absence of methodological criterion was identified and scored whereby 'Yes' was scored as 1, and 'No' was scored as 0. A quality score was then calculated as a percentage and converted into WoE Quality Rating Scores and WoE Descriptive Quality Ratings (see Appendix C, Table C1).

2.3.2 Weight of Evidence B: Methodological Relevance

Weight of Evidence B (WoE B) measures whether the design of the study was relevant to addressing the specified review questions (Gough, 2007). Qualitative studies were appraised using an adapted version of the summary frameworks proposed by the Joanna Briggs Institute (2017), Letts et al. (2007), and Walsh and Downe (2006) for qualitative research appraisal. Table C2 and Table C3 (see Appendix C) provide the criteria and ratings appointed to each study. Studies that were mix-method were appraised using an adapted version of the scoring system proposed by Pluye et al. (2009) and O'Cathain et al. (2008) (see Appendix C, tables C4 and C5).

2.3.3 Weight of Evidence C: Relevance of Evidence

Weight of Evidence C (WoE C) is a review-specific judgment, referring to the relevance of the focus of the evidence for the review question (Gough, 2007). The WoE C criteria were devised by the reviewer, regarding inclusion and exclusion criteria stipulated (see Appendix C, table C6). Table C7 provides a summary of the relevance rating scores.

2.3.4 Weight of Evidence D: Overall Rating

Weight of Evidence D (WoE D) is a rating of the overall extent to which the specific study provides evidence for answering the proposed review questions (Gough, 2007). WoE D represents an average of A, B, and C and gives an overall rating. Nine out of thirteen studies received a 'high' rating and four were rated as 'medium' (Table 2.4).

Table 2.4

Summary of Overall WoE scores

Study	WoE A	WoE B	WoE C	WoE D	Description of Overall Weighting
Avery et al. (2023)	1	2	3	2	**Medium**
Avery et al. (2022)	3	3	2.3	2.8	**High**
Ballin (2023)	3	3	3	3	**High**
Barrett & Berger (2021)	3	2	2	2.3	**Medium**
Berger, Bearsley, & Lever (2021)	3	3	2.7	2.9	**High**
Berger & Samuel (2020)	3	2	2.7	2.6	**High**
Berger, Chionh, & Miko (2022)	3	2	2.7	2.6	**High**
Brunzell et al. (2018)	3	3	2.3	2.8	**High**
Ellison & Walton-Fisette (2022)	3	2	2.7	2.6	**High**
Koslouski & Stark (2021)	3	2	2	2.3	**Medium**

Luthar & Mendes (2020)	1	1	2.7	1.6	**Medium**
Puchner & Markowitz (2023)	3	3	3	3	**High**
Russell et al. (2023)	2	3	2.7	2.6	**High**

Low ≤ 1.4, Medium = 1.5 – 2.4, High = 2.5 – 3.0

2.4 Data Synthesis and Analysis

Thematic synthesis was used to analyse and synthesise the data (Thomas & Harden, 2008) as it has been used previously in systematic reviews that focus on people's experiences (Booth et al., 2016). Thematic synthesis involves systematic coding of data and generating of descriptive and analytical themes. The process, as outlined by Thomas and Harden (2008), consists of three stages. The first stage begins with line-by-line coding of the text and each line of text is coded according to its meaning and context. The second step involves the development of descriptive themes. This involves the researcher translating the concepts from one study to another and a hierarchical structure is created by grouping together the codes based on similarities and differences between the codes. The final step involves the formation of analytic themes. The purpose of this step is to go beyond the primary reported data by synthesising the findings across the studies to generate "new interpretive constructs, explanations, or hypotheses" (Thomas & Harden, 2008). See Appendix D for details of this process.

2.5 Results

2.5.1 Overview of Studies

2.5.1.1. Study Design and Methodology. This review included studies employing qualitative (n = 11) and mixed-methods (n= 2) research designs. Given the review's focus on exploring the implementation of TIP in primary school settings

through the perspectives of teachers, principals, and psychologists, qualitative research emerged as the most suitable methodological approach for addressing the research question. Based on the critical appraisal for the review, higher ratings were given to both WoE A and B when the methodologies employed were detailed sufficiently. Among the thirteen studies, ten received a 'High' WoE A rating for methodological quality, one was rated as 'Medium,' and the remaining two were rated as 'Low.' Regarding WoE B, which assessed methodological relevance, six studies received 'High' ratings, six were rated as 'Medium,' and one received a 'Low' rating.

2.5.1.1.1. Qualitative Study Design. Eleven studies in the review used a qualitative approach (Avery et al., 2022; Ballin, 2023; Barrett & Berger, 2021; Berger, Chionh, & Miko, 2022; Berger, Bearsley, & Lever, 2021; Berger & Samuel, 2020; Brunzell et al., 2018; Ellison & Walton-Fisette, 2022; Koslouski & Stark, 2021; Luthar & Mendes, 2020; Puchner & Markowitz, 2023). Of these studies, three classified their research into cross-sectional (Brunzell et al., 2018), exploratory (Avery et al., 2022), and case study designs (Ballin, 2023).

The studies included in this review employed a range of qualitative methodologies to gather data, specifically interviews, focus groups, observations, and written journal entries. Six studies exclusively utilised semi-structured interviews (Barrett & Berger, 2021; Berger, Bearsley, & Lever, 2021; Berger & Samuel, 2020; Berger, Chionh, & Miko, 2022; Ellison & Walton-Fisette, 2022; Koslouski & Stark, 2021). Additionally, Luthar and Mendes (2020) did not utilise an interview schedule, but rather asked an open-ended prompt question via social media to participants about how they could be supported as professionals at risk for experiencing compassion fatigue. The absence of data triangulation in these studies

negatively impacted their WoE B ratings. Conversely, studies incorporating methodological triangulation received higher WoE B ratings as it has been shown to enhance the reliability of results (Denzin, 2009; Fusch & Ness, 2015; Stake, 2005; Stavros & Westberg, 2009). The remaining four studies incorporated data triangulation methods (Avery et al., 2022; Ballin, 2023; Brunzell et al., 2018; Puchner & Markowitz, 2023).

In line with the exploratory nature of the study, Avery et al. (2022) integrated focus groups and semi-structured interviews with a diverse range of participants. Brunzell et al. (2018) incorporated written journal entries preceding semi-structured focus groups, while Puchner and Markowitz (2023) supplemented semi-structured interviews with observations during virtual staff meetings. Ballin (2023) utilised a case-study design integrating a variety of data collection methods such as interviews, observations of school events, meetings, and classroom activities, along with school artefacts such as school records. The author also used a reflective journal after each data collection method to reflect on biases that may influence the findings of the study.

Seven of the eleven qualitative studies used a theoretical framework to guide their study. Avery et al. (2022) adopted a phenomenological approach that was guided by existing research and theory. Berger, Chionh and Miko (2022) and Brunzell et al. (2018) employed a broader constructive perspective, while Barrett and Berger (2021) grounded their research explicitly in social constructivist theory. Ballin (2023) focused their research on the theory of community, developed by McMillan and Chavis (1986), focusing on “the dynamics of the sense-of-community force” (p. 1). The researchers identified a sense of community as being the central theme of the school that was chosen for the case study research. The researchers

chose to analyse the dynamics of community interaction in the school, by breaking it down into relative components as a means to understand the process of establishing a trauma-informed school. Elision and Walton-Fisette (2022) used an interpretivist lens, viewing reality as multiple and shaped by meaning. Their study explored PE teachers' subjective experiences with trauma and TIP, aiming to understand, rather than generalise, how teachers' contexts influenced their perceptions. Puchner and Markowitz (2023) utilised Diffusion of Innovation Theory, which explains how and why a new practice spreads through a social system (Rogers, 2003) to understand factors influencing teacher decisions about whether to adopt TIP. The use of theoretical or philosophical perspectives positively impacted their overall WoE B ratings as they form a basis for deciding the most appropriate data collection method to be used in that particular study (Collins & Stockton, 2018).

2.5.1.1.2. Mixed-Methods Design. The remaining two studies in the review employed a mixed-method approach (Avery et al., 2023; Russell et al., 2023). Avery et al. (2023) employed a mixed-methods participatory action approach with an emphasis on the voice of participants and their lived experience of a trauma-responsive specialist school in Victoria, Australia. The objective of this study was twofold: firstly, to investigate the evidence of improved student attendance, wellbeing outcomes, and academic progress; and secondly, to explore how the school is experienced by the school community, such as students, guardians, teachers, and agencies. This review specifically focuses on the latter question. To address this question, the teachers in the study completed the Attitudes Towards Trauma-Informed Care (ARTIC) Scale (Baker et al., 2016) and semi-structured interviews with teachers in the school. The authors approached this research through neuroscience-of-learning and trauma lens, informed by socioecological, systems, and

social equity theories, combined with their extensive experience working with marginalised populations.

Russell et al. (2023) adopted an exploratory mix-method design to examine the experiences of teachers who received professional development in relation to the Aspire, Connect, and Thrive (ACT) intervention, and subsequently implemented learned content in the classroom. Data was collected using semi-structured interviews and classroom ratings and observations with teachers who had participated in the ACT programme for more than one year. Data was collected at baseline and at the end of every school year. This study adopted an ecological systems perspective, following Bronfenbrenner's theory (1979), which highlights bidirectional interactions between individuals and their environments.

2.5.2 Participants

This review encompassed 13 studies conducted from 2014 to 2024. A total of 344 participants were included in the review. The sample comprised of teachers (n = 169), principals/school leaders (n = 24), school/educational psychologists (n = 3), school mental health workers (n = 15), and other school staff (n = 2). Additionally, one study by Ballin (2023) incorporated parents (n = 5). The studies in this review were conducted in the United States (n = 7) and Australia (n = 6). One study by Avery et al. (2022) focused on ways to inform emergent trauma-responsive practice in Australian schools by learning from schools in the United States. In this review, the samples sizes ranged from N = 6 (Barrett & Berger, 2021) to N = 27 (Berger, Bearsley, & Lever, 2021; Ellison & Walton-Fisette, 2022). To ensure the relevance of the study in relation to the review question (WoE C), the studies were rated differently based on the types of participants included in the study. For this review, a variety of participants including teachers, principals, educational psychologists, or

similar were given a higher weight compared to studies that included participants from the same professional group. These included Avery et al. (2023), Avery et al. (2022), Ballin (2023), Luthar and Mendes (2020) and Puchner and Markowitz (2023). The remaining studies consisted of participants from the same professional group.

2.5.3 Data Analysis

In this review, nine studies adopted Braun and Clarke's (2006; 2012; 2019; 2022) thematic analysis approach (Avery et al., 2023, Avery et al., 2022, Barrett & Berger, 2021; Berger, Bearsley, & Lever, 2021; Berger & Samuel, 2021; Berger, Chionh, & Miko, 2022; Ellison & Walton-Fisette, 2022; Koslouski & Stark, 2021; Russell et al., 2023). Luthar and Mendes (2020) derived themes from the data however the type of data analysis was not specified. Puchner and Markowitz (2023) applied a thematic analysis approach that was guided by methods by Bogdan and Biklen (2007), Esterberg (2002), and Glesne (2011). Similarly, Ballin (2023) structured their data analysis for the case study research based on methods outlined by Glesne (1999), which involved compiling information from semi-structured interviews, observations, and artefacts, followed by coding, arranging the codes into clumps, and looking for common themes. Brunzell et al. (2018) adopted interpretative phenomenological analysis (Smith, 1996).

The two mixed-method studies included in the review also used thematic analysis. Russell et al. (2023) employed a convergent parallel mixed-methods approach, which involved simultaneously combining qualitative and quantitative data from teachers who were part of the ACT programme and then integrating the results. Quantitative analyses were based on a priori codes of teacher interviews on trauma sensitivity, as well as data obtained from a classroom observation tool

designed specifically for the study. Using mean scores, an independent samples t-test was used to analyse the change in teachers' perspectives on trauma and children's classroom behaviour over the course of the 2-year ACT programme. Qualitative analyses included content analysis and thematic analysis (Braun & Clarke, 2006) of teacher interviews and classroom observations.

Similarly, Avery et al. (2023) conducted repeated measures ANOVAs to assess the impact of the Reframing Learning and Teaching Environments Model (ReLATE) intervention using students' Strengths and Difficulties Questionnaire scores. This was followed by a Reliable Change Indicator analysis to evaluate effect size and determine whether score changes were meaningful or due to random error (Ferguson et al., 2002; Iverson, 2019). Teachers' perceptions of TIP were assessed using the ARTIC scale. Reflexive thematic analysis (Braun & Clarke, 2022) was then applied to semi-structured interviews and focus group data to complement these findings. Both mixed-method studies effectively integrated both quantitative and qualitative data, leading to their high WoE B ratings.

2.5.4 Conceptualisation of Trauma-Informed Practice

Without a universally accepted framework for TIP in schools, TIP has been conceptualised and implemented in a variety of different ways. In this review, some studies focused on TIP in the context of school staff supporting students who had experienced trauma or adversity (Barrett & Berger, 2021; Berger, Bearsley, & Lever, 2021; Berger, Chionh, & Miko, 2022; Berger & Samuel, 2020; Brunzell et al., 2018; Koslouski & Stark, 2021). An Australian study by Berger, Chionh and Miko (2022) specifically focused on the experiences of principals supporting children affected by domestic violence. Similarly, Barrett and Berger (2021) centred their research on

teachers who had supported students from refugee backgrounds who had experienced trauma.

Other studies conceptualised TIP in schools based on a model or framework that was implemented by participants in their schools (Avery et al., 2023; Ballin, 2023; Puchner & Markowitz 2023; Russell et al, 2023). Puchner and Markowitz (2023) understood TIP using a targeted trauma-informed framework with trauma-impacted students. In this study, the school identified 31 students to engage in the Advance Programme. The specific reasons for trauma were not reported. The Advance Programme included using trauma-informed strategies, restorative practices, professional development, and collaboration with external agencies to support students and their families. The principal of the participating school also developed a book study club on TIP for the staff involved in the Advance Programme.

Avery et al. (2023) conceptualised TIP through the ReLATE model which was developed by the MacKillop Family Services in Australia (n.d). The model has its foundations in the Sanctuary Model (Bloom, 1997). It also incorporates core components commonly associated with trauma-responsive practices, including professional development, a systemic focus on safety, relational connection, and adapted policies and procedures.

Similarly, Russell et al. (2023) framed trauma within a trauma-informed framework, exemplified by adopting the ACT programme. In the study conducted by Ballin (2023), the participating school conceptualised TIP through the framework of fostering a sense of community (McMillan & Clavis, 1986), underpinned by a shared belief and mission to support students exposed to trauma, thus cultivating a sense of community perceived by the students and caregivers.

2.5.5 Synthesis of Findings

A number of overlapping themes were identified throughout the studies in this review, such as the importance of professional development and support structures, professional wellbeing, pedagogical practices and creating a trauma-informed environment and addressing barriers and negative perceptions to TIP (see Appendix D, Table D1).

2.5.5.1. Professional Development and Support Structures. Findings from the review found that professional development, policy, collaboration and community engagement were central to role of teachers, principals, and educational psychologists' role in implementing TIP in primary school settings.

2.5.5.1.1. Professional Development. Professional development is recognised as the foundation for implementing TIP in schools (Avery et al., 2022). It fosters a shared belief system among staff (Ballin, 2023), provides a sense of support, increases teacher knowledge (Russell et al., 2023), and enhances teachers' confidence and effectiveness when working with trauma-exposed students (Berger, Bearsley, & Lever, 2021). However, the literature highlights inconsistencies in professional development (Avery et al., 2022; Barrett & Berger, 2021; Berger & Samuel, 2020; Berger, Bearsley, & Lever, 2021; Berger, Chionh, & Miko, 2022; Puchner & Markowitz, 2023). For instance, Puchner and Markowitz's (2023) study situated in the Midwestern United States found that while most teachers in their study had received trauma specific professional development, newer teachers had not. Additionally, in a study by Berger, Bearsley and Lever (2021) situated in Victoria, Australia, teachers noted that much of the professional development training was unsatisfactory or reactive, often provided in response to critical incidents. This aligns with findings that tertiary institutions offer limited training on

trauma and TIP (Barrett & Berger, 2021; Berger & Samuel, 2020; Berger, Bearsley, & Lever, 2021; Brunzell et al., 2018). Consequently, many teachers interviewed in the Koslouski and Stark (2021) study in the United States pursued their own professional development related to TIP to enhance their competence and better support their students.

Although participants reported the need for professional development on TIP, participants in the Berger and Samuel (2020) study reported that it was often negatively perceived by staff. They found that the professional development they received served as a refresher course to what they already knew. It did not provide further knowledge or expertise. Combining coaching with professional development was reported as an important factor in effectively implementing TIP in primary schools in Australia (Avery et al., 2022; Barrett & Berger, 2021; Berger & Samuel, 2020). Avery et al. (2022) found that leaving teachers to "figure it out for themselves" (p. 6) led to poor uptake and increased the level of anger and frustration by teachers. Instead, providing coaching to teachers was emphasised as important to translate theory into practice and to build teacher capacity to implement TIP. Moreover, Barrett and Berger (2021) observed the need for individualised coaching and feedback about specific training would be more beneficial than further professional development. Highlighted throughout the literature on teachers, principals and psychologists' experiences of TIP was the need for professional development training to be adapted to needs of their students. Furthermore, for effective implementation of TIP, whole-school training with all levels of staff was essential in the Australian context (Avery et al., 2022; Berger & Samuel, 2020; Berger, Bearsley, & Lever; 2021; Berger, Chionh, & Miko, 2022; Brunzell et al., 2018).

Furthermore, while best practices recommended whole-school professional development training, it was not always considered necessary. In a study by Berger, Chionh and Miko (2022), which explored the experiences of principals supporting students exposed to domestic violence in Victoria, Australia, principals acknowledged that whole-school specialised training on domestic violence was neither practical nor necessary for every staff member. Instead, they believed that a trauma-informed approach ensured the entire school environment was attuned to the impact of trauma, including domestic violence, on students.

The idea of multitiered model of professional development is proposed to balance these considerations. According to Berger, Chionh and Miko (2022), this method allows for varying levels of professional development training across the staff, ensuring that all members receive some level of trauma-informed professional development, while those in leadership or specific wellbeing roles, who have more direct responsibility for student welfare, would receive more specialised training. This approach aims to equip the entire staff with a basic understanding of trauma, while still providing specialised, advanced professional development for those who need it most.

2.5.5.1.2. Policy. The literature highlights the need for trauma-informed policies and protocols (Barrett & Berger, 2021; Berger, Bearsley, & Lever, 2021; Luthar & Mendes, 2020). In the Australian context, Berger, Bearsley and Lever (2021) identified a gap where some teachers were familiar with mandatory reporting policies for child abuse and neglect, yet there was an absence of specific school policies addressing trauma. Luthar and Mendes (2020) argued for a significant policy shift at the institutional level in the United States. Participants in this study echoed

the sentiment that TIP must originate with policymakers. In the absence of specific policies, teachers often lack the confidence to adequately support their students.

An Australian study by Avery et al. (2022) that included teachers, psychologists, and trauma-informed programme leaders determined that the reliance on punitive discipline policies was incompatible with the school's trauma-informed approach. They emphasised the necessity for a trauma-informed discipline policy that prioritises understanding the underlying messages of student behaviour, relational accountability and repair, re-connection, and actively enhancing coping skills. This was identified as a crucial area for improvement in schools adopting a trauma-informed approach.

2.5.5.1.3. Collaboration and Community Engagement. In the studies in this review, numerous teachers, principals, psychologists, and other school staff emphasised the significance of feeling supported by their colleagues in implementing TIP (Avery et al., 2022; Avery et al., 2023; Ballin, 2023; Barrett & Berger, 2021; Berger & Samuel, 2020; Berger, Bearsley, & Lever, 2021; Berger, Chionh, & Miko, 2022; Russell et al., 2023). The literature underscores this sense of collaboration as a crucial strategy for reducing conflict among highly stressed staff teams. Avery et al. (2022) reported the level of burnout and stress experienced by teachers led to conflict amongst one another. However, many teachers reported collaborating with their peers to debrief and share their experiences working with students affected by trauma (Avery et al., 2023; Berger, Chionh, & Miko, 2022).

Regarding support from external stakeholders, principal participants in the study by Berger, Chionh and Miko (2022) noted that schools often assume the responsibility of supporting trauma-exposed students when community health services are under resourced. The lack of follow-up and lengthy waiting lists for

external agencies often result in schools feeling dissatisfied and disconnected from these services. Nevertheless, teachers valued support from external agencies and other professionals (Ballin, 2023; Barrett & Berger, 2021). Access to a school psychologist, board-certified behaviour analysts, school counsellors, social workers, and additional classroom assistants, which was often lacking, was instrumental in helping teachers address their students' emotional and behavioural needs (Ballin, 2023; Barrett & Berger, 2021; Koslouski & Stark, 2021; Luthar & Mendes, 2020). Highlighted in the literature was the need for increasing the number of appropriately trained staff to enable teachers to refer students to professionals specifically trained in providing these emotional and behavioural supports.

In both the United States and Australian contexts, the role of the school principal or leader was integral to implementing TIP in primary school settings (Ballin, 2023; Russell et al., 2023). Ballin's (2023) case study of a Northeastern United States elementary school underscored the critical role of a school leader or principal in supporting teaching staff, students, and parents/caregivers to establish a trauma-informed school environment. Teachers reported that the principal empowered them to do their work, cultivated a positive work atmosphere, and set a clear direction for educational progress. Another study conducted in the United States by Russell et al. (2023) echoed this finding reporting that principals helped teachers feel comfortable to incorporate the TIP into their classrooms. Ballin (2023) described how the principal also connected with students, giving them a sense of belonging and fostering a caring community. Additionally, parents described how the principal created a school environment that felt like an extension of their family. The principal’s role in creating a trauma-informed approach was highlighted in their

ability to foster a sense of community and collaboration amongst the school community involving the teachers, students and parents/caregivers.

2.5.5.2. Professional Wellbeing. Highlighted throughout the literature on TIP in primary schools was the emotional and psychological impact on teachers (Barrett & Berger, 2021; Berger & Samuel, 2020; Berger, Bearsley, & Lever, 2021; Berger, Chionh & Miko, 2022; Brunzell et al., 2018; Koslouski & Stark, 2021; Russell et al., 2023). Teachers' experiences with TIP and supporting students exposed to trauma highlight the necessity for self-care, including suppressing emotional and trauma responses, seeking external psychological support, and ensuring psychological wellbeing to prevent secondary trauma. Additionally, the physical impact of supporting trauma-affected students, dealing with physical aggression, and using physical restraint contribute to organisational trauma, with a lack of emotional support for staff exacerbating the emotional impact on teachers. This leads to teacher overload and compassion fatigue (Berger & Nott, 2023; Borntrager et al., 2012; Lawson et al., 2019). For example, teaching staff that were interviewed as part of the Berger, Bearsley and Lever (2021) study reported responses of shock, disbelief, fear, powerlessness, guilt, ruminating thoughts, emotional pain, and feelings of depersonalisation and exhaustion following multiple disclosures of student trauma and years of teaching traumatised students. Findings from the Koslouski and Stark's (2021) study found that half of the teachers in the study noted that teaching was not a sustainable career due to the emotional toll placed on them.

Despite this psychological and emotional toll, there is evidence that teachers in the field have a growing ability to seek support. Quantitative findings from a study by Avery and colleagues (2023) revealed that teachers working with trauma-

impacted students scored within the Grow range (25-75%), indicating a moderate level of willingness to seek support for secondary trauma rather than minimising its effects.

Furthermore, principals reported the importance of understanding organisational trauma in their professions (Avery et al., 2022). Prioritising teacher wellbeing and creating cultures of collective care was fundamental to implementing TIP in schools (Avery et al., 2022; Luthar & Mendes, 2020). While professional development was appreciated, one school principal reported that the use of videos depicting children exposed to trauma caused significant secondary trauma amongst staff members (Berger, Chionh, & Miko, 2022). As such, the need for models of self-care, organisational support, and self-care policies were highlighted by principals and teachers throughout the literature (Berger, Bearsley, & Lever, 2021, Berger & Samuel, 2020).

2.5.5.3. Pedagogical Practices and Creating a Trauma-Informed Environment. Implementing TIP represents a fundamental paradigm shift in educational approach and delivery, emphasising the necessity of safety, trust, connection, equity, and belonging for effective learning. This approach embodies a way of being rather than merely doing (Avery et al., 2022). It is student-centred, prioritising the development of self-regulation skills, problem-solving abilities, and fostering relationships. Additionally, it focuses on building self-identity and prioritising wellbeing over academics, while creating a safe, predictable, and consistent environment that provides a sense of healing for trauma-impacted children. Several studies in the review emphasised the importance of having a shared understanding of these practices among all staff for the successful implementation of

TIP in primary school settings (Avery et al., 2023; Ballin, 2023; Barrett & Berger, 2021; Berger & Samuel, 2020; Puchner & Markowitz, 2023).

2.5.5.3.1. Pedagogy. Pedagogy was viewed as the foundation of TIP (Avery et al., 2022; Brunzell et al., 2018; Ellison & Walton-Fisette, 2022). Teachers recognised the importance of pedagogy in implementing TIP and how it shapes their relationships with students. Many teachers noted that their teaching philosophies and pedagogical styles evolved over time to better meet students' needs (Ellison & Walton-Fisette, 2022). This evolution often involved reflecting on and challenging previously held beliefs to create a positive learning environment. For some, this included expanding their pedagogy and ethic of care beyond the curriculum to focus on the children's individual needs (Ellison & Walton-Fisette, 2022; Noddings, 1984). Professional development and sharing their own pedagogical practices enabled this shift in understanding of trauma which in turn led to better outcomes for students (Avery et al., 2022; Ellison & Walton-Fisette, 2022).

Building on classroom pedagogies, research has also recommended implementing TIP in physical education classes. An inquiry-based study by Ellison and Walton-Fisette (2022), conducted in the United States, explored PE teachers' experiences with trauma and TIP, focusing on the strategies they used in their gymnasiums. The findings revealed that many physical education teachers supported using pedagogical models aligned with TIP to create positive learning opportunities for students. The study also found that teachers who implemented the Teaching Personal and Social Responsibility model (Hellison, 2011) in their PE classes observed students applying the core principles learned in PE to other areas of their lives.

Brunzell et al. (2018) highlighted additional benefits for teachers, noting that their sense of self-efficacy, professional identity, and overall job satisfaction were closely linked to the perceived effectiveness of their own pedagogy. However, when teachers faced challenges supporting their students, they often blamed their own pedagogy rather than systemic influences of broader community disadvantage. This sentiment was reiterated by quantitative findings by Avery and colleagues (2023) whereby teachers showed positive attitudes towards TIP, however, they scored below the Thrive range (25-75%) for their own self-efficacy regarding their work. Teachers emphasised that for their practice pedagogies to remain meaningful, they needed to continually focus on the "small daily wins" (p.127) to maintain focus on the whole child and the momentary glimpses to celebrate when things were going well in the classrooms (Brunzell et al., 2018).

2.5.5.3.2. Cultural Considerations. Teachers advocated for greater inclusion of cultural humility and responsiveness within TIP in schools. This approach encouraged students to explore their own identities and critically analyse the curriculum for biases. It also enabled teachers to learn about their students' cultures, helping them to address and challenge their own biases when supporting their students (Koslouski & Stark, 2021).

2.5.5.3.3. Involving Parents. Collaborating with parents is central to the implementation of TIP in primary school settings (Ballin, 2023; Koslouski & Stark, 2021). Teachers reported that collaboration with parents positively impacted their child's support in school (Koslouski & Stark, 2021). However, some teachers noted that this collaboration also posed barriers to supporting trauma-impacted students (Barrett & Berger, 2021; Berger, Bearsley, & Lever, 2021; Berger, Chionh, & Miko, 2022 ; Berger & Samuel, 2020). Parents' own trauma often hindered their ability to

engage with teachers, manifesting as denial or detachment from their children's trauma. Additionally, parental aggression, a lack of understanding regarding trauma, parental attitudes and beliefs, and language barriers further impacted parental involvement (Barrett & Berger, 2021; Berger, Bearsley, & Lever, 2021; Koslouski & Stark, 2021). Principals reported challenges in protecting students from parental aggression, particularly when sharing information about the child's progress or behaviour (Berger, Chionh, & Miko, 2022). Consequently, principals found it often difficult to obtain parental consent to support their students. These barriers often elicited frustration and resentment by teachers and principals towards parents of the students they support (Berger, Bearsley, & Lever, 2021; Berger, Chionh, & Miko, 2022).

2.5.5.4. Addressing Barriers and Negative Perceptions

2.5.5.4.1. Challenges and Barriers to Trauma-Informed Practice. A lack of resources was echoed throughout the literature on TIP in primary school settings, ranging from inadequate mental health support for staff and students, inconsistent funding, time constraints, and a lack of professional development training (Avery et al., 2022; Berger & Samuel, 2020; Berger, Bearsley, & Lever, 2021; Berger, Chionh, & Miko, 2022; Brunzell et al., 2018; Ellison & Walton-Fisette, 2022; Koslouski & Stark, 2021; Luthar & Mendes, 2020). Moreover, Koslouski and Stark (2021) reported that access to resources did not always equate to efficient or effective resources. To illustrate, participants reported inefficient support from their school psychologist led to many children being overlooked and increased frustration among school staff. Avery et al. (2022) emphasised the challenges associated with the effective implementation of TIP. They noted that while effective TIP led to improvements in school engagement and learning outcomes, they simultaneously

hindered schools' access to continuous funding for resources. This study also found that verbal support from trauma responsive principals did not translate into the provision of trauma-informed resources for schools.

Furthermore, Luthar and Mendes (2020) advocated for optimising existing resources available to schools. They suggested that educational psychologists assigned to an area addressing trauma could provide professional development to other areas with the same needs. Additionally, psychologists could provide teachers with additional evidenced-based resources that could be accessed independently.

The conflicting role of the teacher also emerged as a theme throughout literature. Teachers have reported experiencing difficulties managing the dual responsibility of teaching children the curriculum and providing emotional support (Berger, Bearsley, & Lever, 2021). Contrary to this perspective, some teachers argued that it is the responsibility of parents, not teachers, to provide emotional support for children (Puchner & Markowitz, 2023).

Teachers reported facing the challenge of finding a balance between advancing the educational progress of students who have experienced trauma, students who may struggle to keep up with the rest of the class due to their emotional and psychological difficulties and meeting the academic needs of all students (Berger, Bearsley, & Lever, 2021). The pressure for children to perform in high stakes testing makes it difficult for teachers to prioritise emotional support and wellbeing for their students (Ellison & Walton-Fisette, 2022; Luthar & Mendes, 2020). Ellison and Walton-Fisette (2022) reported that while the curriculum is often a barrier to implementing TIP, teachers should integrate empowering instructional approaches to their teaching. This approach allows for teachers to take the role as

both facilitator of student learning and student growth, which is essential for students impacted by trauma.

In some international studies, teachers and principals reported challenges in supporting children exposed to trauma due to insufficient information about the children's trauma or background (Barrett & Berger, 2021; Berger, Bearsley, & Lever, 2021; Berger, Chionh, & Miko, 2022). Principals reported their experience supporting students using TIP who were exposed to domestic violence (Berger, Chionh, & Miko, 2022). They noted the culture of secrecy among parents and their children regarding this topic made it increasingly difficult to support these students. Moreover, difficulties communicating with authorities further impacted their ability to support the students involved (Berger, Chionh, & Miko, 2022).

Teachers reported that in most cases, school management does not pass on background information to them (Berger, Bearsley, & Lever, 2021). While this was perceived to protect teachers, this lack of understanding acted as a barrier for teachers to provide adequate support to their students. Additionally, Berger and Samuel (2020) cited the inaccessible nature of enrolment processes for refugee families who were exposed to trauma. Teachers reported difficulties gaining background information from refugee parents regarding their children, which often occurred due to parents' difficulty completing forms and communicating in English to the school.

Two studies in the review also discussed the impact of the Covid-19 pandemic on implementing TIP in schools (Berger, Chionh, & Miko, 2022; Puchner & Markowitz, 2023). The pandemic resulted in global school closures and imposed limitations on certain training programmes and trauma-informed interventions, making it challenging for some schools to maintain the initiatives that were already

established (Puchner & Markowitz, 2023). However, despite these challenges, the pandemic also encouraged the adoption of TIP as a whole-school approach (Puchner & Markowitz, 2023). With direct interventions being limited, schools shifted towards fostering a trauma-informed culture or philosophy throughout the entire school.

Moreover, teachers observed a decline in their students' social and emotional development due to the pandemic restrictions, which highlighted the increased need for TIP at a whole-school level (Puchner & Markowitz, 2023). The pandemic also prompted the development of more school resources and expanded online professional development opportunities for school staff, helping them to better implement TIP in their schools (Berger, Chionh, & Miko, 2022).

2.5.5.4.2. Changing Mindsets. The literature consistently reflects participants' belief that becoming TIP necessitates a cultural shift within schools, leading to changing mindsets and beliefs about trauma. Professional development was highlighted as a core factor in changing mindsets of school staff (Avery et al., 2022; Puchner & Markowitz, 2023; Russell et al., 2023). Avery and colleagues (2022) noted that this shift is driven by developing a deeper understanding of trauma, which in turn leads to sustainable changes in practice, ultimately resulting in significant cultural shifts that benefit students. According to Russell et al. (2023), professional development and support from administrative staff (e.g. principals) and peers was sufficient in changing mindsets of teachers. Moreover, Avery and colleagues (2022) highlighted that this shift incorporates understanding of TIP as a collaborative whole-school approach rather than a rigid, step-by-step programme or curriculum. Furthermore, solid data regarding the effectiveness of TIP was reported as a factor in changing mindsets of staff teams (Avery et al., 2022).

Although resistance to TIP was decreasing, some participants still believed that punitive approaches had a place in the classroom (Puchner & Markowitz, 2023; Russell et al., 2023). Puchner and Markowitz (2023) found that some teaching staff felt the term "trauma" was negatively connoted and overused in schools. Variations in the interpretation of trauma led some teachers to question whether certain students had experienced "real" trauma and thus needed trauma-informed support. Despite supporting the implementation of TIP, participants disagreed on which students required this support. This lack of consensus contributed to continued support for punitive approaches. The study highlighted conflicting attitudes among school personnel, although they agreed that trauma-impacted children should not be punished for their behaviour (Puchner & Markowitz, 2023).

Buy-in from staff was a common theme in the literature regarding the experiences of school personnel in their role implementing TIP in primary schools (Avery et al., 2022; Berger & Samuel, 2020; Puchner & Markowitz, 2023). Berger and Samuel (2020) interviewed mental health workers in a primary school setting and found that buy-in from all staff was a significant barrier to accessing whole-school professional development training. Moreover, Avery and colleagues (2022) advocated for a trauma-informed certification process to encourage buy-in and support the ongoing development of this approach. However, some participants raised concerns that such a process might lead to a checkbox mentality, rather than fostering meaningful progress. Furthermore, Puchner and Markowtz (2023) reported the influence of the teacher-principal relationship in teacher buy-in to implement TIP. This study found that teachers who had closer social proximity to the principal were more engaged to implement TIP, compared to those who felt less valued or

included and were often less motivated to implement these approaches in their classrooms.

2.6 Discussion

This review aimed to explore the experiences and perceptions of teachers, principals and educational psychologists in their role implementing TIP in primary school settings internationally. The exhaustive search procedure resulted in 13 studies that were critically appraised by Gough's (2007) weight of evidence framework. In recent years, there has been a growing number of studies on TIP in primary school settings, as evidenced by the research included in this review dating from 2018 to 2023. The present review produced findings from research carried out in Australia and the United States. There was no research pertaining to TIP in other educational contexts, including the Irish education system. As such, results should be interpreted in light of different cultural contexts and educational systems.

2.6.1 Professional Development and Support Structures

The systematic literature review revealed that professional development, policy, and collaboration and community engagement are critical components in successful implementation of TIP in primary school settings internationally. While participants praised professional development as foundational to its implementation, significant inconsistencies in the quality and accessibility of trauma-informed training were reported. The review highlighted that while traditional training methods may be insufficient, a need for coaching and individualised support was warranted to support and guide schools to implement TIP effectively.

Teachers in the review reflected on the need for policy development. The reliance on punitive discipline policies that were incompatible with TIP were identified as problematic (Avery et al., 2022; Puchner & Markowitz, 2023). The

literature advocates for a shift towards policy that emphasises understanding, relational accountability, and the development of coping skills, aligning disciplinary practices with the principles of TIP.

The review underscores the importance of a supportive and collaborative school environment, where teachers, principals, and educational psychologists work together to implement TIP. This collaboration helps to mitigate stress and burnout among staff, fostering a sense of collective responsibility and shared purpose. Additionally, the review highlights the need for strong connections with external stakeholders, such as community health services, to ensure comprehensive support for trauma-impacted students. However, the current gap in resources and follow-up from these services often leaves schools feeling isolated in their efforts.

Principals play a crucial role in bridging this gap, fostering a sense of community within the school, and creating an environment that supports both staff and students in their trauma-informed journey. The leadership provided by principals is pivotal in establishing and maintaining a trauma-informed school culture, ensuring that all members of the school community are engaged and supported in this critical work. Despite the key role of principals implementing these practices only twenty-four were included in the review, with only one paper solely including principals as participants (Berger, Chionh, & Miko, 2022).

Moreover, a key finding from the literature was the efficacy for a multi-tiered approach to implementing TIP in primary school, encompassing supports across tiers of intervention. With this approach, tier 2 and 3 typically involve support from specific professionals such as psychologists to provide more targeted support in either group-based or individual settings. While the study aimed to capture the experiences and perceptions of teachers, principals and educational psychologists in

their role implementing TIP, only three educational psychologists were included (Avery et al., 2022; Ballin, 2023). This finding highlights the dearth of research pertaining to educational psychologists in their role supporting schools implement TIP.

2.6.2 Professional Wellbeing

The findings highlight the critical need for self-care strategies and organisational support structures to mitigate the adverse effects on teacher wellbeing. Principals and teachers alike emphasised the importance of creating a culture of collective care within schools, where teacher wellbeing is prioritised alongside student support. While professional development in TIP is essential, there is growing recognition that such professional development must be delivered with sensitivity to avoid exacerbating secondary trauma among staff. The literature calls for the development of self-care models, organisational policies, and support systems that address the emotional and psychological needs of teachers, ensuring that they can sustain their careers while effectively supporting students who have experienced trauma. For example, as cited in Berger, Bearsley, and Lever (2021), schools may offer courses explicitly devoted to teaching self-care practices or allocating specific staff to oversee self-care initiatives in schools (Miller et al., 2018).

2.6.3 Pedagogical Practices and Creating a Trauma-Informed Environment

Another important finding in the review is the complex interplay of pedagogical practices, cultural considerations, and parental involvement that exist when creating a trauma-informed school environment. Adopting TIP in primary schools necessitates a significant shift in educational philosophy, moving from traditional teaching approaches to one that prioritises safety, trust, and emotional wellbeing. This shift is not just about implementing new strategies but embracing a

holistic, student-centred approach that emphasises the development of self-regulation, problem-solving skills, and a strong sense of identity. Teachers recognised that adapting their pedagogy to align with TIP was essential, often requiring them to reflect on and modify their teaching pedagogies to better support the individual needs of students. This evolution in pedagogy, supported by professional development and peer collaboration, was seen as crucial for fostering positive student outcomes and enhancing teachers' sense of efficacy and job satisfaction.

However, challenges remain, particularly in addressing cultural responsiveness within TIP. Teachers emphasised the need for greater cultural humility and inclusivity, which involves both students exploring their own identities and teachers addressing their biases. This approach not only supports TIP but also promotes a more equitable learning environment.

Parental involvement surfaced as a critical, yet challenging, component of implementing TIP. While collaboration with parents can significantly enhance the support provided to trauma-impacted students, it also presents significant barriers. Parents' own unresolved trauma, language barriers, and sometimes aggressive or uncooperative behaviours can hinder effective engagement with school staff. These challenges often lead to frustration among teachers and principals, who may struggle to obtain the necessary parental support and consent to fully implement TIP strategies. Addressing these barriers requires ongoing efforts to foster trust and communication between schools and families, ensuring that all stakeholders are aligned in their efforts to support students who have experienced trauma.

2.6.4 Addressing Barriers and Negative Perceptions

The adoption of TIP in schools is still in its infancy. As such, this review illustrated the many barriers and negative perceptions that exist while implementing such practices in schools. A common theme throughout the literature was the lack of resources including professional development, funding, mental health support and time constraints. Even when resources were available, their efficacy and effectiveness were sometimes questionable, as seen by the ineffective support from a school psychologist in one study (Koslouski & Stark, 2021).

The literature also highlights the dual role conflict faced by teachers, who struggle to balance curriculum delivery with providing emotional support to students, often without sufficient information about the students' trauma backgrounds. This issue is compounded by a lack of communication between school management and teachers regarding students' histories, particularly in cases involving refugee families or domestic violence, where cultural and language barriers further complicate the situation.

The COVID-19 pandemic exacerbated these challenges, disrupting existing TIP initiatives and limiting professional development opportunities. However, it also prompted a shift towards a more comprehensive, whole-school approach to TIP, highlighting the need for broader cultural changes within schools. This shift requires changing mindsets among teachers and principals, which professional development can facilitate. Despite some progress, resistance to TIP remains, with some teachers still supporting punitive approaches and questioning the legitimacy of certain students' trauma (Avery et al., 2022; Puchner & Markowitz, 2023). The importance of staff buy-in is also emphasised, with the teacher-principal relationship playing a crucial role in motivating teachers to adopt TIP.

Overall, the findings suggest that while TIP is gaining traction in primary school settings internationally, significant barriers remain, including resource limitations, role conflicts, and resistance to change from school staff. Addressing these issues requires a significant effort to improve communication, provide adequate professional development, and foster a supportive school culture that prioritises the emotional and psychological wellbeing of both students and staff.

2.6.5 Implications for Practice

The research points to an underdeveloped role for psychologists in supporting TIP in primary schools, despite the evident need for their ongoing involvement. The review also highlights the need for targeted trauma-informed professional development for teachers, emphasising the value of individualised coaching to facilitate a meaningful shift in pedagogy. There is the potential for psychologists and other external agencies to support schools to address these professional development needs.

Additionally, collaboration among school staff, parents, and external agencies is essential for the effective implementation of TIP in primary schools, with the principal playing a key role in fostering this collaboration. However, the research indicates that the adoption of TIP is often led by teachers to address classroom needs, with insufficient guidance and support from others. This lack of leadership can hinder positive outcomes for students. Therefore, when developing trauma-informed frameworks, it is crucial to clearly define the role and responsibilities of the school principal in enhancing collaboration

Furthermore, the wellbeing of teachers and the promotion of collective care for both school staff and students emerged as critical factors in the successful implementation of TIP. However, the lack of specific policies to support these

practices hinders progress in this area. Therefore, the research advocates for the development of trauma-informed policies that address both student and teacher wellbeing in primary school settings. For teachers, the development of self-care models and support systems that address the emotional and psychological needs is warranted.

Moreover, schools attempting to adopt TIP are impacted by punitive behaviour policies that exist within the school (Avery et al., 2022; Puchner & Markowitz, 2023). Traditional policies often increase feelings of rejection in trauma-impacted students, reinforcing deep-rooted shame from early childhood. These approaches typically view infractions as deliberate misbehaviour, which can intensify negative emotions. In contrast, policies that take a trauma-informed lens recognise that infractions often stem from underlying insecurities and fears rather than anger or intentional defiance. Instead of focusing on punishment, these policies prioritise restorative practices that aim to reintegrate the student into the school community (Amstutz & Mullet, 2005; Oehlberg, 2006; Forbes & Post, 2006). Research suggests that schools adopting TIP must revise punitive behaviour policies, taking an ecological approach that considers students' circumstances. This shift should promote positive behaviour while avoiding the use of suspensions and expulsions, which reduce valuable classroom time (Cole et al., 2005; Oehlberg, 2008). In doing so, schools are guided to operate in a trauma-informed way, which ultimately benefits trauma-impacted students.

2.6.6 Limitations and Future Research

This paper systematically reviewed the literature of the experiences and perceptions of teachers, principals, and educational psychologists in their role implementing TIP in primary school settings internationally. Of the 344 participants

included in the review, only 24 principals and 3 educational psychologists were involved, highlighting the lack of research pertaining to principals and educational psychologists in their role in implementing these practices. Although the research advocates for a multi-tiered approach to TIP, there is a notable lack of studies involving participants at tier 2 and tier 3, specifically educational psychologists. Future research exploring the experiences and perceptions of educational psychologists supporting schools at tier 2 and 3 would offer a greater understanding of their role within the multi-tiered system of support.

Moreover, over the past two decades schools internationally have adopted TIP into their approach. Due to the lack of global research in TIP, this systematic literature review produced studies that were situated in the United States and Australia. As such, research in the Irish context remains limited, indicating that little is known about how the Irish education system is adopting these practices.

Within the Irish education system, NEPS work along a continuum of support or a multi-tiered system to assist schools in addressing students' educational, social, emotional, and behavioural needs. For some schools, trauma-impacted children may be prioritised for intervention based on their need along the continuum of support. In addition, NEPS prioritise support and development training to support schools at a whole-school level as part of the Continuum of Support framework. In recent years, they have acknowledged the level of trauma that exists within Irish schools and have developed specific training programmes on trauma. In addition to NEPS, other trauma-informed related interventions and programmes such as Nurture, Restorative Practices and Emotion Coaching have recently proliferated Irish schools. Despite these recent advancements, the support of NEPS psychologists in assisting schools implement TIP remains unclear. Future research investigating the role of NEPS

supporting Irish primary schools implement TIP, is warranted, specifically their role collaborating with teachers and principals along this continuum of support. Additionally, given the absence of specific guidelines or a universally accepted framework for implementing these practices, the adoption of TIP has varied across the literature (Thomas et al., 2019; Maynard et al, 2019). Consequently, future research should investigate how TIP is being adopted in the Irish context. To expand on this knowledge, future research should explore the experiences and perceptions of teachers, principals and NEPS psychologists in their role implementing TIP in Irish primary schools.

3 Empirical Paper

3.1 Introduction

This chapter uncovers the lived experiences of teachers, principals and National Educational Psychological Service (NEPS) psychologists in their role implementing trauma-informed practice (TIP) in Irish primary schools. It begins by providing an overview of childhood trauma, TIP, and the current landscape of TIP in the Irish context. It then provides a comprehensive summary of the study methodology. Finally, it presents a summary of the research findings and critically analysis' these findings in the discussion section of the chapter.

3.1.1 Childhood Trauma

Childhood is a key time of for learning and growth. Unfortunately, some children are faced with traumatic experiences that result in a myriad of negative effects. Since the seminal study by Feletti et al. (1998) revealed the profound and lasting impacts of childhood trauma, there has been greater public awareness of the long-term impact of trauma worldwide. This study highlighted a significant relationship between the cumulative effects of adverse childhood exposure to trauma and poorer outcomes later in life such as chronic disease, mental illness, as well as poor social outcomes, such as incarceration, unemployment, and substance misuse. While this study faced many criticisms, it prompted further research in the area that emphasised the widespread prevalence of childhood trauma that transcends boundaries of gender, age, race, ethnicity, and sexual orientation (Hughes et al., 2017; Merrick et al., 2018). While there has been much debate surrounding what constitutes as a traumatic event (Mersky et al., 2019), SAMHSA defined it as an "event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse

effects on the individual's functioning and mental, physical, social, emotional or spiritual wellbeing" (SAMHSA, 2014, p.7).

Trauma comes in many forms including, but is not limited to, physical abuse, sexual abuse, emotional abuse and neglect, witnessing violence, natural disasters and terrorism, loss and grief, refugee and war experiences and medical trauma. It can be categorised into three main categories, namely acute, chronic, and complex (Feriante & Sharma, 2023). For some children, trauma can be experienced as a single event, such as a grief. It can also be experienced as chronic where there is repeated exposure to trauma e.g. bullying, sexual abuse. Additionally, trauma can also be complex, involving multiple invasive and interpersonal traumatic events, which increases the risk of additional trauma exposure (Cook et al., 2005). Despite these differences, SAMHSA (2014) highlighted that an event that is deemed traumatic depends on how one labels it, assigns meaning to it, and is disturbed by it both physically and psychologically. This response is influenced by various factors including the ones' cultural beliefs, social supports, and their developmental stage (SAMHSA, 2014).

In the last two decades, advances in neuroscience research have highlighted pervasive psychological, physical, and developmental impacts of trauma on an individual. Prolonged exposure to childhood trauma impacts brain development, resulting in the restructuring and functioning of important brain regions including the prefrontal cortex, hippocampus, and amygdala (Cerqueira et al., 2007; Marusak et al., 2014; McCrory et al., 2011; Tomoda et al., 2009; van Harmelen et al., 2014). As such, children are at greater risk for difficulties related to their cognitive, emotional, and social functioning (Center on the Developing Child, 2014; Perry et al., 1995; Perfect et al., 2016; Rotenberg & McGrath, 2016; Van der Kolk, 2003). Although

prevalence rates for childhood trauma are unclear, research suggests that 60% of children have experienced at least one form of adverse childhood experience in their lifetime (Madigan et al., 2023). In the Northern Irish context, it was reported that 35% of young people aged 11-19 have been exposed to at least one form of childhood trauma, with more than 50% being exposed to multiple forms of traumatic experiences (Redican et al., 2022).

3.1.2 Trauma-Informed Practice

In efforts to address this level of trauma, the past two decades have observed significant advances in prioritising early intervention in many public service sectors including education (Thomas et al., 2019). These efforts led to the development of trauma-informed practice (TIP). Initially pioneered in the United States by Harris and Fallot (2001) and later SAMHSA (2014), TIP is a model of care or guiding framework that supports trauma-impacted individuals. It is underpinned by four key assumptions, known as the 4 R's. As outlined in chapter 2, TIP *realises* the widespread impact of trauma and understands potential paths to recovery, it *recognises* the signs of trauma, it *responds* by fully integrating knowledge about trauma into policies, procedures, and practices to actively *resist re-traumatisation*. Moreover, TIP is centred on six core principles including safety, trustworthiness, choice, collaboration, empowerment, and respect for diversity (SAMHSA, 2014). Best practice recommends implementing TIP through a multi-tiered, whole-school approach (Chafouleas et al., 2016; Dorado et al., 2016; NCTSN, 2017; Overstreet & Chafouleas, 2016; Wiest-Stevenson & Lee, 2016). TIP promotes a contextual understanding of trauma, shifting perspectives to asking "What happened to you?" rather than "what's wrong with you?" when difficulties emerge (Wolpow et al., 2009).

The impacts of trauma have also been linked to adverse outcomes in academic functioning such as cognition, attention, memory, problem solving, and academic attainment (Chafouleas, et al., 2016; Kuban & Steele, 2011; Perfect et al., 2016). Moreover, children exposed to trauma also present in ways that may be misunderstood as defiant, aggressive, anxious or withdrawn rather than a response of experiencing trauma (Hertel & Kincaid, 2016). As such, TIP has been a welcome framework by schools and educational settings. Research has shown that trauma is not deterministic and children can overcome their trauma through a number of protective factors (Oshri et al., 2020). One of which is the school environment, which is referred to as a "place of healing" in the literature (Chafouleas et al., 2016; Lang et al., 2015). Schools create safe environments with nurturing, stable relationships, providing the security children need to thrive academically, socially, and emotionally (Berardi & Morton, 2017; Blodgett, 2012; Hilt, 2015; Perry, 2006; Walker & Walsh, 2015; Venet, 2019).

Whilst literature is still emerging, there has been promising evidence for the implementation of TIP in schools in addressing the needs of students impacted by trauma. Research has observed improvements in staff awareness of trauma, academic performance, emotional regulation, relationship building, fewer behavioural problems and reduced trauma-related symptoms (Crosby, 2015; Dorado, 2016; Holmes et al., 2015; McConnico et al., 2016; Perry & Daniels, 2016; Phifer & Hull, 2016; Saint Gilles, 2016; Stokes & Turnbull, 2016; Wilson-Ching & Berger, 2023). Despite these advances, the lack of clear definitions, inconsistent terminology and variability in implementation pose significant challenges for researchers in evaluating the effectiveness of TIP (Baker et al., 2016; Carter & Blanch, 2019; Maynard et al., 2019).

3.1.3 Nurture Groups

Nurture groups are psychosocial interventions focused on addressing the social, emotional and behaviour needs of students. Nurture is a short-term, targeted intervention that is underpinned by attachment theory. Originally developed by Educational Psychologist Marjorie Boxall in 1969, Nurture groups were developed to address the rising social, emotional, and behavioural needs of children in schools as a result of deprived healthy nurturance in early life (Bennathan & Boxall, 2013). Nurture is based on the premise that children who have been neglected or routinely mistreated by an attachment figure e.g. parents, develop insecure or disorganised attachment styles (Bowlby, 1973), and subsequently experience greater social, emotional, and mental health difficulties (van der Kolk, 2014). As such, Nurture aims to replace the missing early experiences by developing secure attachments with Nurture practitioners or teachers in a supportive, home-like environment.

The implementation of Nurture groups in schools is guided by six key principles: Children's learning is understood developmentally, the classroom offers a safe base, the importance of nurture for the development of wellbeing, language is a vital means of communication, all behaviour is communication, and the importance of transitions in children's lives. In a typical Nurture group, there are between six and 12 students, facilitated by two staff members called Nurture practitioners who have completed Nurture training. Students are screened and selected to attend Nurture groups using the Boxall Profile assessment measure which assesses their social, emotional and behavioural needs.

Nurture groups have a strong evidence base, with research demonstrating a range of positive outcomes including, improved social and emotional skills (Cooper & Whitebread 2007; Hughes & Schlosser, 2014; Kearney, 2005; Jones et al., 2025;

Sanders, 2007; Sloan et al., 2016; Sloan et al., 2020), school attendance (Sanders, 2007; Sloan et al. 2016), school attainment (Reynolds et al., 2009; Sanders, 2007; Seth-Smith et al., 2010), as well as improved parent-child relationships (Ofsted, 2011; Pyle, 2015) and whole-school ethos (Binnie & Allen 2008; Cooper, 2001).

While Nurture groups were not explicitly designed as part of a trauma-informed approach, they share many key components with TIP and can be offered as part of a whole school approach to TIP. They include the importance of early intervention, an understanding of the underlying reasons of behaviour, the importance of prioritising relationships, and a recognition that poor outcomes can be mitigated with the appropriate supports (Education Scotland, 2018, Nolan et al., 2021). Table 3.1 provides an overview of how the principles of Nurture groups align with the assumptions of TIP as defined by SAMHSA (2014), making Nurture a suitable component of a whole-school approach to TIP.

Table 3.1.

Mapping Nurture groups and the Six Principles of Nurture to SAMHSA's 4 R's of Trauma-Informed Practice (2014)

SAMHSA's 4R's	Nurture Principles	Application to Nurture Groups
1. Realise: Realise the widespread impact of trauma and understand potential paths for recovery	**Nurture Principle 1**: Children's learning is understood developmentally	• Nurture is founded on the understanding that early experiences shape social, emotional and cognitive development. • Nurture acknowledges that many children struggle due to disruptions in attachment or trauma. • Nurture groups realise that many children require structured, attachment-based environments to thrive.
2. Recognise: Recognise the signs and symptoms of trauma in clients, families, staff, and others involved with the system.	**Nurture Principle 5:** All behaviour is communication **Nurture Principle 6:** The importance of transitions in children's lives	• The Boxall Profile is used to screen and assess social, emotional and behavioural development. This ensures that teachers can recognise the impact of trauma on behaviour. • The Boxall Profile supports teachers to interpret student behaviour as communication, rather than viewing students as defiant.
3. **Respond:** Respond by fully integrating knowledge about trauma into policies, procedures, and practices	**Nurture Principle 2**: The classroom offers a safe base **Nurture Principle 3:** The importance of nurture for the development of wellbeing	• Nurture groups are utilised as a response to student trauma by facilitating safe, predictable environments that replicate the home. • Nurture practitioners act as attachment figures who model positive interactions and co-relational strategies, helping students to develop these skills.
4. **Resist Re-traumatisation :** Resist re-traumatisation of children, as well as the adults who care for them	**Nurture Principle 4:** Language is a vital means of communication	• Nurture groups actively resist re-traumatisation by avoiding punitive approaches and instead fostering acceptance, emotional safety, and predictable routines. There is an emphasis on helping children to develop trusting relationships and promote positive relationships rather than reinforcing cycles of distress.

In recent years, Nurture groups have played a significant role in addressing childhood trauma within educational policy in the United Kingdom. In Scotland, Nurture groups have been integrated into national policy as a key intervention to support children experiencing social, emotional, and behavioural needs. These include '*Getting it Right for Every Child'* (Scottish Government, 2014), '*Applying Nurture as a Whole-School Approach*' (Education Scotland, 2016), '*Included, Engaged and Involved, Part 2'* (Scottish Government, 2011), and '*Better Relationships, Better Learning and Better Behaviour'* (Scottish Government, 2013).

Similarly, in Northern Ireland, nurture groups are formally integrated into educational policy, with the Department of Education providing funding and support for their implementation. To date, 62 primary schools in Northern Ireland receive departmental funding for nurture groups, and additional support is available through the Education Authority and Nurture Advisory & Support Service. A recent publication by the Department of Education, '*Nurture Group Provision – Guidance for Schools'* (Department of Education, 2024), outlines provisions for funding and guidance for the implementation Nurture groups in primary school settings.

Following these recent advancements, Nurture groups have proliferated Irish schools. The Educate Together Nurture Schools Programme (2020) marked the first structured application of this approach across a network of schools. This was a three-year project, which was funded by Salesforce and Rethink Ireland's Education Innovation Fund. The project aimed to reach 2,250 students attending 25 Educate Together schools to take part in Nurture groups. It also provided professional development on Nurture and TIP to 500 teachers and qualified over 50 teachers as certified nurture practitioners. An evaluation was completed in March 2023 which found promising outcomes for student enjoyment at school, student – teacher

relationships, school attendance, academic self-confidence and achievement in literacy and numeracy, and teacher capacity to support students with socio-emotional or behavioural needs. The findings also highlighted the benefit of rolling out Nurture across the Educate Together school network in the future should adequate resources become available (Educate Together, 2023).

The DE have not yet embraced Nurture in its entirety yet. While the reasons for this is currently unknown, a lack of Irish based research, unclear funding and resource constraints within the DE may be contributing factors. Despite this, the DE mentioned Nurture in the '*Wellbeing Policy Statement and Framework for Practice: 2018-2023'* (DES, 2019). In this policy, its states that Nurture groups can be utilised as a suitable intervention to create a safe environment for children with additional and/or complex needs. Despite the limited guidance from the DE, Nurture groups are growing in popularity in Irish educational landscape, specifically in DEIS schools.

Without specific guidance or support from the DE, schools have been compelled to adapt their school funding and resources to facilitate Nurture. In the Irish context, the DE provide additional funding to schools with DEIS status. As such, DEIS schools have the financial means to access privately sourced staff training, resourcing Nurture rooms with the appropriate furniture and equipment, and sacrificing teaching staff as Nurture group practitioners. Of note, many schools in Ireland have accessed Nurture through Nurturing Schools Ireland which provide bespoke training and consultations to support school staff to implement Nurture in their school settings. As a result, significant inequalities exist in relation to facilitating Nurture groups in Irish schools whereby schools without DEIS status cannot afford to implement such practices.

3.1.4 Current Landscape of Trauma-Informed Practice

In recent years, growing awareness of the impacts of trauma, strengthened by an increasingly uncertain global landscape characterised by events such as the global Covid-19 pandemic, global wars, and the rising mental health crisis, have necessitated TIP in schools worldwide. The United States, Canada, Australia, the United Kingdom, and the Netherlands have taken the lead role with Ireland following suit.

Since the global Covid-19 pandemic, Ireland reported increasing cases of domestic violence and alcohol abuse (Oireachtas Library & Research Service, 2020), putting children at an increased risk of violence, neglect, and abuse. In addition, school closures had a significant impact on student wellbeing (Crushell et al., 2020), as well as denying traumatised children access to a place of safety and connection that was integral to their healing. Moreover, Mullholland and O'Toole (2021) reported that the Covid-19 pandemic further heightened pre-existing inequalities in some communities, where the economic, social, and psychological pressures on children were illuminated. In addition, Ireland welcomed over 18,000 Ukrainian students into school communities who have experienced war and displacement (DE, 2024). Coupled with these events, the Irish education system prioritised wellbeing promotion in their publications and policies which can support students who have been impacted by trauma. As outlined in Chapter 2, these policies include the '*Well-Being Policy Statement and Framework for Practice: 2018-2023*' (DES, 2018, Revised 2019), '*Looking at our Schools Quality Framework'* (DE, 2022a) and the '*School Self-Evaluation: Next Steps September 2022 – June 2026'* (DE, 2022b).

Moreover, in addition to the psychological support they provide to schools, the National Educational Psychological Service [NEPS] that work under the DE

have recently developed training and resources for schools to support trauma impacted students. While significant progress has been made to address these issues, the means to effectively incorporate it within the framework of the Irish educational system remains underdeveloped. In line with sentiments by Maynard et al. (2019), the lack of clear guidance or policies providing a structured implementation framework for TIP highlights the need for further research into the current practices in Irish schools.

3.1.5 Current Study

In light of these gaps in the literature, this study aims to explore key personnel within the Irish education system and understand how they are adopting TIP in their school settings. This research will look specifically at the first-hand experiences of teachers, principals, and NEPS psychologists in their roles adopting TIP in Irish primary schools. In order to illustrate the current landscape of TIP in Irish schools, this study will gain insights from participants across various primary school settings. This includes schools located in areas of social disadvantage as well as those situated in regions with fewer social challenges. Furthermore, this research will explore the potential variances in TIP across each primary school setting and professional domains of teachers, principals and NEPS psychologists.

The overarching question for this research is:

1) What are the lived experiences of teachers, principals, and NEPS psychologists with implementing trauma-informed practice in Irish primary schools?

To determine this, the research will focus on the following sub-questions:

i) How are teachers, principals, and NEPS psychologists adopting trauma-informed practice in their primary school settings?

ii) What facilitators and barriers did teachers, principals, and NEPS psychologists face when adopting trauma-informed practice in their primary school settings?

3.2 Methodology

3.2.1 Research Design

3.2.2.1. Interpretative Phenomenological Analysis. This study adopted an interpretative phenomenological analysis (IPA) approach to the research. IPA is a qualitative experiential methodological approach that aims to understand peoples lived experiences and how they make sense of it in the context of their personal and social worlds (Smith et al., 2009).

IPA is grounded in phenomenology, hermeneutics, and idiography. Phenomenology is concerned with the study of human experience (Smith & Nizza, 2022). It focuses on understanding the subjective experiences of individuals and how they ascribe meaning and relate to their lived world (Langdridge, 2007). Hermeneutics refers to interpretation, where the researcher seeks to make sense of how participants themselves interpret their experiences. Smith and Osborn (2003) believed that this process involves the participant making sense of their own experiences, termed double hermeneutic, highlighting that both the researcher and participant are part of the interpretative process. Idiography is concerned with the detailed focus on a person's subjective lived experience, rather than creating generalisations. This study focuses on exploring the lived experiences of teachers, principals and NEPS psychologists in their roles implementing TIP in their schools. As such, IPA provides a framework for uncovering their unique experiences and

shared understandings of TIP in Irish primary schools. According to Smith and Osborn, (2015), IPA is well-suited to examine complex and emotionally charged experiences, such as supporting students affected by trauma. Unlike a case study approach which would have emphasised organisational processes and systemic implementation, IPA allowed for a nuanced, idiographic exploration of individual perspectives. This made it the most appropriate methodology to address the research aim of understanding how participants personally experience and interpret the adoption of TIP in their school settings. A detailed account of the IPA process is outlined in the data analysis section in table 3.4.

3.2.2.2. Multi-Perspective Design. This study sought to explore the lived experiences of three different professional groups adopting TIP in Irish primary school settings. Moreover, the study aimed to explore the convergences and differences that existed amongst each professional group and their school contexts in relation to TIP. For these reasons, this study adopted a multi-perspective design (Larkin et al., 2019).

Participants were initially recruited according to their school context e.g. DEIS band 1 and 2, DEIS rural, and a school without DEIS status. Following this, participants were grouped into their professional roles for data analysis (Rostill-Brookes et al., 2011). This facilitated three different groups of teachers, principals and NEPS psychologists. The data analysis process further analysed each participant group in relation to their school contexts. As such, the integration of participant groups facilitated a greater understanding of the lived experiences of implementing TIP within diverse school settings.

3.2.2 Sampling and Recruitment

The study used purposeful sampling, whereby four primary schools adopting TIP were recruited. Each school contributed a triad of participants, comprising a teacher, principal and NEPS psychologist, yielding a total of 12 participants. For the purposes of this research, primary schools adopting TIP included:

1) a primary school that has completed professional development training related to trauma informed practice;

AND a school that has an established Nurture group. This includes;

2a) schools enrolled in the Educate Together Nurture Schools Programme

OR

2b) schools that independently set up their own Nurture group.

Of note, the Educate Together Nurture Schools Programme was included as an inclusion criterion as it provided a structured means to access schools that were adopting Nurture groups in Ireland. A list of these schools was available on the Educate Together website (www.educatetogether.ie). Schools that were not part of the Educate Together Programme but had independently established a Nurture group were identified through a Google search of primary schools in Ireland. The researcher determined the inclusion of schools for the study based on information available on the school websites, specifically references to completed TIP related training and the establishment of a Nurture group.

Following the identification process of schools that met the inclusion criteria, the researcher contacted the school directly via email inviting them to participate in the study (see Appendix E). A participant information sheet was provided in the emailing relaying the background of the study, participant requirements and information regarding potential benefits and disadvantages of participating in the

study (see Appendix F). Upon receiving expressions of interest, the researcher requested the principal's assistance in disseminating the recruitment email to the school's teaching staff. To avoid coercion among teachers, all teachers on the staff team were invited to participate. If more than one teacher expressed an interest, a selection process was made. Additionally, to involve NEPS psychologists, the principal was also asked to share the study with the school's assigned NEPS psychologist. To ensure minimal burden was placed on the principal, the researcher provided all necessary documents for easy forwarding to the NEPS psychologist. In the event that a NEPS psychologist chose not to participate, the school was not notified, but rather informed that their involvement in the study was not required. Upon receipt of expressions of interest for the study, each participant including the teacher, principal, and NEPS psychologist was provided with a consent form to sign (Appendix G).

3.2.3 Participants and School Demographics

A total of twelve participants were recruited for the study, forming triads from four different primary school settings. These schools varied in size, status, context, and geographical location. Each triad consisted of one teacher, one principal, and one NEPS psychologist from each school, totalling four teachers, four principals, and four NEPS psychologists.

In relation to the training received, three of the four schools participated in TIP training delivered by the same private provider, TINT Education. Additionally, all four schools completed Nurture training through another private provider, Nurturing Schools Ireland. One school also completed training on restorative practices from a private training provider called RP Connect. The consistency in training across most schools strengthened the study by providing a shared foundation

of understanding and implementation of TIP, which offered important contextual insight into how participants were interpreting and applying trauma-informed approaches within their respective settings. A summary of participant and school demographics are provided in Tables 3.2 and 3.3.

Table 3.2.

School Demographic Information

School Code	Status	Description	School Ethos	2023/2024 Enrolment Numbers	Training Received
S1	DEIS Rural	Co-educational National School	Catholic	113	- Nurturing Schools Ireland - RP Connect – Restorative Practices
S2	DEIS Band 1	Co-educational Senior National School	Catholic	151	- Nurturing Schools Ireland - TINT Education – Trauma-informed practice
S3	DEIS Band 1	Co-educational Senior National School	Catholic	166	- Nurturing Schools Ireland - TINT Education – Trauma-informed practice
S4	Non-DEIS	Co-educational National School	Educate Together	203	- Nurturing Schools Ireland - TINT Education – Trauma-informed practice

Table 3.3.

Participant Demographic Information

Participant Code	Gender	Current Role	Number of years' experience in current role
School 1			
P1	Female	Principal	6 years
T1	Female	Mainstream Class Teacher	20 years
N1	Female	NEPS Psychologist	15 years
School 2			
P2	Male	Principal	20 years
T2	Female	Nurture Teacher	2 years
N2	Male	NEPS Psychologist	5 years
School 3			
P3	Female	Principal	15 years
T3	Female	Mainstream Class Teacher	7 years
N3	Female	NEPS Psychologist	14 years
School 4			
P4	Female	Deputy/Acting Principal	6 years
T4	Female	Mainstream Class Teacher/ Nurture Teacher	2 years
N4	Female	NEPS Psychologist	19 years

3.2.4 Data Collection

Data collection was carried out between April 2024 and January 2025. Prior to data collection, a semi-structured guide was developed using the five-step approach by Kallio et al. (2016). Appendix H provides an overview of this process including the final semi-structure interview schedules. On receipt of the completed consent forms, a semi-structured interview was scheduled with participants via email

or phone communication. Dependant on the preferences of the participant, interviews were carried out either face-to-face in the school setting or via the online platform, Microsoft Teams. Interviews carried out in person were audio recorded using a digital recording device. Online interviews were recorded using the audio recording feature on Microsoft Teams. Four interviews were carried out in person in the school setting and eight were carried out online on Microsoft Teams. The duration of the semi-structured interviews lasted between 30 and 60 minutes.

3.2.5 Ethical Considerations

3.2.5.1. Participant Distress. This research study was granted ethical approval from the Mary Immaculate College Research Ethics Committee (MIREC) and NEPS Research Ethics Committee (NREC), in December 2023 and April 2024, respectively (Appendix I). Given the sensitive nature of the study, there was precautions made to protect participants from distress. In some instances, talking about the lived experiences of supporting children through trauma may result in secondary traumatic stress or vicarious trauma (Christian-Brandt et al., 2020; Diehm et al., 2019; Hydon et al., 2015). It may also bring up past experiences of trauma, especially if the participants or individuals close to them had previous encounters with trauma (Hydon et al., 2015). A distress and disclosure protocol was developed to safeguard participants from experience emotional distress and to respond appropriately if a participant disclosed sensitive or personal information during the course of the interview (see Appendix J). During the consent process, participants were ensured that they had the autonomy to terminate the interview at any point and could opt not to respond to specific questions during the interview. Participants were also explicitly informed that they were not obligated to discuss sensitive personal information or experiences. The researcher also reiterated the strict confidentiality of

all information shared during the research, unless they felt the participant's safety was at risk. Upon completion of the interview process, the researcher provided participants with information about support services as necessary. This encompassed the Employee Assistance Service available for all school staff and NEPS psychologists under the DE. The Employee Assistance Service is a free and confidential counselling service that provides wellbeing support to school staff and NEPS psychologists.

To support the researcher, the researcher's supervisors undertook the role of supporting the researcher during data collection, providing assistance if a participant became distressed or disclosed sensitive information. Supervisors also supported the researcher to develop the 'Distress and Disclosure Protocol'. In the event of such an interview occurring, the supervisors were available to the researcher for immediate support and debriefing. While no participants in the study required this intervention, it was a necessary step to protect both participants and the researcher from feeling distressed.

3.2.5.2. Confidentiality and Anonymity. Throughout the research, the researcher ensured that confidentiality was maintained for each participant and their respective schools. Given the nature of IPA research, participants recount various personal experiences that can also make them identifiable to others (Tolich, 2004). As such, several precautions were taken. Firstly, individual codes for each participant and school were created at the outset of data collection. Moreover, rigorous data cleaning was conducted which included removing all identifying information during the transcription process. This included names of school staff, geographical names, and local authorities that could relate to the participant or their respective school. An additional process of deciding what quotes could be used in

the final dissemination of that research that captures the participants experience whilst still ensuring their confidentiality.

Regarding the research data, the original audio recordings were deleted after transcription. In line with the Data Protection Acts of 2018, the transcribed data was then stored in an encrypted file on a password-protected device, with exclusive access only accessible to the researcher. Moreover, the reflective journal will be destroyed on completion of the research as it will no longer be of value. After the research process, the researcher will also override the Microsoft word documents containing the reflective journal data to ensure it is irreversible. The researcher will then permanently delete the document from their laptop.

3.2.6 Reflexivity

Reflexivity is renowned as a core component of qualitative research. It provides space for the researcher to reflect on their personal biases, values and background including their gender, culture, social economic status and how it shapes their interpretations formed during the research process (Creswell & Creswell, 2018). IPA is often described as a double hermeneutic process. It engages the researcher in a process to understand the lived experiences of others and how they make sense of it in the context of their personal and social worlds (Smith et al., 2009). As a result, it is important that the researcher engages in reflective practice of the factors that may influence the interpretation of the data throughout the research (Rodham et al., 2015). For the duration of the research, the researcher kept a reflective journal focused on their experiences, perspectives, and issues that arose throughout the study. This was especially important during the transition of the researcher undertaking a professional placement within NEPS. This transition may have influenced the researcher's biases and perceptions of the role of NEPS

psychologists adopting TIP, as well as attitudes from teachers and principals regarding the support of their NEPS psychologist. The research journal was kept on a Microsoft Word document on the researcher's password protected laptop. Appendix K provides a sample extract of the research journal.

3.2.7 Data Analysis

Semi-structured interviews were recorded using an audio recording device and then transcribed verbatim. Each interview was transcribed onto a Microsoft word document and then uploaded to NVIVO 12, a qualitative data management programme. Following this process, the researcher conducted data analysis of transcripts on both Microsoft word documents and NVIVO 12. A multi-perspective approach to IPA was employed (Larkin et al., 2019; Smith et al., 2009; 2022; Rostill-Brookes et al., 2011). Table 3.4. provides an overview of each step.

Table 3.4.

Summary of Data Analysis Process

Steps	Data Analysis Process
1.	**Reading and re-reading:** This step served to familiarise and immerse the researcher into the data. The researcher also listened to the audio recording of each interview.
2.	**Exploratory note taking:** This step involved recording initial reactions to the transcript by creating descriptive, linguistic and conceptual notes. Descriptive notes summarised the explicit meaning of what the participant said; linguistic notes described the specific use of language used by the participant, and conceptual notes took the form of questions to consider different and potential meanings (Smith et al., 2009). This step was repeated on NVIVO 12 software using annotations. Appendix L provides an example of this process.
3.	**Formulating experiential statements:** This step involved creating concise statements of what emerged as important in the exploratory notes associated with the corresponding portion of the transcript. Statements were grounded in

the data whilst also showcasing the conceptual meaning of the text (Smith & Nizza, 2022). This process was repeated on NVIVO 12 software using the notes function. See Appendix L.

4. **Finding connections and clustering experiential statements into personal experiential themes (PETs):** This step was carried out by printing the list of experiential themes and cutting them into pieces of paper so each experiential statement was on a separate piece of paper. They were laid out on a large surface allowing the researcher to cluster the statements that were similar or connected in some way. Once complete, this step was repeated on NVIVO where each experiential statement was organised by their participant code and PET number using the node function e.g. N1_Theme1 represented the first PET from the NEPS psychologist assigned to school 1.

5. **Naming the personal experiential themes and organising them in a table:** Once experiential statements were clustered into groups they were organised into a table and named as PETs. Each PET number was converted to its PET title on NVIVO using the node function.

6. **Repeat stages 2-5 for each transcript**

7. **Working with personal experiential themes to develop group experiential themes across cases:** This step involved cross-case analysis of each participant group (teachers, principals, and NEPS psychologists) where similar PETs were grouped together to form group experiential themes (GETs). Thus, each participant group had a distinct set of GETs relevant to their experiences (See Appendix M). The same process was repeated on NVIVO where each GET was represented as a node with an aggregate of their PETs underneath.

8. **Across-group analysis**: In line with the principles of multi-perspective IPA research (Larkin et al., 2019; Rostill-Brookes et al., 2011), an additional step was included in which the researcher created three overarching themes with subsequent subthemes based on GETs from each participant group. This process involved identifying convergences and divergences across each set of participant group GETs (See Appendix N). This step was repeated on NVIVO to aid the process of writing up the findings.

3.3 Findings

The aim of this research was to explore the lived experiences of teachers, principals, and NEPS psychologists in their role implementing TIP in Irish primary schools. It also explored the facilitators and barriers they faced when implementing these practices. The data was analysed in line with the principles of multi-perspective IPA research (Smith & Nizza, 2022; Rostill-Brookes et al., 2011). Figures 3.1, 3.2, and 3.3. provides a summary of the PETs for each participant in the study, based on their individual experiences of implementing TIP. For each participant group (teachers, principals, and NEPS psychologists), a distinct set of group experiential themes (GETs) were developed by clustering PETs, capturing the shared experiences and perceptions within each group (See Appendix M). Following this process, GETs from each group were synthesised into across-group GETs (See Appendix N). This approach allowed for the identification of overarching patterns and shared meanings across the participant groups, providing a rich multi-perspective account of implementing TIP in Irish primary schools. This process revealed three main themes: 1) A transformational journey in shaping school culture, 2) Striving for TIP in challenging systemic conditions, and 3) Tailoring trauma-informed approaches to individual school needs. Figure 3.4 illustrates these themes and subsequent subthemes. The prevalence of each theme and subthemes across participants are presented in Appendix O.

Figure 3.1

Summary of Personal Experiential Themes for Teachers

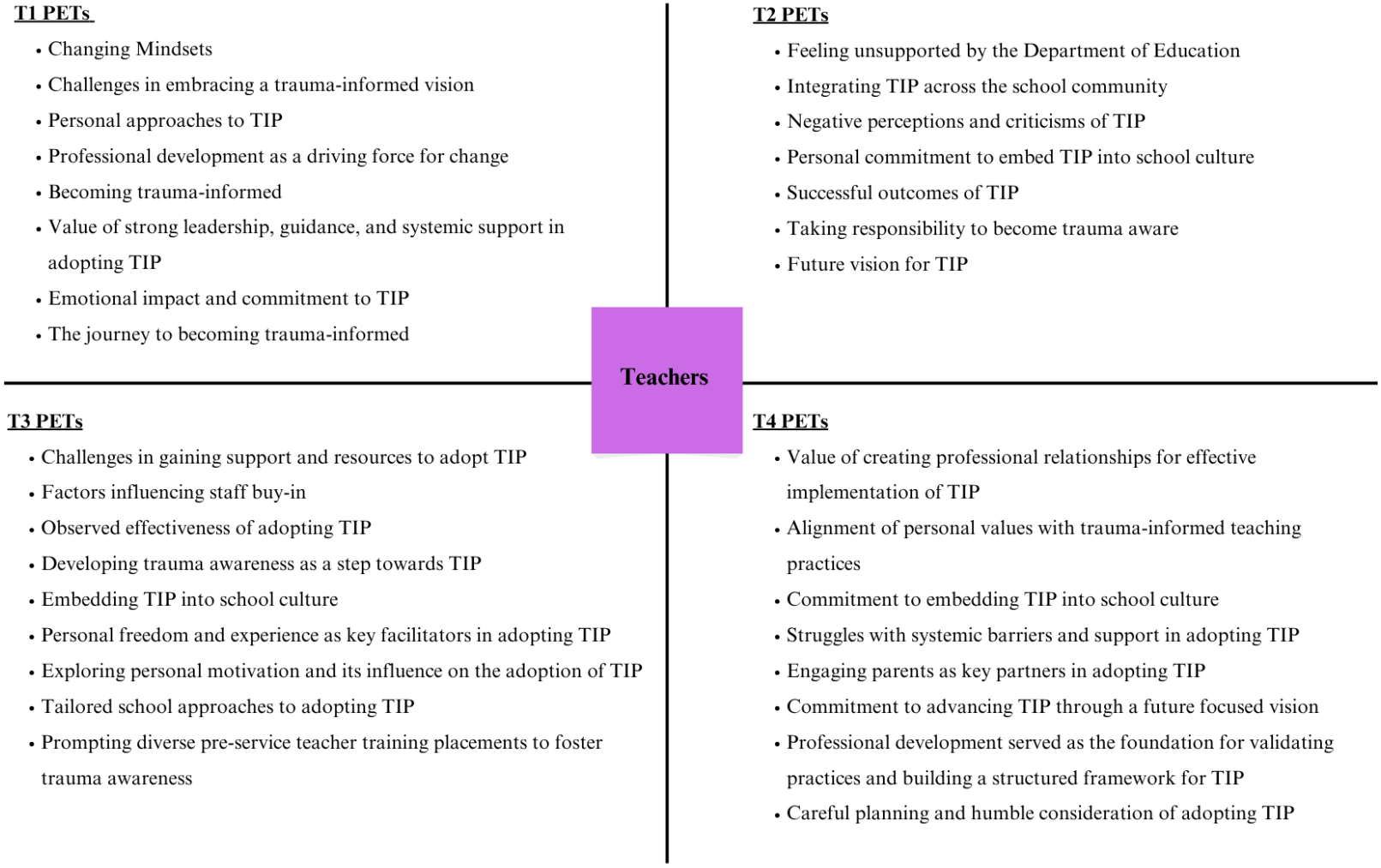


Figure 3.2

Summary of Personal Experiential Themes for Principals

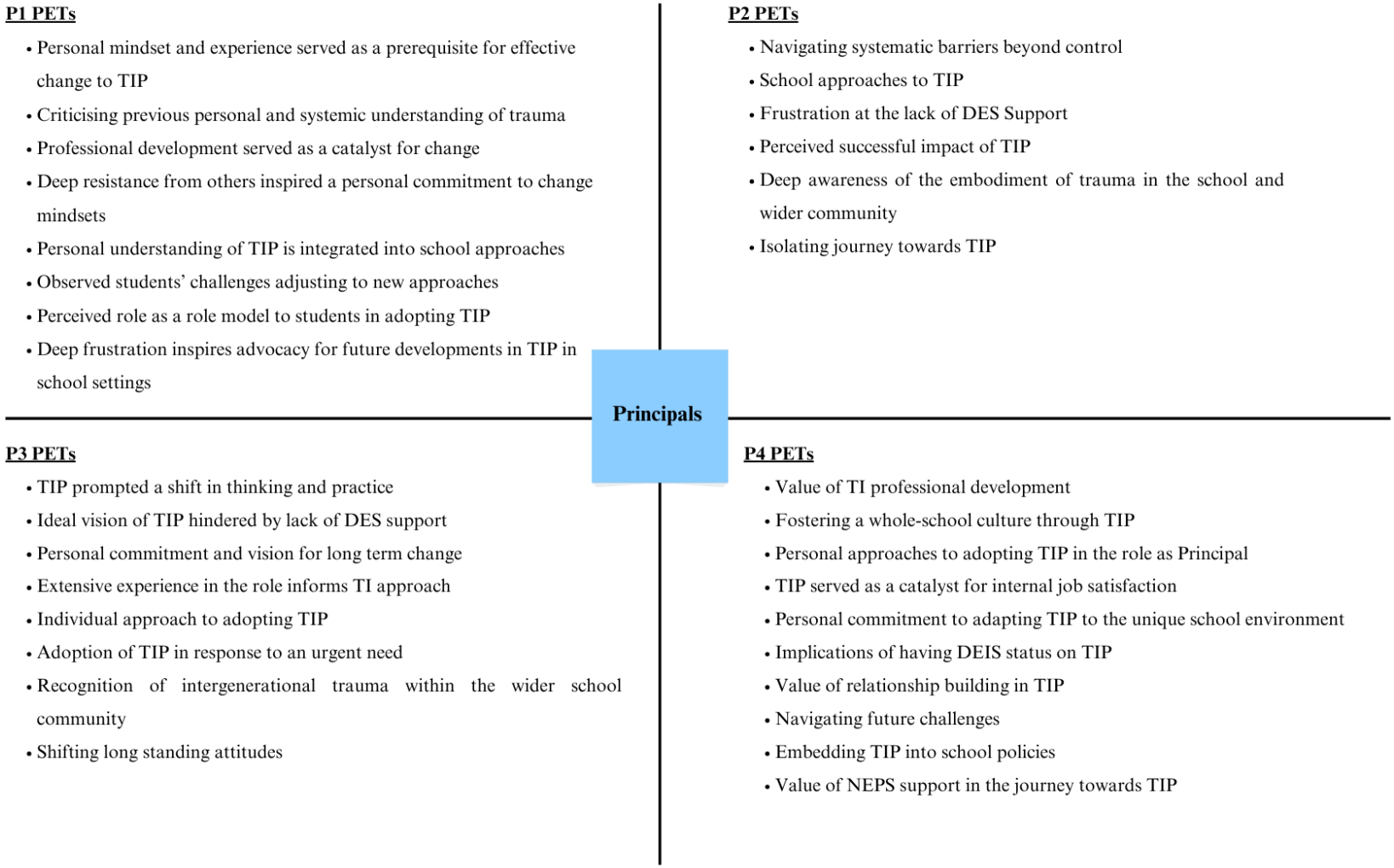


Figure 3.3

Summary of Personal Experiential Themes for NEPS Psychologists

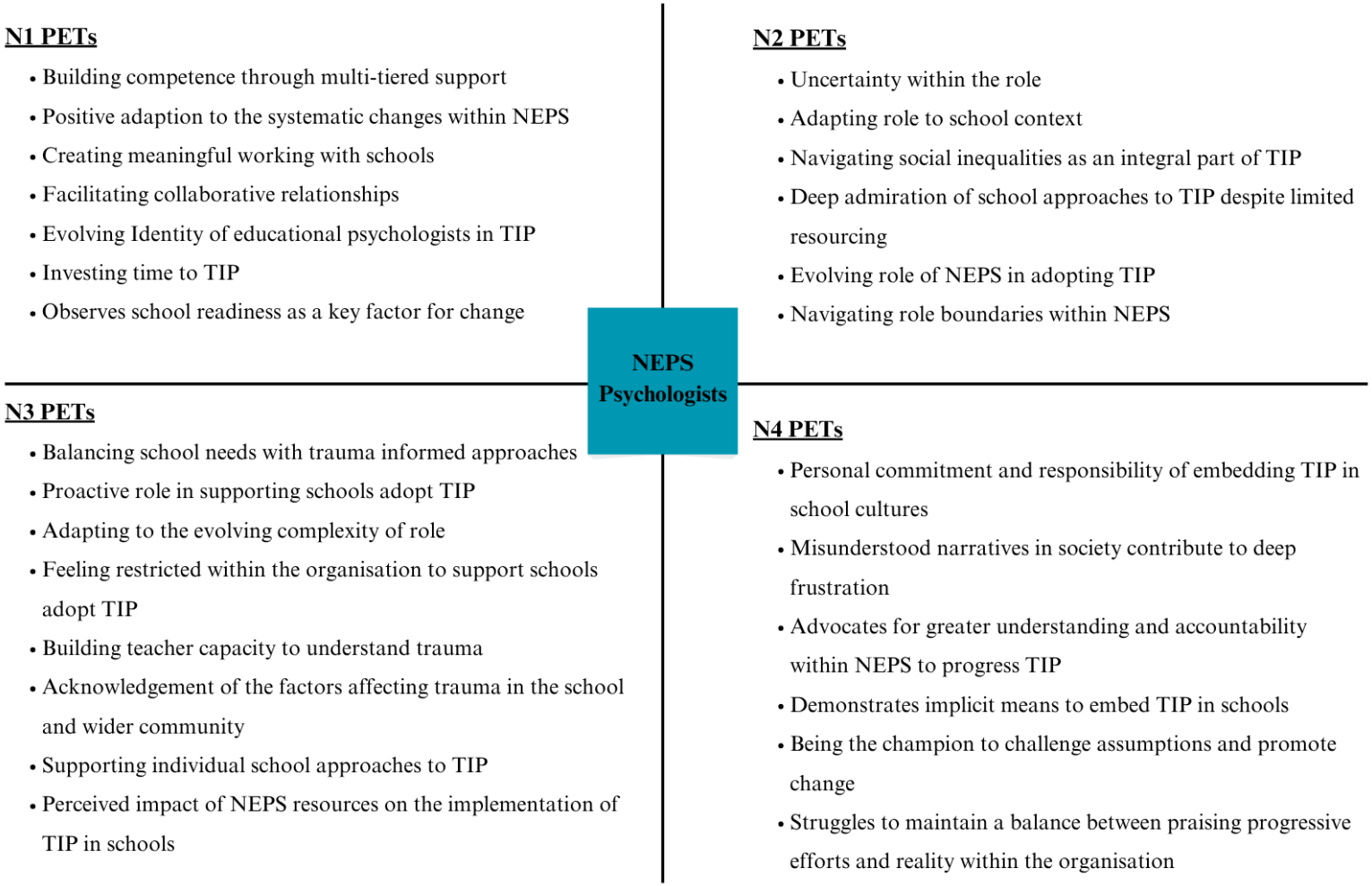
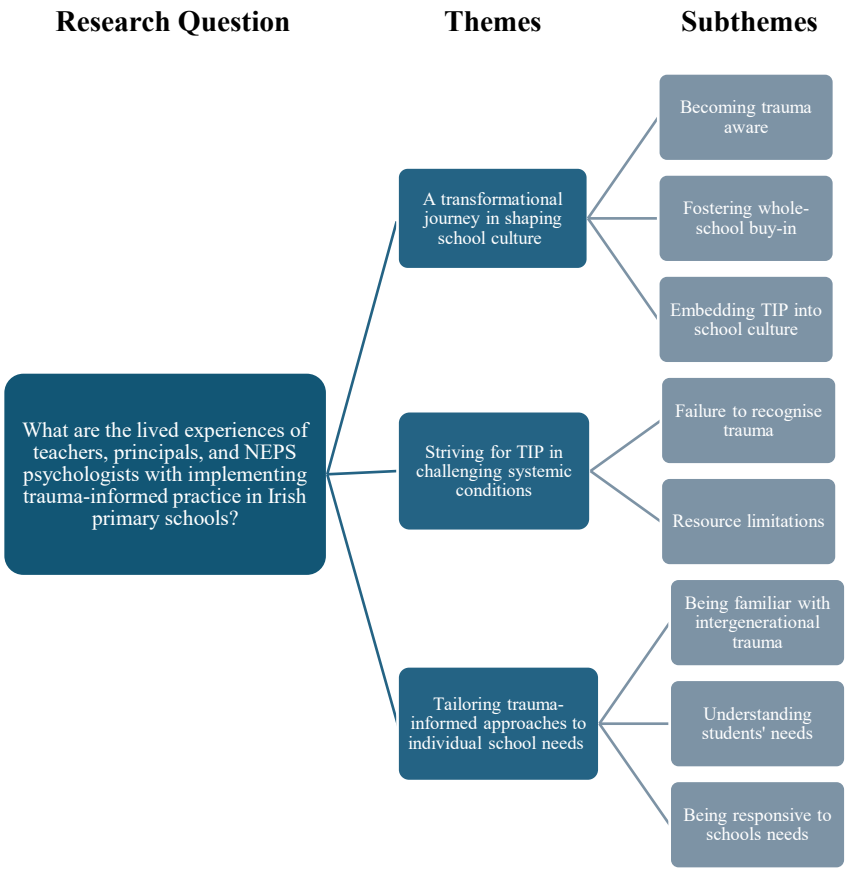


Figure 3.4

Summary of Themes and Subthemes



3.3.1 A Transformational Journey in Shaping School Culture

The exploration of lived experiences of teachers, principals, and NEPS psychologists highlighted a central theme of recognising TIP as a transformational journey in shaping school culture. This journey encompassed becoming trauma aware, encouraging a shift in perspectives in adopting whole-school buy-in, and embedding these practices within the school.

3.3.1.1. Becoming Trauma Aware. All participants in this study from each professional domain noted the first step in adopting TIP into school culture was becoming trauma aware. For teachers and principals in the study, professional development in trauma was paramount for understanding the impacts of trauma on

children. For both professions, motivation to engage in professional development stemmed from classroom and whole-school issues of student learning and behaviour. For example, T2 shared how there was a moment of curiosity regarding the effectiveness of her approach that inspired a change in thinking.

> We have had money thrown at this and at that… and nothing was ever working. And I was like, what is going on? … Why aren't these children making progress? So then you have to kind of dig deeper and say, well, actually, it doesn't really matter… If the children didn't feel safe and weren't regulated enough to access that part of their brain, where they could take any information that they could expand outside of their own inner world…. So that then piqued my interest in trauma-informed teaching, and I did some training with Nurture.

The same was true for principals who noted similarities in the ineffectiveness of whole-school practices. P1 reflected on the ineffectiveness of detention in the school, "the same children were in trouble day after day… it wasn't effective". She noted the moment of realisation which motivated her to change her practices, "So the motivation was just the realisation that we were actually compounding these children's traumas by putting them on detention". This inspired her to engage in professional development training which transformed her professional outlook and created a broader shift in thinking across the entire staff team. She reflected, "In 28 years of teaching, I can safely say that was the most effective and useful thing I've ever done and that changed everything here".

Divergences existed in the level of awareness of trauma among teachers and principals. The spectrum of awareness was influenced by the participants' lived experience and connection to the school context. For example, participants with

previous employment experiences or long-standing careers in DEIS band 1 schools, entrenched with greater social disadvantage and intergenerational trauma had a deeper understanding of its impact due to the direct proximity to the culture, history and shared experiences. P4 noted that her experience and training in a DEIS school in her early career facilitated greater awareness of trauma, “you're at the coalface in DEIS schools, you get the best training”. She further noted that this knowledge increased with greater teaching experience.

This contrasted with participants who were not from the area and had a more theoretical perspective of trauma, requiring a more deliberate effort to learn. N2 noted that;

> I think for a school like X [DEIS school]..the SNAs are from around the locality and the principals have been there for a good amount of time …it's nearly inbuilt. So, is training important there, absolutely. But is it more necessary for the other schools as well… like the X [city name] suburbs where your half in the country and half in the town. There's trauma happening there too.

Participants from all professions noted the lack of awareness of trauma in undergraduate teacher training programmes. Principals noted minimal differences in the level of knowledge of trauma from newly qualified teachers to teacher qualified years ago. Likewise, T3 noted the lack of variety in teaching placements noting that it was not a requirement to undertake a placement in an area of social disadvantage such as DEIS schools. She expressed that “you should have to do a DEIS placement”.

For NEPS psychologists, becoming trauma-aware encompassed the evolving awareness of trauma within the organisation and their role bringing trauma

awareness to schools. All NEPS psychologists in this study emphasised the complexity of casework being referred to NEPS necessitated a shift toward a more holistic understanding of the child. In turn, this prompted a change in organisational practices at a systemic level. This was most eloquently expressed by N3, noting that "the days of having a dyslexia case really don't exist anymore".

This shift in thinking prompted a proactive approach to integrating TIP into the organisation by upskilling NEPS psychologists in trauma. N3 described how; "NEPS has grown up a lot in the 14 and a half years I've been in it…and since COVID we've done an awful lot of training".

N1 further reflected on the resistance of NEPS psychologists in their evolving role of adopting skills traditionally associated with clinical psychology. She highlighted how earlier educational psychologists, by nature, were academically focused and did not see their role in supporting students impacted by trauma. She reported that "there is a move that you need to undergo yourself to bring yourself to that place where you're comfortable talking about something that traditionally would have been looked at as being in the vein of clinical practice".

Moreover, N2 illustrated how the increased organisational awareness of trauma was reflected in the implementation of recent organisational initiatives, "NEPS are doing the SIM [Social Inclusion Model] projects and the NEIC projects [Northeast inner city]… it's totally a trauma-informed approach".

There was an overarching consensus by all psychologists in this study that there was a professional responsibility to build awareness of trauma in schools. This responsibility was enacted through individual casework and targeted training, as well as challenging existing narratives and assumptions embedded in their practices. N3 emphasised the importance of building teacher capacity noting that "I find that no

matter how good teachers are, they don't understand the psychology of the trauma. So, I would have done that on very much individual basis with teachers". In her experience, she tried to find a delicate balance between not expecting teachers to act as therapists, while still emphasising the importance of understanding trauma in their work.

In a similar regard, N4 emphasised the importance of encouraging teachers to critically reflect on their assumptions of viewing a student's behaviour through the lens of a diagnosis. She reflected on how the medical model masks the wider impact of intersectionality.

> One of the things that I found really challenging and I continue to find challenging is the whole kind of obsession with diagnosis.... As a NEPS psychologist, we can draw on tools to challenge some of those assumptions…. I think helping people understand and reframe the behaviour can be really helpful.

Moreover, N4 highlighted the onus of psychologists to bring about trauma awareness in schools through the lens of social inclusion and the intersectionality of trauma. She described how schools are very "well-intentioned" however some of their policies are often "trauma inducing rather than trauma reducing". In her experience, this was an area that stemmed from her own personal research and experience in the area of trauma.

3.3.1.2. Fostering Whole-School Buy-in. Buy-in from the whole-school was an important part of the journey in fostering a trauma-informed school culture. All schools in this study reported this process as a difficult one. P3 reported that "its's challenging, changing attitudes", noting that some staff felt they may be "letting children get away with" bad behaviour, rather than disciplining them. She recognised

the difficulty in shifting these attitudes however, it was a necessary cultural shift within the school, where staff must evolve from punitive to a supportive mindset when supporting students. T2 further highlighted that this cultural shift was crucial in an area of such social disadvantage and intergenerational trauma, “in settings like ours, we have greater responsibility to get it right and I find that challenging if people aren't on the same page”.

This contrasted with the experiences of T4 and P4 who worked in an Educate Together school without DEIS status. T4 felt that the resistance from staff often emerged as a lack of knowledge regarding trauma. P4 recognised that the inclusive ethos of an Educate Together school naturally aligns with TIP. As such, T4 noted that teachers naturally embrace TIP and with increased awareness they are willing and open to implement this shared practice.

P1 illustrated the challenges of overcoming resistance, noting that achieving and maintaining whole-school buy-in required persistence and sustained effort.

> In the first year everybody just embraced the philosophy and who wouldn't?... it's so warm and fuzzy. And I think things started to get bumpy then in year 2… we had a child who had a MGLD [mild general learning disability] and had severe behaviour... Some staff were getting frustrated, they wanted the child suspended.

Professional development played a pivotal role in shifting these long-standing attitudes in schools. This was reflected in each school through whole-school or individual staff professional development training that resulted in team-teaching methods. At the whole-school level, the importance of ongoing professional development for all staff emerged as a recurring theme. T1 argued that effective implementation of TIP practices requires comprehensive and accessible professional

development training, as interest alone is insufficient. Drawing from her experience, T1 highlighted that while personal interest in TIP prompted her own continued learning, schools must ensure systematic, accessible, and ongoing professional development to successfully change mindsets to adopt this approach.

The effectiveness of TIP and its evidence base emerged as factor in fostering whole-school buy-in. T2 highlighted the significance of utilising pre- and post-screening tools, such as the Boxall Profiles for students participating in Nurture groups, to enhance her professional credibility and reinforce the validity of trauma-informed approaches.

> In any staff, you have people who might take a little bit longer to stop old practices. But hopefully in time everyone can come on board…it's very hard to quantify the children's progress sometimes but the Boxall profiles allows us to do that.

Whole-school buy-in also extended to parents. Teachers and principals in this study noted the value of collaboration and communication with parents. T3 and T4 demonstrated this collaboration by extending their practice of educating parents regarding trauma and Nurture group strategies. However, T1 and P1 noted that parental biases and the influence of historic disciplinary procedures acted as barriers to whole-school buy-in.. They described differences in parental attitudes when schools had to manage student behaviours involving their children, noting that "they were all about it when their child wasn't involved".

3.3.1.3. Embedding TIP into School Culture. Differences emerged regarding the role of embedding TIP into school culture. In this study, principals were responsible for guiding the implementation of TIP at a systemic level by integrating them into school policies and frameworks. Conversely, the role of the

teacher was embedding TIP into their daily routines and classroom activities. The same was true for NEPS psychologists who embedded TIP into their daily practice with schools through consultation and modelling.

On a systems level, principals encompassed the role of leading school changes in policy and practice. This was emphasised by N4, reporting that;

> One of the things that has emerged [when providing school training] is one teacher might come from a school. But in terms of the power they have to affect change, it's very minimal. So, I think that school leaders really do have a really important role to play in terms of creating change.

In this study, P1 took the lead in adapting the code of behaviour to align with trauma-informed and restorative practice principles, updating it to a 'relationships' policy. P4 also aimed to update school policies to reflect TIP, noting that it was the "missing piece of the puzzle". P4 further illustrated how TIP was embedded into school practice by facilitating observation days where staff members could observe Nurture teachers in their practice. P4 also provided opportunities for Nurture teachers to extend their practices to other classrooms and teachers.

On a more practical level, all teachers in the study illustrated how TIP is embedded into their daily practice in both explicit and implicit methods. Explicit approaches included facilitating morning meeting and Nurture room activities, as well as practicing skills teaching such as adopting emotional literacy programmes.

In contrast, implicit approaches to embed TIP included prioritising relational approaches with their students, creating nurturing classroom environments, using restorative questioning, and demonstrating patience with their students. T4 highlighted how TIP was embedded through their overall attitude and approach with

their students. “I feel like it's not something that you're like, well, today I'm going to be trauma-informed…it's just your attitude”.

In a similar way, NEPS psychologists demonstrated a commitment to embedding TIP into school cultures through their daily practice in consultation with schools. N4 highlighted the importance of modelling as a means embedding TIP.

> I think it is about trying to continue to have those conversations with them [school staff] and modelling…even in terms of your interactions with parents…I always try and ensure that it's very collaborative…where parents are very much respected for what they bring.

3.3.2 Striving for TIP in Challenging Systemic Conditions

In efforts to effectively adopt TIP into school culture, experiences from teachers, principals, and NEPS psychologists reported a significant absence of systemic acknowledgement of trauma which was further compounded by limited resources.

3.3.2.1. Failure to Recognise Trauma. An overarching theme reflected by participants in this study was the lack of acknowledgement of trauma at a systematic level. This was consistent across all school contexts. Principals in DEIS band 1 settings noted a significant lack of departmental acknowledgment of the extent of trauma in the community. This was most eloquently illustrated by P2 noting that;

> One of the requests that we have is that they [DE] acknowledge that certain communities around the country have a greater sense of disadvantage and as a result, have a bigger, trauma piece to do….It was very frustrating hearing X [Minister of the DE] saying that they are disadvantaged children in every school. Yes, of course there is, but there are X [school population] really disadvantaged children in this school.

This frustration was also reflected in the DEIS programme, which aims to better opportunities for those in communities at risk of disadvantage and social exclusion. Principals from DEIS band 1 and DEIS rural school settings noted that the current DEIS model was insufficient in meeting the needs of schools. For example, P1, the principal from a DEIS rural setting stated that;

> I'm in a DEIS school for 27 years and they're throwing money at something, and they're not seeing it. We're not breaking the cycle….The system is, it's almost, it's terrible to say this, but it's almost set up to fail.

There was similar frustration from the P4 and T4 in a school without DEIS status. They expressed great disappointment regarding the criteria to access status for DEIS. They reported significant need in their wider school community which was conducive to neighbouring schools meeting the standards for DEIS. As such, the school had to adopt a DEIS-inspired approach to meet the school needs without additional resources.

This lack of acknowledgement was also reflected in the Whole School Evaluation (WSE) process which is a department initiative to evaluate the effectiveness of each school's self-evaluation (SSE) process. The SSE encourages schools to identify and improve areas for development which takes account of their own school context. However, T4 noted that while these initiatives were appreciated, their aim to prioritise TIP was rejected with the view to prioritise specific subjects instead. "We had a WSE and they said we had to focus on Irish, so we're focusing on Irish, but it was meant to be trauma-informed practice".

Frustration also extended to the classroom settings where teachers felt the curriculum was inconducive in meeting their students' needs. T3 highlighted the lack of time in the curriculum that focused on wellbeing and building emotional

resilience. “You have half an hour to teach SPHE a week….I don't think any class in the school can manage it. I don't think any child in this country can. I think it's too important”.

For NEPS psychologists, there was an appreciation of the level of responsibility schools must hold in relation to trauma, that is not acknowledged at a systemic level. According to N2, schools are now expected to be “all things to all people”. He reflected on how schools are silently carrying the weight of addressing trauma in schools, often without acknowledgment or additional resources. In his own schools, he highlighted how they adapt their staff allocation to facilitate full time Nurture groups, they take on home responsibilities such as washing students’ uniforms, and they are now expected to schedule counselling sessions for students under the new DE’s counselling initiative.

In addition, N4 emphasised the lack of systemic recognition for teacher wellbeing and adequate supports for the emotional impact of trauma. She noted that compassion fatigue among school staff is frequent but often overlooked as a priority in attempts to address trauma in schools.

3.3.2.2. Resource Limitations. An overarching theme in this study was the lack of resources available to meet the needs of the school in the context of TIP. All schools in this study sacrificed their special education teachers (SET) resource to facilitate Nurture groups either on a full-time or part-time basis. Recognising this situation is less than ideal, schools had to alter their terminology for policy makers to justify having a Nurture teacher as an additional SET resource. For example, T2 stated that “if the inspector was to arrive to the door, we would say this is resource and try and justify it in another way”. Regardless of context, each school noted the overwhelming need for Nurture groups in their schools. T2 described it as the

“fastest working intervention I've seen in 20 years”. As such, each school in the study longed for greater staffing resources to continue meeting their school needs through Nurture.

Besides Nurture, T1 and P3 expressed a need for greater staff resources in their classrooms, noting that students are not coping with the current system in place. For example, P3 stated that “any child that has been affected by trauma…can't make the relationships….if we had more personnel even if we had a lower pupil teacher ratio or more SNAs, it's all about connecting with those kids”.

Further to this, schools wished for greater opportunities and funding for specialised professional development on trauma. Across the board, there was a consensus that professional development was essential to embed TIP into school culture. However, schools grappled to source funding for professional development noting that without DEIS funding, it is not possible. T1 described neighbouring schools without DEIS status struggling to fund professional development training.

> They’re fundraising to keep on the lights and the heating, we are too. But we also have the funding that it is available to us to use for certain things… If schools don't have that available to them, they just don't have it. And without the training, you're at nothing.

Both NEPS and school staff emphasised the limitations with the NEPS model of service. While schools valued the role of their NEPS psychologists, their time was significantly limited which in turn impacted their level of support to schools. T1 reported that “our NEPS psychologist is very supportive. But she's swamped...like that we only have so many days of NEPS support - there's only so much we can do”.

3.3.3 Tailoring Trauma-Informed Approaches to Individual School Needs

Teachers, principals and NEPS psychologists reported that effective implementation required individualising TIP to their school needs. This included being familiar with the wider school community, understanding the students, and being responsive to the needs of the school.

3.3.3.1 Being Familiar with Intergenerational Trauma. In facilitating TIP in primary school settings, being familiar with the wider school context was an important factor. This theme emerged in DEIS band 1 settings where intergenerational trauma was greater. For principals, there is a deep-rooted understanding of the trauma that exists in the community. Both principals form DEIS Band 1 schools referenced student trauma related to family suicide, community violence, addiction, parental separation, homelessness, and children witnessing violence. For example, P3 noted that; “we would be in one of the most disadvantaged places in Ireland…it's a very difficult place, trauma has always been a feature of this community”. From the perspective of principals in these school communities, this understanding lends itself to a more compassionate understanding and an extension of support to home contexts.

The importance of being familiar with intergenerational trauma extended to NEPS psychologists who often relied on knowledge from schools to align their approach with families. For example, N2 highlighted how the principal of the school had provided context of family dynamics of students referred for support to NEPS. As such, the psychologist took a more compassionate and flexible role supporting the family noting that “ I'm more willing to throw time and practical stuff at a case like this, cause again...it’s an intergenerational thing… I'll be softer in my approach”.

In a similar regard, long-standing employment in the school provided an ingrained knowledge of the intergenerational trauma for teachers. T2 felt that her familiarity with the families in the area "I've seen generations of the same family", led her to an emotional investment in supporting the wider school community.

This admiration was shared by N2, the NEPS psychologist, who felt that having school staff employed from the local area was invaluable for embedding TIP in the school. He felt that these schools were more “clued in” and equipped when dealing with trauma, compared to other schools with less intergenerational trauma and social disadvantage.

The deep-rooted knowledge and extensive experience of working in an area of intergenerational trauma is conducive to embodying TIP. Both principals in the study described several deeply traumatic circumstances with a matter-of-fact calmness. It is likely that their consistent and steadying presence in the school community plays a crucial role in supporting both students and families impacted by trauma.

While DEIS Band 1 participants reported more complex forms of trauma such as suicide, community violence, addiction, parental separation, homelessness, and children witnessing violence, trauma was not exclusive to these settings. The principal of the Educate Together school described a growing number of students arriving from war-torn countries, many of whom have experienced significant trauma during their journeys to Ireland. Similarly, in the DEIS rural school, participants reported increased anxiety among students post-COVID and the impact of parental separation. These findings highlight that, while intergenerational trauma was more pronounced in some contexts, an awareness of trauma in all school settings is critical for embedding TIP.

3.3.3.2. Understanding Students' Needs. Having an in-depth understanding of the students' needs was integral to implementing TIP in primary school settings. In this study, this understanding varied across professional domains. The understanding of teachers was grounded in first hand interactions with their students. For principals and NEPS psychologists, this understanding was indirect or systemic which relied on the knowledge of others or their own knowledge and experience supporting students who were impacted by trauma. The divergences in these roles led to divergences in how supports and interventions were individualised for these students.

From the perspective of teachers, each teacher in the study including the P1 who was a teaching principal, recounted personal experiences with their students that reflected a deep understanding of their needs. They shared how they encompassed the role of being the "one good adult", who was a consistent presence in their students' lives. This was best represented by T3 who shared her experience of getting to know each of her students on a personal level at the start of the year inspired her to adopt a more individualised classroom approach.

> I sat at the back of the room when one girl turned to me and said, "You're going to hate your life … we're an awful class." It broke my heart a little bit to see ten-year-olds with such a negative self-image. That was my big motivation to help them feel better about themselves and instil in them that they are worthy.

Overall, each teacher in the study valued having the freedom of their principal to individualise their approaches in the classroom. For example, T3 emphasised the importance of the principal in supporting her to prioritise building

relationships, relational safety and focusing on the emotional needs of the class over their academic needs.

In contrast to teachers, principals and psychologists focused on the broader structures and systems in determining what is best for the students. This was reflected through overseeing practices, advocating for supports, and assigning resources that was informed by indirect knowledge rather than direct familiarity with the student. For example, P3's understanding of the individual needs of the students was reflected in her active role in the school's Care Team. P3 described how the Care Team meet weekly to discuss and oversee individualise support for students at risk in the school.

In a similar regard, NEPS psychologists' indirect understanding of the students' needs enabled systemic working. This was reported from two of the four NEPS psychologist which shared a similar school context in DEIS band 1 settings. This theme did not emerge from NEPS psychologists supporting DEIS rural or non-DEIS schools. N3 recalled her work with two autistic, homeless students who were referred to NEPS regarding their behaviour in school. Before helping teachers implement strategies, she prioritised advocating for housing. Her expertise in trauma and the effects of unstable home environments allowed her to provide targeted support to address their needs.

N2 further highlighted the divergences that exist by NEPS psychologists, noting that in DEIS band 1 settings there is greater emphasis on understanding the needs of the students through interagency collaboration and providing greater systemic support, "It's not a natural thing that every case I would liaise with other professionals but for these schools, I'd be looking…is there someone involved like a

family support worker, EWO [education welfare officer] or home school liaison coordinator".

In this study, participants demonstrated a commitment to understanding their students through direct and indirect means to facilitate greater individualised support. On a micro level, teachers direct understanding of their students facilitated tailored support. Principals and NEPS psychologist worked at a macro-level, shaping the overall supports that indirectly benefited the child.

3.3.3.3. Being Responsive to School Needs. On a systematic level, being responsive to the needs of the school emerged an important factor for principals and NEPS psychologists in their role implementing TIP. For principals, there was a commitment to aligning TIP to meet their individual school contexts. P2 acknowledged that "everyone's school context is different, so everything that works there might not work here, and similarly, what works here might not work there".

This recognition offered valuable insights for P2 to adapt a new Nurture room to the individual school needs. In the process of setting up the Nurture room, P2 visited various other schools with an established Nurture room in place. It was important for him to visit different Nurture rooms in different school contexts to align it to his own.

There was also a commitment of all principals in the study to adopt TIP in response to the urgent need in their schools. Principals were required to be proactive in adapting their school resources to fit their needs. This ranged from rearranging staff to implement Nurture, sourcing specialised professional development for staff, and using school funding for specific trauma-informed initiatives. For example, P3 noted that, "I think we're ahead of NEPS. We just went and did it. If I was waiting for the DE to say yes, you can have a nurture room…I'd be waiting".

On a more systemic basis, NEPS psychologists valued the proactive role of the organisation in providing immediate responses to schools. This included providing online resources for schools in response to the influx of Ukrainian students to Ireland during the Ukrainian war. Another example included creating self-paced readily available professional development for schools on topics such as trauma. Despite these efforts, all NEPS psychologists in the study felt it was essential to tailor their work with schools in ways that were meaningful and impactful. This was often the case for professional development training, critical incident support or individual casework. N1 highlighted the importance of investing time in face-to-face consultations with teachers, “there's nothing that beats the kind of face-to-face contact with a team of teachers or a school…they really value that”.

From the perspective of NEPS psychologists in this study schools often lacked a clear understanding of the role of NEPS in supporting students impacted by trauma. Traditionally, the role of an educational psychologist in NEPS pertained to administering cognitive assessments to gain resources for students with additional educational needs. In 2017, the DE published the Special Education Allocation Circular 0013/2017 which gave rise to allocating resources for students with the greatest level of need (DES, 2017b). This ensured that children no longer required a confirmed diagnosis of a special educational need to receive support in school. The introduction of this circular thereby reduced the need for NEPS psychologist to conduct educational assessments and diagnose children with special educational needs. As such, schools had greater scope to utilise their NEPS casework service for consultative purposes. In this study, three NEPS psychologist reported difficulties shifting this perspective, noting that it distanced themselves from being a supportive role to schools in relation to TIP. For example, N3 highlighted how schools still

reject the use of consultation in their practice despite efforts to support the school, “schools want their assessments no matter what we say, no matter what happens”.

3.4 Discussion

The current study sought to answer the overarching research question, ‘what are the lived experiences of teachers, principals, and NEPS psychologists adopting TIP in their primary school settings?’. In order to answer this research question, two sub-questions were explored. In the following sections, each sub-question will be discussed.

3.4.1. Research Question 1: How are teachers, principals, and NEPS psychologists adopting TIP in their primary school settings?

Given the significant lack of research on TIP in the Irish education system, this study aimed to explore key personnel within the system and understand how they were adopting TIP into their primary school settings. As highlighted in previous literature, there is a significant lack of clearly defined, concrete guidelines to effectively adopt TIP in schools (Baker et al., 2016; Carter & Blanch, 2019; Maynard et al., 2019). Although frameworks like the SAMHSA principles offer general guidance, they require schools to adapt these principles to their unique contexts (SAMHSA, 2014).

While variances occurred in how TIP was adopted in each school setting, the roles of each participant group remained the same. In line with previous research, each school acknowledged the principal as the key contributor to embedding TIP into their school culture (Berger & Martin, 2020; Chafouleas et al., 2016; Cole, 2005; Stokes & Brunzell, 2019; Wassink-de Stigter et al., 2022). This was reflected at both policy and practice level. While systemic behaviour policies stipulate appropriate measures such as suspension for unacceptable behaviours in schools, one

principal in the study adapted their school's behaviour policy to reflect TIP and restorative practices as preventative approaches to addressing student behaviour. In practice, principals provided opportunities for knowledge sharing through team teaching and teacher observation days which is integral to embedding TIP in school culture (Chafouleas et al., 2016; Stokes & Brunzell, 2019). Recognising the student and school needs, all principals in this study also prioritised school funding and staffing resources to adopt TIP in their school settings.

In contrast, teachers embedded TIP into their daily practice with students, prioritising felt safety through building predictable and routine classroom environments e.g. morning meetings, providing opportunities for students to build and sustain relationships with peers and teachers (e.g. Nurture group activities) and building capacity for developing self-regulation skills (e.g. *The Zones of Regulation*, a social-emotional learning and regulation programme).These approaches were employed at the classroom level with all students as well as in smaller groups in the Nurture Group with students targeted for specific support.

The dearth of Irish based literature on TIP also extends to the role of NEPS psychologists. Within the Irish education system, the NEPS model of service includes a consultative casework service for students as well as a support and development service aimed at supporting school systems for school staff. However, findings from this study highlighted the ambiguity of the role of NEPS in supporting TIP in primary schools. Although the level of support for TIP was contingent on case referrals, all NEPS psychologists in this study viewed themselves as a valuable resource to schools in supporting them to become trauma aware. While teachers and principals reported that NEPS allocated time was limited, they highlighted them as a crucial support in adopting TIP. Throughout the literature on TIP, educational

psychologists are recognised as highly skilled professionals who are well positioned to serve the role in coaching schools adopt TIP through assessment, intervention, consultation and delivering professional development for school staff (Cameron, 2006; Eagle et al., 2015; Fitzgerald & Cohen, 2012; Perry & Daniels, 2016). Although the role of NEPS in supporting TIP in schools remains somewhat unclear, significant efforts have been made at both systemic and individual levels to advance the implementation of these practices. This study's findings highlight that NEPS psychologists not only recognise the importance of TIP for their schools but also actively advocate for taking on greater responsibility in helping their schools adopt and sustain TIP effectively.

In line with the study's inclusion criteria, Nurture played a significant role in how schools were adopting TIP. Although Nurture is not explicitly designed as a trauma-informed approach, it inherently incorporates principles of TIP that place emphasis on early intervention, understanding and recognising behaviours associated with trauma, and fostering relationships to mitigate adverse childhood experiences (Education Scotland, 2018). As such, Nurture has provided an evidence-base structure for which TIP can be implemented as part of a whole school approach in schools in Ireland. In this study, there was an overwhelming recognition that Nurture was essential to meet the needs of the students, with principals prioritising their funding for staff professional development, Nurture room resources as well as sacrificing staff to facilitate full-time and part-time Nurture groups. In some cases, the effectiveness of the Nurture group also extended to whole-class practices, highlighting its popularity in Irish primary school settings. In areas of greater social disadvantage such as DEIS band 1 school settings, participants recognised Nurture as a critical component in their school context, with N2 stating that "I don't how they

were living without them before" and T2 describing it as the "fastest working intervention I've seen in 20 years". Throughout the literature, Nurture groups have been shown to improve outcomes for students facing social, emotional, and behavioural challenges (Hughes & Schlosser, 2014; Sloan et al., 2020). This was reflected in both targeted Nurture groups and applying nurturing approaches at a whole-class level. In the vein of TIP, Nurture recognises that without secure attachments, children's abilities to soothe themselves, regulate their emotions and form relationships are significantly impacted resulting in a myriad of challenges (Linsell et al., 2019). As such, Nurture recognises that children without secure attachments are not regulated to engage with academic learning (Binnie & Allen, 2008; Cooper & Whitebread, 2007; MacKay et al., 2010; Reynolds et al., 2009; Sanders, 2007). Therefore, each school in this study advocated for greater systemic support from the DE to recognise the effectiveness of Nurture in meeting the social and emotional needs of students in line with their wellbeing policies.

It was evident in the findings that teachers and principals have a grounded contextualised understanding of their students and the specific needs of their school. In each school context in this study, TIP was adopted in response to these unique needs. This was particularly relevant in schools with greater levels of social disadvantage and intergenerational trauma, where TIP served as a critical response to these complex challenges. It is widely accepted that areas of greater social disadvantage experience higher levels of community violence and adversity (Coulton et al., 2007; Johnstone & Boyle, 2018). As such, children living in these communities are at a greater risk of experiencing trauma. Consequently, research highlights the need for the implementation of TIP to meet the unique needs, challenges, and resources of individual schools, communities, and student

populations (Chafouleas et al., 2021). Chafouleas et al. (2016) emphasised that TIP generally involves a decontextualised approach to trauma, where the social and cultural context of the school is ignored. In the absence of current systemic, top-down guidance, schools have independently sought to adapt TIP to their social context. While trauma-informed initiatives were piloted across the country, P2 noted that these efforts were largely decontextualised, as the Nurture Group Project was limited to Educate together schools serving higher socioeconomic communities. Moreover, N4 highlighted how the efforts made by NEPS to provide professional development webinars for schools on trauma dismissed the social contexts and intersectionality of trauma. This research emphasises the substantial efforts made by schools in socially disadvantaged areas to contextualise and adopt TIP to better address the needs of their students and communities. In efforts to progress TIP in the Irish education system, this research highlights the importance of providing schools with the adequate resources to enable a contextualised approach to TIP.

3.4.2. Research Question 2: What facilitators and barriers did teachers, principals, and NEPS psychologists face when adopting TIP in their primary school settings?

The importance of professional development was a recurrent theme in facilitating TIP in each school setting. In efforts to adopt TIP into their primary school settings, teachers, principals, and NEPS psychologists in this study reported an initial period of becoming trauma aware. According to Avery et al. (2022) and Wittich et al. (2020), professional development is recognised as the foundation for implementing TIP in schools. Delaney (2020) further reported professional development as a key contributor to developing trauma knowledge and understanding among teachers, special needs assistants, the school principal, and a

NEPS psychologist in an Irish DEIS band 2 school. Due to the significant absence of training in teacher training programmes on trauma, professional development was critical. This was consistent with previous literature noting the limited training on trauma and TIP in tertiary education (Barrett & Berger, 2021; Berger & Samuel, 2020; Berger, Bearsley, & Lever, 2021; Brunzell et al., 2018). While variances in the level of awareness among participants emerged, this study highlighted professional development as a critical factor in addressing these differences. Moreover, teachers and principals recognised the importance of professional development in fostering whole-school buy-in and changing staff mindsets towards TIP. This is consistent with previous literature, reported professional development as a key factor in achieving staff buy-in for TIP (Avery et al., 2022; Cole et al., 2013).

In this study, professional development also served to empower teachers to adopt TIP. Teachers play a key role in understanding their students' needs given their close proximity with them on a daily basis. In this study, each teacher took the lead in actively enrolling in different trauma-informed trainings, attending Nurture conferences, and collaborating with other schools in an effort to upskill and align trauma-informed teaching pedagogy to their meet their students' needs. Research suggests that active engagement with TIP through professional development promotes greater empowerment for teachers in their roles as professionals (Brunzell et al., 2019). This study further highlighted the importance of professional development in giving teachers the autonomy to align TIP to meet their students' needs, whilst also empowering them to do so.

Although the specifics of professional development in schools were not explored, schools placed significant value on the professional development they received in developing staff knowledge, fostering whole-school buy-in and

embedding TIP into their school culture. Each school in this study sourced professional development from training providers external to the DE. Consequently, schools recognised the significant cost associated with adopting TIP in their school settings. This study points to the broader inequalities faced by schools in getting accessible and affordable professional development in efforts to make their schools trauma-informed.

There was an overwhelming recognition from each participant of the positive impact TIP had on the students and school community. However, findings from this study highlight the significant barriers they faced that hindered effective implementation of TIP. While a myriad of barriers existed, lack of acknowledgement and support from the DE was the most significant. Frustration arose surrounding the failure of the DE to recognise and address the level of trauma that existed in schools. Participants expressed that the current initiatives in place such as the DEIS model are not adequate in meeting the needs of students and school communities, specifically in areas of greater social disadvantage. One principal in this study recounted several experiences of being dismissed by the DE in efforts to advocate for greater resourcing for DEIS band 1 schools. Frustration also emerged where despite the success of Nurture in each school context, it is not universally acknowledged or supported by the DE. As a result, schools were isolated in their journeys to TIP, relying on connections with other schools and ad hoc implementation practices of Nurture. Research suggests that effective implementation of TIP relies on structured frameworks and guidance (Avery et al., 2022; Chafouleas et al., 2016). In the absence of clear guidance from the DE, schools in Ireland are at risk of implementing Nurture in ways that it is not intended to be implemented. Despite

these concerns, the Irish education system has yet to determine a universal approach to adopting TIP in schools.

Moreover, schools criticised the lack of time and opportunity to implement TIP in their schools due to restraints of the school curriculum and school evaluation processes. Research suggests that effective implementation of TIP in schools requires strategic implementation planning, which is the process of defining, setting and reviewing goals (Wassink-de Stigter, et al., 2022). Coupled with the lack of funding and staff resourcing, each school in this study reported significant systemic barriers to implementing TIP in the schools.

Whilst TIP is slowly proliferating the Irish education system there is still great lengths to go in terms of systemic support. There was a consensus from all schools that Nurture was an effective support in adopting TIP in each of their school contexts. In line with previous research, integration of TIP into existing interventions and improvement plans enhance the implementation of TIP (Nadeem et al., 2011; Wassink-de Stigter, et al., 2022). This study highlights the potential for Nurture to be prioritised in the whole school evaluation (WSE) processes in efforts to progress TIP in Irish primary schools.

3.4.3. Conclusion

Given the widespread recognition and international attention of TIP in the field of education, research pertaining to the Irish education system is lacking. This study addressed this gap in the literature by exploring the first-hand experiences of teachers, principals, and NEPS psychologists in their role adopting TIP in Irish primary schools. Using multi-perspective IPA, this study highlighted the covariances and divergences in TIP across different primary school settings and professional domains. Findings from this study revealed that teachers, principals and NEPS

psychologists experienced TIP as a transformational journey in shaping school culture. This journey included becoming trauma-aware, fostering whole-school buy-in, and embedding TIP into school culture. They noted that effective implementation required individualising TIP to their school needs. This included being familiar with the wider school community, understanding the students, and being responsive to the needs of the school. In efforts to implement TIP into their primary school setting, participants were faced with several systemic barriers including limited acknowledgement and insufficient guidance at a systemic level which was further compounded by resource limitations. The strengths, limitations and implications of the current research for policy, practice and future research are outlined in the next chapter.

4 Critical Review and Impact Statement

4.1 Introduction

This chapter presents a forum for critical reflection on the research process. It begins with a reflection of the research paradigm, followed by Lincoln and Guba's (1986) critical evaluations of the qualitative research approach. The next section outlines the strengths and limitation of the study. Additionally, the implications for future policy, educational psychology practice and future research are discussed. The chapter concludes with a personal reflection of the research process and an impact statement of the research.

4.2 Research Paradigm

In this study, which explores the lived experiences of teachers, principals and NEPS psychologists adopting TIP in their different primary school settings, the interpretivist paradigm provides a foundational philosophical framework, shaping ontology, epistemology, axiology, and methodology (Guba & Lincoln, 2005).

4.2.1 Ontology

Ontology refers to the nature of reality. According to Crotty (1998), ontology is concerned with "what is", or the nature of being and reality, shaping how researchers understand the world they are studying. This study adopts a relative ontological approach, recognising that reality is multiple and socially constructed (Lincoln & Guba, 1985). Given the diverse professional roles and perspectives of teachers, principals, and NEPS psychologists, TIP is not experienced in a single or uniform way. Instead, each participant's understanding of TIP is shaped by their professional background and school context, meaning that there are multiple co-existing realities of implementing TIP.

4.2.2 Epistemology

Epistemology refers to the theory of knowledge (Mertens, 2015). This study adopts a subjective epistemology, assuming that knowledge is co-constructed though interpretation and interaction between the researcher and participants. The double hermeneutic process of IPA is central to the study (Smith et al., 2009). This process is where the researcher interprets how participants make sense of their own experiences. Moreover, TIP is a complex phenomenon, that is ambiguous and emotionally laden. As such, knowledge about TIP cannot be objectively measured but rather understood through the lived experiences of those involved in implementing TIP in their different school settings. This study, therefore, does not seek universal truths but rather situated insights into how TIP is implemented and perceived across different professional domains and school settings.

4.2.3 Axiology

Axiology focuses on the researcher's understanding of values and their role in the research. The interpretivist paradigm assumes that the knowledge that is created by the findings can be value-laden and thus need to be made explicit (Lincoln & Guba, 1985; Morgan, 2007). As such, the researcher's background, beliefs and reflexivity play an important role in shaping interpretations of the data. Throughout the research process, the researcher engaged in reflective practice by reflecting on their thoughts, feelings and interpretations of the data in a reflective journal. They also outlined their positionality in the research as a trainee educational psychologist discussed in Chapter 1.

4.2.4 Methodology

4.2.4.1. Interpretative Phenomenological Analysis. IPA was chosen as the methodology for this study. The aim of this study was to explore the lived

experiences of teachers, principals and NEPS psychologists in their roles adopting TIP in their school settings. The focus of IPA is to understand people's lived experience and how they make sense of it in the context of their personal and social worlds (Smith et al., 2009). As such, IPA was an appropriate methodology to answer the research question.

According to Smith and Osborn, (2015), IPA is a useful methodology for examining phenomena which are complex, ambiguous and emotionally laden. Discussing one's lived experiences of supporting students impacted by trauma can be an emotive experience that can often result in secondary traumatic stress or vicarious trauma (Christian-Brandt et al., 2020; Diehm et al., 2019; Hydon et al., 2015). Therefore, IPA was deemed as the most suitable methodology to capture these experiences. IPA is also explicitly idiographic meaning that it examines the detailed experiences of each case before drawing more general claims, allowing for detailed and nuanced findings. Given the inherent complexity and challenges associated with the adoption of TIP, IPA was considered the most appropriate methodology. This approach provided participants with the necessary space to engage in a thoughtful discussion of their unique lived experiences.

Furthermore, IPA is recognised as a useful methodology to explore an under-researched topic or phenomenon (Reid et al., 2005). Given the recent international attention to TIP in educational settings, and more recently into the Irish context, IPA was chosen to explore the lived experiences of those implementing TIP as a new phenomenon.

4.2.4.2. Alternative Methodological Considerations. A multi-case study methodology was considered as an alternative approach to the research prior to choosing IPA. This approach is aimed at investigating "contemporary phenomenon

within its real-life context, especially when the boundaries between phenomenon and context are not clearly evident" (Yin, 2009, p. 18). While it would consider an in-depth understanding of the how different primary school settings were implementing TIP, it would not consider the subjective lived experiences regarding the same. IPA provides greater scope to explore how teachers, principals and NEPS psychologists personally experience and make sense of implementing TIP in their school settings.

Moreover, IPA allows for a multi-perspective approach, where multiple experiences can be explored from multiple participants while still maintaining an idiographic focus (Larkin et al., 2006). In contrast, multi-case study research integrates multiple perspectives of participants, but often through a more systemic lens rather than the in-depth personal sense making.

Additionally, IPA's idiographic approach involves conducting an in-depth analysis of each participants' individual experiences, often through semi-structured interview, before generating common themes. Case study methodology often synthesises multiple data sources such as observations, interviews, documents and archival records (Easterbrook et al., 2008) to generate an in-depth analysis of a system or, in this case, a school, rather than the nuanced personal experiences of participants implementing TIP.

Furthermore, TIP recognises the impact of trauma on professionals such as teachers, principals and NEPS psychologists. IPA can uncover how these professionals emotionally process the facilitators, barriers, and impact of adopting TIP. Case study research would focus more on the organisational policies, structures, and outcomes of TIP rather than the lived experiences of participants implementing TIP. As such, IPA was chosen as the most appropriate methodology to answer the research questions as it aimed to explore the lived experiences of teachers,

principals, and NEPS psychologists implementing TIP and how they made sense of these experiences. A multi-case study methodology would be more appropriate for exploring the organisational factors associated with how TIP is implemented in primary school settings.

4.3 Critical Evaluation of the Study

To conduct a thorough critical evaluation of the study, the researcher utilised Lincoln and Guba's (1986) framework, which serves as a foundational method for assessing the trustworthiness of qualitative research. This framework provides a systematic method for ensuring the credibility, transferability, dependability, and confirmability of the research findings, thereby enhancing the overall rigor of the research process.

4.3.1 Credibility

Credibility is obtained when the findings represent an accurate description of the participants' experiences (Guba & Lincoln, 1985). Guba and Lincoln (1985) promote the use of member checking and peer debriefing to ensure credibility. However, IPA cautions against the use of these methods as IPA focuses on the researcher's interpretation of experience and not as an objective 'truth' (Larkin & Thompson, 2012; Smith et al., 2009). Instead, the researcher focused on transparency and coherence. This included sharing coding procedures, themes and participant quotes with research supervisors and a fellow student on the DECPsy course. This process ensured that interpretation of the data was logical and transparent for the reader as well as promoting the researcher's reflexibility regarding such interpretations.

To ensure credibility, the researcher also engaged in prolonged engagement with the participants and the research. During data collection, the researcher spent a

considerable amount of time with the participant. This ranged from 30 to 60 minutes with each participant. This process allowed the researcher to develop rapport and trust with the participant which subsequently facilitated understanding and co-construction of meaning between the researcher and the participants. Moreover, the researcher also had the opportunity to fully immerse themselves in the school culture and context by conducting some of the semi-structured interviews in the school setting. The researcher had the opportunity to tour the school and explore the Nurture room in two of the school settings.

Triangulation was also utilised in this study. This included triangulation of sources by comparing participants with different viewpoints. This approach was two-fold. Firstly, it enabled an in-depth exploration of the lived experiences of those implementing TIP in a specific school context, whereby teachers, principals and NEPS psychologists were recruited from the same school. Secondly, it ensured a broader understanding of these experiences by gathering insights from teachers, principals, and NEPS psychologists across multiple school contexts.

4.3.2 Transferability

In qualitative data, while generalisability is not the goal of IPA due to its idiographic focus, thick description allows readers to assess whether findings might be relevant or transferable to their own experiences or settings. Thick descriptions involve detailed, contextualised accounts of participants' lived experiences, going beyond just reporting facts to capturing the depth of meaning, emotions, and social contexts surrounding those experiences (Geertz, 1973). In this study, the researcher provided a rich account of descriptive data from each participant such as their individual school context (DEIS band 1, DEIS rural, or a non DEIS school), their role in the school implementing TIP, and the years' experience in the role. This

approach enables the reader to assess whether the findings are relevant to similar populations. Additionally, this study utilised verbatim quotes from each participant to allow the reader to see how interpretations were formed as well as grounding the analysis in the participant's voices rather than just the researcher's interpretation. Describing each school context was also important as it ensured that the readers could understand the social conditions that may influence the research findings. Moreover, thick descriptions involve layered interpretations in line with the double hermeneutic process in IPA. The research findings provided an account of the researcher making sense of the participants making sense of TIP. The researcher also provided an exert of N4's transcript and data analysis process to allow readers to make judgements regarding the transferability of this research to another context or population (Lincoln & Guba, 1985).

4.3.3 Dependability

Dependability refers to the auditability of the qualitative findings (Guba & Lincoln, 1989). In this study, the researcher provided a clear presentation of an audit trail of the data analysis process. Appendices M and N provide a detailed account of this process, utilising colour coding and personal codes to illustrate for each participant's personal experiential themes (PETs) could be traced through to the final overarching themes. In addition, the researcher kept a research journal that documented any changes in the research process, as well as their observations, field notes, and reflections throughout the research process (Smith et al., 2021).

4.3.4 Confirmability

Confirmability refers to the extent to which findings are shaped by participants' experiences rather than researcher bias, motivation, or interests (Lincoln & Guba, 1985). IPA research involves the subjective experiences and interpretation

of data. As such, ensuring confirmability is imperative to demonstrate that the findings remain rooted in the data. In efforts to ensure confirmability, the researcher provided an audit trail of the data and a reflective journal. Moreover, the researcher included verbatim quotes alongside interpretations in the research findings to ensure that the findings were rooted in the participants voices rather than the researcher's assumptions. The researcher also discussed interpretations with their research supervisors to ensure a balanced perspective of the findings.

4.4 Strengths of the Research

4.4.1 Multiple Perspectives

This study adopted a multi-perspective research design as it sought to explore the lived experiences of key personnel adopting TIP in the Irish education system. A triad of participants from each school, including the principal, teacher and NEPS psychologist ensured there was triangulation of perspectives of TIP in each school context. Moreover, the systemic literature review that was carried out in conjunction with this study included only one study with perspectives from all three professions in their role implementing TIP (Avery et al., 2022). The incorporation of all three perspectives in this study resulted in a comprehensive and nuanced examination of the experiences of key personnel adopting TIP in the Irish education system.

4.4.2 Distinctive Contribution

As outlined in the systematic literature review, this study attempted to address the gaps in the literature regarding TIP in the Irish school context. To the researchers knowledge, this was the first study exploring the lived experiences of teachers, principals and NEPS psychologists in their role implementing TIP. While previous studies in the Irish context focused their research on DEIS Band 2 schools (Delaney, 2020), this current study incorporated the lived experiences of participants

from a range of different school contexts including DEIS rural schools, DEIS band 1 schools and an Educate Together school without DEIS status. This study also uncovered the experiences of NEPS psychologists in their role supporting schools with TIP. Until now, there has been significant ambiguity regarding the role of NEPS psychologists in supporting schools adopt TIP. To the researchers knowledge, there has only been one study involving the NEPS psychologist which was carried out by Delaney (2020) with one NEPS psychologist participant. The current study expanded on this knowledge gaining perspectives of multiple NEPS psychologists supporting schools adopt TIP across a variety of school contexts.

4.5 Limitations of the Research

While there was a multitude of strengths associated with the research, a number of limitations must also be acknowledged. This included participant recruitment and sampling methods, absence of a pilot interview, the inclusion criteria for schools adopting TIP, and data collection methods.

4.5.1 Participant Recruitment and Sampling

The researcher demonstrated significant persistence recruiting participants for the study. The prerequisites of ethics for this study stipulated that recruitment of teachers and NEPS psychologists must be recruited through the school principal. The researcher contacted over seventy different principals to recruit a total of 12 participants from four different schools. The limitations of this recruitment process meant that the school principal acted as a gatekeeper to recruiting participants. The researcher demonstrated precautions to avoid coercion among potential teacher and NEPS psychologists to participate in the study, as well as maintaining confidentiality and anonymity throughout the data collection process. However, the nature of the multi-perspective design meant that participants were known to each other through

their connection with the school principal. As such, this connection may have hindered the participants ability to comment freely on their experiences of implementing TIP in their school.

Moreover, the use of purposeful sampling was employed in this study. While this is often recognised as a limitation in research, it is acknowledged as a feature of IPA research. IPA research relies on samples that can provide an in-depth account of the lived experiences of those regarding a specific phenomenon (Smith & Nizza, 2022). As such, purposeful sampling is necessary to identify a closely defined group of people for whom the experience has been particularly meaningful (Smith et al., 2009). In light of this approach, there was a number of schools that could not be recruited as there are many schools in Ireland without access to a NEPS psychologist. During the recruitment process, several schools expressed interest in the study, however their involvement was ultimately discontinued due to absence of an assigned NEPS psychologist. This limitation meant that only schools with an assigned NEPS psychologist could participate.

The multi-perspective design also impacted the number of participants in the study. While 12 participants were recruited which is over the recommendation for an IPA study (Clarke, 2010; Turpin et al., 1997), the multi-perspective design meant that only four participants from each profession were represented. Therefore, this small sample size may be considered as a limitation of the study. However, the epistemological position of IPA does not strive for generalisability of findings, but rather idiography (Smith et al., 2022). The impact of the small number of participants was two-fold. It provided a rich account of the experiences of TIP within a particular profession as well as the experiences of TIP within a specific school context. Consequently, in qualitative research, there is a greater focus on

transferability of findings rather than generalisability. Section 4.3.2. delineates the extensive measures undertaken by the researcher to enhance the transferability of the study's findings.

Additionally, there was a potential for self-selection bias in the study. Principals may have expressed interest in the study on behalf of teachers and NEPS psychologists as they were passionate about TIP. However, TIP is still a relatively new concept in the Irish education system. There is currently no guidance from the DE on how to adopt it in schools. Hence, schools implementing TIP are forced to adopt TIP in response to the needs of their students and have gone to great lengths to immerse themselves in TIP. Consequently, schools implementing TIP were naturally interested in this research topic. However, findings from the research were consistent with previous literature indicating that self-selection bias did not compromise the integrity of the study.

Furthermore, this research aim to explore TIP in Irish primary school settings. While it included key personnel involved in the education system, such as teachers, principals, and NEPS psychologists, it did not incorporate the perspectives of other important stakeholders, including children, parents, and other school staff e.g., home school liaison officers, special education teachers, or special needs assistants. Further research including these key perspectives would provide greater insight into the implementation of TIP in Irish primary school settings.

4.5.2 Pilot Study

The challenges associated with recruitment also impeded opportunities to engage in a pilot study. The researcher contacted a number of schools to participant in the pilot study however, the length of time of recruit all three participants including the teacher, principal and NEPS psychologist did not materialise.

Additionally, some schools did not have access to a NEPS psychologist. Consequently, the researcher decided to conduct internal testing by collaborating with their research supervisors to evaluate and refine the semi-structured interview guide (Barriball & While, 1994; Chenail, 2011). Further information on this process in outlined in Appendix H.

4.5.3 Inclusion Criteria

The inclusion criteria for the study stipulated that a school implementing TIP was a school that had engaged in professional development related to TIP and they had a Nurture group in place, either independently, or as part of the Educate Together Nurture Schools Programme. While Nurture is not explicitly a trauma-informed approach, it shares many components with TIP (Education Scotland, 2018; Nolan et al., 2021). Therefore, many schools in Ireland have adopted Nurture groups as a means to support students impacted by trauma. Given the absence of comprehensive guidance or trauma-informed framework within the Irish education system, along with the growing popularity of Nurture groups in Ireland, Nurture has become the most consistent approach employed by schools adopting TIP. To the researchers knowledge, there were no other consistent means to identity schools that were adopting TIP. As such, Nurture groups were utilised to provide greater scope for participation in this exploratory study.

4.5.4 Data Collection Methods

To accommodate participants, semi-structured interviews were conducted both online and in person in the school setting. During school-based data collection, the researcher also had the opportunity to tour two of the schools, which allowed for deeper immersion in the school culture and context. However, this may be considered a limitation, as the researcher only visited two of the four schools in

person, potentially resulting in an uneven depth of contextual understanding across the different school settings.

4.6 Study Implications

4.6.1 Implications for Educational Policy

This study illustrates the importance of placing TIP at the centre of Irish educational policy. To date, TIP has been implemented across a handful of services in Ireland, notably the mental health and judicial systems. However, there remains an absence of a formal educational policy that explicitly addresses childhood trauma and adversity. Nonetheless, there is an increasing movement within the education system to recognise and implement TIP to better support affected students.

In recent years, Nurture groups have evolved as trauma-informed approaches in Irish schools. The Educate Together Nurture Schools Programme significantly contributed to the proliferation of Nurture groups as effective trauma-informed approaches. The same was illustrated in this study whereby principals sacrificed staffing and funding resources to facilitate Nurture groups in each of their schools. Findings from this study advocate for the DE to fully embrace Nurture as an evidenced based intervention within a whole-school approach to TIP. While it may be advantageous to introduce TIP in its optimal form, as outlined by the SAMHSA framework (2014), it is critical to acknowledge that Nurture has already established itself as a viable trauma-informed approach within the Irish educational context. To implement Nurture groups effectively, schools will require substantial resources and a thoughtful reallocation of existing resources. One principal articulated that the request to the DE is not to “re-invent the wheel”, but rather for the provision of support for an initiative that is already operational and has demonstrated efficacy.

Regardless of the growing popularity of Nurture in Irish schools, neither the DE nor NEPS currently have a professional stance on Nurture. While the reasons for this are currently unknown, a lack of Irish based research, unclear funding and resource constraints within the DE and NEPS may be contributing factors. Presently, schools in Ireland are establishing Nurture groups without formal guidance from the DE. This situation raises the question of whether the DE should respond to the needs of schools by developing a national implementation plan for Nurture groups. Without such guidance, schools risk implementing Nurture in unintended ways, which may lead to compromised procedures that fail to provide the necessary support. This, in turn, could undermine the overall effectiveness of Nurture groups.

Additionally, anecdotal evidence suggests that some schools in Ireland are creating Nurture groups that do not meet the required criteria and lack the necessary professional development for effective implementation. In the absence of a top-down framework, there are no consequences for these deviations, raising concerns about accountability and the equitable delivery of Nurture groups in various primary school settings in Ireland.

A similar scenario was observed in the Irish education system with Aistear which was the curriculum framework for early childhood education. In 2009, the National Council for Curriculum and Assessment (NCCA) of the DE failed to introduce Aistear without a clear implementation plan, leaving schools and early childhood settings to integrate it on their own (Mannion, 2019; Walshe, 2024; Woods et al., 2021). There was also no legal mandate for its adoption so its implementation varied significantly across different school settings. Without specific guidance and support from the DE, Nurture could follow a similar trajectory.

Similar to the Scottish and Northern Irish educational contexts, this research advocates for the DE to recognise Nurture within its educational policies. Like the UK, Ireland have recently prioritised wellbeing promotion in their educational policies. The '*Wellbeing Policy Statement and Framework for Practice: 2018-2023'* (DES, 2019) was developed to issue all schools in Ireland with a vision to embed a school self-evaluation wellbeing promotion process by 2025. Although the emphasises is on wellbeing promotion, this framework is well aligned with the needs of students impacted by trauma as it emphasises the importance of safe environments that promote a sense of belonging, social and emotional learning and prioritising student mental health. Nurture groups have been recognised within this framework as a means to create safe environments for children with additional and/or complex needs. However, it provides no guidance to implement such practices. Therefore, embedding Nurture groups more explicitly within the framework could further improve outcomes for students impacted by trauma. It is advised that such policy follow best practice guidelines such as the SAMHSA's (2014) guiding principles. By building on the existing framework, Ireland's education system can better address the complex and long-term needs of children facing adversity.

Moreover, this research points to the broader social inequalities that exist in school communities. Three of the four schools in this study had DEIS status. The DEIS model is a government initiative that is explicitly designed to address and prioritise the educational needs of students from disadvantaged communities by allocating additional supports and resources (DES, 2017a). Of note, such supports and resources vary depending on the level of social disadvantage in the school community. This study sheds light on the ineffectiveness of the DEIS model for certain communities with greater levels of need. While extra funding and additional

staffing have been instrumental in adopting TIP, it remains insufficient. To reiterate this point, the Irish National Teachers' Organisation (INTO) partnered with the OECD in 2023 to issue a report regarding the equity of the Irish education system. It emphasised the need for greater improvements to the DEIS model, including extending the in-school counselling pilot programme and the school inclusion project to all DEIS schools and providing well-resourced nurture rooms in these schools. While the in-schools counselling project was identified as an area of need, it is currently limited to six counselling sessions for students which is insufficient to support the therapeutic needs of students in schools of greater disadvantage. However, all schools in this study advocated for greater staffing resources and professional development to facilitate their Nurture groups. This research calls for greater resources to deliver Nurture groups, specifically in schools with greater social disadvantage. Each school in this study highlighted the effectiveness of Nurture groups in meeting the needs of their most vulnerable students. With greater resourcing, the DE has the capacity to expand and enhance these supports nationwide, ensuring every child, regardless of where they live, can reach their potential.

These advances in polices must also consider the importance of delivering accessible and evidenced-based professional development for school staff on trauma. Such professional development is instrumental in the implementation of TIP in schools (Avery et al., 2022; Wittich et al., 2020). While schools in this study were recruited based on their adoption of TIP, there are many schools around the country that have yet to acknowledge trauma. In 2022, the Minister for Children, Equality, Disability, Integration and Youth (DCEDIY) launched a public consultation to inform the next Government policy framework for children and young people in

Ireland which will run from 2023-2028 and stipulated that staff professional development including on trauma and ACEs must be a priority for schools (Herron et al., 2022). They also advocated for the need for trauma-informed services in Ireland for children (Herron et al., 2022). As such, TIP is necessary for all schools whether instances of trauma are known. One cannot assume that a child is experiencing trauma based on their presentation or behaviour in school. Without knowledge of trauma, students can be misunderstood in terms of presenting with learning difficulties, behaviour that challenges or mental health difficulties, resulting in inadequate means to support them, including punitive disciplinary measures (Chafouleas et al., 2016; Thomas et al., 2019).

This study also highlights the existing inequalities in access to professional development across school contexts. Participants from DEIS schools reported prioritising their DEIS funding for staff professional development on trauma and Nurture initiatives. However, schools without access to this funding were disadvantaged, underscoring the inequities that persist in accessing essential staff professional development. Although children in areas of greater social disadvantage are at risk for experiencing trauma and adversity, it is widely known that trauma can exist in every community. As such, it is necessary that all school staff are educated on trauma, regardless of school context.

In line with these findings, the study highlights the need for greater cultural and contextualised understanding of trauma in professional development training (Gherardi et al., 2020). Such training should not only address the individual experiences of trauma but also provide an understanding of the broader societal causes of trauma and adversity (Boylan, 2021). This dual focus ensures that school staff can better recognise how factors such as poverty, community violence,

discrimination, racism and social class can contribute to trauma. According to Gherardi et al. (2020, p.492), schools adopting TIP must "reattribute responsibility for the outcomes associated with social marginalization from the victims to the systems". This reattribution requires schools to move away from a deficit-based approach, where students are seen as the sole problem, and instead place accountability on the systemic barriers and inequalities that perpetuate adversity. By integrating this awareness into professional development, schools can more effectively foster equitable, inclusive, and supportive learning environments.

Moreover, this study points to the lack of trauma awareness in the current teacher training programmes in Ireland. Research suggests that initial teacher training programmes can play a significant role in supporting teachers identity and respond to students affected by trauma (Brown et al., 2020; Foreman & Bates, 2021; L'estrange & Howard, 2022; Rodger et al., 2020). Embedding trauma awareness into these programmes not only empowers teachers to feel more confident and equipped to address the complex needs of their students but also contributes to improved outcomes for students affected by trauma. Providing new generations of teachers with the foundational knowledge of trauma can facilitate greater opportunities for schools to streamline their in-service professional development to embedding TIP.

4.6.2 Implications for Educational Psychology Practice

Findings from this study highlight the potential NEPS psychologists have in supporting schools implement TIP. A multi-tiered approach is recommended as the most effective means to adopt TIP in school settings (Chafouleas et al., 2016; Dorado et al., 2016; NCTSN, 2017; Overstreet & Chafouleas, 2016; Wiest-Stevenson & Lee, 2016). This approach provides a framework for early intervention

and ongoing, data driven evaluation of progress and response (Chafouleas et al., 2016). In the Irish education system, the NEPS model of service is based on a consultative problem-solving framework using the continuum of support, which is referred to internationally as a multi-tiered approach. As such, NEPS are well-positioned to support schools in implementing TIP through various approaches along their continuum of support. Ormiston et al. (2020) highlights the potential educational psychologists have in developing effective multi-tiered support for TIP including data-based decision making, implementation fidelity, and system problem solving. Moreover, they can support schools to identify trauma impacted students by administering school wide trauma screeners (Fitzgerald & Cohen, 2012; Jaycox et al., 2012). In addition, educational psychologists can utilise their consultation skills to provide teachers with guidance and support during intervention implementation, increasing the sustainability and feasibility of these practices (Han & Weiss, 2005; Reinbergs & Fefer, 2018).

Additionally, NEPS provides a Support and Development Service to help enhance school systems, to maximise a whole-school approach to creating school environments that are inclusive, flexible and responsive to the needs of all and to build school capability to provide evidence-informed prevention and early intervention support as part of the Continuum of Support framework (DES, 2010). Consistent with the literature, this service can be utilised to develop whole-school awareness of trauma through in-service professional development and consultation with teachers (Eagle et al., 2015; Fitzgerald & Cohen, 2012; von der Embse et al., 2018). Delaney (2020) noted the potential for NEPS to adopt a trauma-informed training package into their core training initiatives similar to existing whole-school programmes including *FRIENDS for Life* and *Incredible Years*. The findings of this

current study reinforce the need to enhance NEPS' capacity to implement such initiatives.

Furthermore, NEPS can play a key role in advocating for systemic change at a policy level, ensuring that TIP is embedded within the Irish education system. NEPS psychologists work in close partnership with policy makers in the DE. This study advocates for NEPS to take a proactive role in influencing national policies to better support trauma impacted students.

This study also shed light on the need to upskill NEPS psychologists in TIP. One psychologist in this study emphasised personal comfort levels in supporting schools with trauma-impacted students. As the role of educational psychologists continues to evolve, they are increasingly required to support children with complex needs that were traditionally within the domain of clinical psychology. This shift highlights the growing necessity for professional development to ensure they can effectively address the multifaceted challenges faced by students. Existing research emphasises the importance of professional development in fostering professional competence among educational psychologists (Neimeyer et al., 2012). Given the increasing prevalence of trauma-related difficulties and the recognition of TIP as an effective approach, it is essential that NEPS psychologists engage in ongoing professional development.

4.6.3 Implications for Future Research

Given the recent introduction of TIP in the Irish education system, this study sought to explore the lived experiences of key personnel involved in the Irish education system, namely teachers, principals, and NEPS psychologists. While each school provided anecdotal evidence for the effectiveness of TIP in their school settings, greater empirical knowledge is warranted to explore the effectiveness of

TIP in the Irish education system. Current research on the effectiveness of TIP in supporting students affected by trauma is still in its infancy globally. However, it is important to note that there is a paucity of research specifically addressing this issue within the Irish context. In the absence of specific guidance or established frameworks for TIP within the Irish educational landscape, numerous schools have implemented Nurture groups to support students who have experienced trauma. Consequently, there is a pressing need for future research to evaluate the efficacy of Nurture groups in Irish primary schools. Although Nurture groups were not explicitly designed as a trauma-informed framework, their underlying principles are closely aligned with those of TIP. Therefore, they have been utilised to support students adversely affected by trauma in the Irish educational context. Considering this, it is essential for future research to investigate the effectiveness of Nurture groups in Irish primary schools in addressing the needs of students impacted by trauma.

Moreover, this study was exploratory by nature as it explored how four different primary schools were adopting TIP in their school settings. Further research is warranted to expand on this study and explore how a greater number of primary schools, as well as secondary schools are adopting TIP in Ireland.

Additionally, future research is warranted to explore how schools are implementing TIP across a multi-tiered system of support. The literature underscores the effectiveness of a multi-tiered whole-school approach to TIP (Chafouleas et al., 2016; Dorado et al., 2016; NCTSN, 2017; Overstreet & Chafouleas, 2016; Wiest-Stevenson & Lee, 2016). In Ireland, schools work along a Continuum of Support (DES, 2010) which is a multi-tiered system of support. It provides a framework to identify the support needs of students at a universal level (support for all), targeted

groups (support for some), and at an individual level (support for few). Future research is warranted to explore the implementation of TIP at each level in the Irish education system. Therefore, it would provide a greater understanding of how TIP is implemented in the Irish education system.

The SAMHA (2014) implementation guidance for TIP is widely recognised in systems and organisations worldwide that adopt TIP. However, in light of the recent emergence of TIP within the Irish education system, the DE has yet to establish comprehensive guidance for its implementation or to formally endorse the SAMHSA (2014) framework. Given this absence of official direction from the DE, it is imperative that future research investigates the application of TIP within the Irish educational context, utilising the SAMHSA (2014) implementation guidance as a framework for analysis.

4.7 Impact Statement

Over the past two decades, TIP has garnered international attention in the realm of education. In recent years, the Irish education system have adapted to these developments and have implemented TIP into their school settings. This study contributed to the limited literature pertaining to TIP in the Irish context. This study was the first of its kind to explore the lived experiences of key personnel involved in implementing TIP in Irish primary schools. While trauma and TIP may be considered the new trend in education, this study highlighted the significant impact of trauma on school communities. It highlighted that trauma is not a new phenomenon, but rather something that is consistent across all communities. It emphasised the impact of trauma in areas of greater social disadvantage such as DEIS school settings, as well as areas of less social deprivation including DEIS rural or non-DEIS school settings. While divergences existed across different social

contexts, this study pointed to the importance of placing TIP at the centre of Irish education policy and practice.

Findings from this study contributed to literature regarding Nurture groups as an effective trauma-informed approach in Irish schools. Similar to the Scottish context, Nurture groups have evolved as an established trauma-informed approach in Irish school settings. However, the difference between the Scottish and Irish contexts is that the DE has no guiding framework despite its popularity within Irish schools. This study advocates for the DE to fully embrace Nurture in its entirety by firstly conducting research on the aforementioned areas and subsequently adapt this knowledge to existing educational policies and implement it as a national trauma-informed approach in schools.

Moreover, this study directly impacts NEPS. This study outlined the potential for NEPS psychologists to play a key role in supporting schools to adopt TIP. Until now, the role of NEPS psychologists in supporting schools to adopt TIP was unclear. While caution must be taken to as findings are transferable rather than generalisable, this study points to the valuable role of NEPS in supporting schools adopt TIP into their individual school settings, whilst taking into consideration the individual school context.

In efforts to disseminate these findings, it is envisaged that the researcher will publish these novel findings in peer-reviewed educational psychology journals such as '*Irish Educational Studies'*, '*Journal of Educational Psychology'*, and the '*The International Journal of Nurture in Education'.* Moreover, the researcher previously presented the findings of the systematic literature review at the Psychology Society of Ireland (PSI) Conference in November 2024. The researcher intends to further disseminate the findings of the empirical paper at related conferences such as the

2025 PSI Conference and the Nurture Ireland Conference. Additionally, the researcher will present their thesis research to students on the DECPsy programme in Mary Immaculate College in the upcoming Research Summer School. Furthermore, after the researcher has graduated from the DECPsy programme, they intend to take up employment with the NEPS. The researcher envisages taking a lead role in the development of TIP within the organisation by developing and actively participating in a working group dedicated to TIP.

4.8 Personal Reflection on the Research Process

This research spanned over a three-year period as part of my Professional Doctorate in Educational and Child Psychology. This process also coincided with professional placements in educational and child psychology services. Naturally, this was a personal journey of self-development where I developed my skills as a critical researcher alongside my development as an Educational and Child Psychologist. Rolfe et al.'s (2001) reflective model was used as a method to reflect on my experiences throughout this process.

4.8.1 What?

Reflecting on the journey of undertaking my doctoral thesis, I recognise the number of trials and achievements that have been invaluable to my professional aspirations as both an educational and child psychologist and academic researcher.

I was initially drawn to this area of research after dedicating several years to working within addiction, homelessness, and disability settings, offering support to clients who have endured significant levels of trauma. During the course of this work, I recognised the importance of viewing behaviour through a trauma-informed lens and providing the necessary support to clients using this approach. As such, I became enthusiastic about undertaking research that underscored the importance of

placing TIP as a foundational and valued component of the educational landscape in Irish schools.

In efforts to fulfil this commitment, I was surprised by the significant challenges posed at the recruitment stage of the research. Whilst I was eager to recruit a number of schools that I previously engaged with or had an interest in pursuing, this was not the case. The ethics board stipulated that recruitment of all participants must go through the school principal. This acted as a barrier for recruitment as I could not recruit the schools I had intended to include in the study. Nevertheless, this challenge compelled me to become persistent in my participant recruitment. I went to great lengths over a period of ten months to secure 12 participants from a range of professions and school backgrounds.

4.8.2 So What?

While I acknowledge that challenges with recruitment are inevitable in the role of research, it allowed me to reflect on the broader system for schools and educational policy. Many schools I contacted did not have access to a NEPS psychologist. Some teaching colleagues that were passionate about TIP were not recruited as the principal did not express interest in the study. Additionally, some schools that were interested could not take part as they did not have the necessary funding for a Nurture group or professional development on TIP which was part of the inclusion criteria of the study. After months of persistent recruitment, I understood that principal leadership and inclusive educational policy that provided access to sufficient resources was integral to schools implementing TIP. Despite this realisation, I was deeply surprised by the schools who took part in the study. Each principal in the study spoke at length about the significant level of trauma in their schools. They shared how engaging in doctoral research would bring this knowledge

to the fore of Irish educational research in hopes of advocating for changes in policy, practices and greater funding.

Throughout the data collection process, I was deeply struck by the commitment of schools in addressing the needs of their students. Naturally, sentiments from NEPS psychologists were more removed given their distance in support for children impacted by trauma. Nevertheless, they equally shared the same admiration for schools regarding their commitment to their trauma affected students.

4.8.3 Now What?

In light of these reflections, I hope to give a voice to these schools in supporting students deeply affected by trauma. I no longer believe that trauma is confined to areas of greater social disadvantage, but rather it is prevalent in every school context. I learned that schools were tirelessly advocating for institutional backing however they were met with significant resistance. I also learned that on an organisational level, NEPS are supporting schools to become trauma aware by developing webinars for school staff on trauma. On an individual level, I learned that the NEPS psychologists in this study were in their own way supporting schools to become more trauma informed. They achieved this through their daily practice in consultation with teachers, challenging assumptions, reframing student behaviour, advocating for services and engaging with families in ways that prioritised their needs.

This research allowed me to critically self-reflect on the type of educational and child psychologist I aspire to be. Throughout the research process, I also engaged in a 120-day professional placement with NEPS as a trainee educational and child psychologist. This experience enabled me to envision myself as an advocate for schools. It reinforced my commitment to promoting inclusive education that meets

the unique needs of children who have experienced trauma and adversity. Additionally, this research has prompted my dedication to contribute to the advancement of TIP in the Irish education system. By doing so, I hope to give a voice to both the research participants and the students they support, ensuring that their experiences and needs, which have long been overlooked, are acknowledged and addressed.

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Appendices

Appendix A: Excluded Studies

	Study	Reason for Exclusion
1.	Arnold, J. M., & Sableski, M. (2023). Fostering hope and resilience through children's literature. *LEARNing Landscapes*, *16*(1), 43-57. https://doi.org/10.36510/learnland.v16i1.1090	Criteria 5
2.	Attwood, A. I., Barnes, Z. T., Jennings-McGarity, P. F., & McConnell, J. R. (2021). Preservice teacher perceptions of adverse childhood experiences: An exploratory study for an educator preparation program. *Preventing School Failure: Alternative Education for Children and Youth*, *66*(2), 160-166. https://doi.org/10.1080/1045988x.2021.2002248	Criteria 7
3.	Avery, J., Morris, H., Jones, A., Skouteris, H., & Deppeler, J. (2021). Australian educators' perceptions and attitudes towards a trauma-responsive school-wide approach. *Journal of Child & Adolescent Trauma*, *15*(3), 771-785. https://doi.org/10.1007/s40653-021-00394-6	Criteria 6
4.	Ayre, K., Krishnamoorthy, G., Rees, B., & Berger, E. (2022). Balancing the needs of the school community: Implementing trauma-informed behaviour supports in an Australian regional primary school. *Australian Journal of Teacher Education*, *47*(9), 43-61. https://doi.org/10.14221/ajte.2022v47n9.3	Criteria 6
5.	Berger, E., Carroll, M., Maybery, D., & Harrison, D. (2018). Disaster impacts on students and staff from a specialist, trauma-informed Australian school. *Journal of Child & Adolescent Trauma*, *11*(4), 521-530. https://doi.org/10.1007/s40653-018-0228-6	Criteria 5
6.	Blitz, L. V., & Mulcahy, C. A. (2016). From permission to partnership: Participatory research to engage school personnel in systems change. *Preventing School Failure: Alternative Education for Children and Youth*, *61*(2), 170-180. https://doi.org/10.1080/1045988x.2016.1242061	Criteria 5
7.	Burdick, L. S., & Corr, C. (2021). Helping teachers understand and mitigate trauma in their classrooms. *TEACHING Exceptional Children*, *56*(6), 502-509. https://doi.org/10.1177/00400599211061870	Criteria 4

8.	Castro Schepers, O., & Young, K. S. (2021). Mitigating secondary traumatic stress in preservice educators: A pilot study on the role of trauma-informed practice seminars. *Psychology in the Schools*, *59*(2), 316-333. https://doi.org/10.1002/pits.22610	Criteria 7
9.	Conners Edge, N. A., Holmes, K., Wilburn, E. H., & Sutton, M. (2022). Fostering informed and responsive systems for trauma in early care and education (FIRST:ECE): A preliminary evaluation. *Early Childhood Education Journal, 52*(1), 1-11. https://doi.org/10.1007/s10643-022-01390-7	Criteria 5
10.	Coulter, R. W., Henderson, E. R., Corey, S. L., Gagnon, K., Chugani, C. D., Egan, J. E., Murphy, C. E., Plenn, E. R., Routh, N., Roig, A., & Miller, E. (2022). Exploring how U.S. high school staff support, protect, and affirm sexual and gender minority youth: Methods and lessons learned from a qualitative interview study. *International Journal of Qualitative Methods, 21.* https://doi.org/10.1177/16094069221093132	Criteria 6
11.	Fidyk, A. (2019). Trauma-sensitive practice for new teacher standards: Addressing the epidemic of our times. *in education*, *25*(1), 51-76. https://doi.org/10.37119/ojs2019.v25i1.431	Criteria 6
12.	Garcia, M. L. (2021). Assisting elementary school personnel to better serve and support immigrant and Latine heritage children. *Children & Schools*, *43*(1), 33-43. https://doi.org/10.1093/cs/cdaa032	Criteria 6
13.	Greig, J., Bailey, B., Abbott, L., & Brunzell, T. (2021). Trauma-informed integral leadership: Leading school communities with a systems-aware approach. *International Journal of Whole Schooling*, *17*(1), 62-97.	Criteria 4
14.	Hess, M. E., & Lowery, C. L. (2020). Crisis leadership and the impact of opioids on schools and students: Perspectives of school leaders in rural Appalachia. *Education Leadership Review*, *21*(1), 126-141	Criteria 6
15.	Jacobson, M. R. (2020). An exploratory analysis of the necessity and utility of trauma-informed practices in education. *Preventing School Failure: Alternative Education for Children and Youth*, *65*(2), 124-134. https://doi.org/10.1080/1045988x.2020.1848776	Criteria 7

16.	Junco, E., & Camacho, O. (2022). Family engagement in literacy: Social and emotional learning, trauma-sensitive classroom practices, and tools to promote culturally responsive family engagement. *Illinois Reading Council Journal*, *50*(4), 55-60. https://doi.org/10.33600/ircj.50.4.2022.55	Criteria 7
17.	King, L. M., Lewis, C., Ritchie, D. M., Carr, C., & Hart, M. W. (2021). Implementation of a teacher-led mindfulness program in a low-income pre-and early-elementary school as part of a trauma-responsive, resilience-building community initiative. *Journal of community psychology*, *49*(6), 1943-1964. https://doi.org/10.1002/jcop.22557	Criteria 5
18.	Lee, Y. (2017). A model for school professionals working with grandparent-headed families. *Social Work*, *62*(2), 122-129. https://doi.org/10.1093/sw/swx007	Criteria 6
19.	Lohmiller, K., Gruber, H., Harpin, S., Belansky, E. S., James, K. A., Pfeiffer, J. P., & Leiferman, J. (2022). The S.I.T.E. Framework: A novel approach for sustainably integrating trauma-informed approaches in schools. *Journal of Child & Adolescent Trauma*, *15*(4), 1011-1027. https://doi.org/10.1007/s40653-022-00461-6	Criteria 4
20.	MacLochlainn, J., Kirby, K., McFadden, P., & Mallett, J. (2022). An evaluation of whole-school trauma-informed training intervention among post-primary school personnel: A mixed methods study. *Journal of Child & Adolescent Trauma*, *15*(3), 925-941. https://doi.org/10.1007/s40653-021-00432-3	Criteria 5
21.	Matalon, M., & Clauss-Ehlers, C. S. (2023). Creating a multiculturally responsive and trauma-informed classroom ecology for diverse learners: Collaboration, classroom community, and identification of systemic barriers. *Adult Literacy Education: The International Journal of Literacy, Language, and Numeracy*, *5*(1), 55-61. https://doi.org/10.35847/mmatalon.cclauss-ehlers.5.1.55	Criteria 7
22.	McGruder, K. (2019). Children learn what they live: Addressing early childhood trauma resulting in toxic stress in schools. *Mid-Western Educational Researcher*, *31*(1), 117-137.	Criteria 4
23.	Miller, J., & Berger, E. (2021). Supporting First Nations students with a trauma background in schools. *School Mental Health*, *14*(3), 485-497. https://doi.org/10.1007/s12310-021-09485-z	Criteria 6

24.	Miller, K., & Flint-Stipp, K. (2019). Preservice teacher burnout: Secondary trauma and self-care issues in teacher education. *Issues in Teacher Education, 28*(2), 28–45. http://www.itejournal.org	Criteria 7
25.	Miller, K., Flint Stipp, K., & Bazemore-Bertrand, S. (2022). Student trauma, trauma-informed teaching, and self-care in preservice teachers' clinical experiences. *Teacher Development*, *27*(1), 55-74. https://doi.org/10.1080/13664530.2022.2146180	Criteria 7
26.	Minne, E. P., & Gorelik, G. (2021). The protective role of trauma informed attitudes on perceived stress among teachers and school staff. *Journal of Child & Adolescent Trauma*, *15*(2), 275-283. https://doi.org/10.1007/s40653-021-00389-3	Criteria 6
27.	Oberg, G. M., & Bryce, I. (2022). Australian teachers' perception of their preparedness to teach traumatised students: A systematic literature review. *The Australian Journal of Teacher Education, 47*(2), 76. https://doi.org/10.14221/ajte.2022v47n2.6	Criteria 4
28.	Orapallo, A., Grant, B., & Baker, C. N. (2021). Examining the effectiveness of trauma smart® training: Staff satisfaction, knowledge, and attitudes. *Psychological Trauma: Theory, Research, Practice, and Policy*, *13*(8), 891-898. https://doi.org/10.1037/tra0001075	Criteria 6
29.	RB-Banks, Y., & Meyer, J. (2017). Childhood trauma in today's urban classroom: Moving beyond the therapist's office. *Educational Foundations*, *30*, 63-75.	Criteria 7
30.	Rishel, C. W., Tabone, J. K., Hartnett, H. P., & Szafran, K. F. (2019). Trauma-informed elementary schools: Evaluation of school-based early intervention for young children. *Children & Schools*, *41*(4), 239-248. https://doi.org/10.1093/cs/cdz017	Criteria 6
31.	Salvador, K., & Culp, M. E. (2022). Intersections in music education: Implications of universal design for learning, culturally responsive education, and trauma-informed education for P–12 praxis. *Music Educators Journal*, *108*(3), 19-29. https://doi.org/10.1177/00274321221087737	Criteria 7
32.	Shamaskin-Garroway, A. M., McLaughlin, E. A., Quinn, N., & Buono, F. D. (2019). Trauma-informed primary care for medical residents. *The Clinical Teacher*, *17*(2), 200-204. https://doi.org/10.1111/tct.13082	Criteria 7

33.	Sonsteng-Person, M., & Loomis, A. M. (2021). The role of trauma-informed training in helping Los Angeles teachers manage the effects of student exposure to violence and trauma. *Journal of Child & Adolescent Trauma*, *14*(2), 189-199. https://doi.org/10.1007/s40653-021-00340-6	Criteria 4
34.	Stipp, B., & Kilpatrick, L. (2021). Trust-based relational intervention as a trauma-informed teaching approach. *International Journal of Emotional Education*, *13*(1), 67-82.	Criteria 6
35.	Stokes, H., & Brunzell, T. (2019). Professional learning in trauma informed positive education: Moving school communities from trauma affected to trauma aware. *School Leadership Review*, *14*(2), 6.	Criteria 4
36.	Ura, S. K., & D'Abreu, A. (2021). Racial bias, social–emotional competence, and teachers' evaluation of student behavior. *Children & Schools*, *44*(1), 17-26. https://doi.org/10.1093/cs/cdab028	Criteria 6
37.	Walton-Fisette, J. L. (2020). Fostering resilient learners by implementing trauma-informed and socially just practices. *Journal of Physical Education, Recreation & Dance*, *91*(9), 8-15. https://doi.org/10.1080/07303084.2020.1811620	Criteria 4
38.	Wells, T. (2022). School counselor perceptions and knowledge of trauma-informed practices. *Professional School Counseling*, *26*(1), 2156759X2210963. https://doi.org/10.1177/2156759x221096352	Criteria 7

Appendix B: Included Studies

Table B1

Summary of included studies in the review.

	Study	Participants	Country of Study	Research Aim	Study Design	Theoretical Framework/ Perspective	Data Collection	Data Analysis	Findings
1.	Avery et al. (2023)	N = 26 Educators (Students, Parents/Guardians, and external agencies were also included as participants in the study) Gender: Female =15 (58%), Male = 9 (34%), Not specified = 2 (8%). Age: ≤ 29 years= 5 (18.52%), 30-39 years = 9 (33.3%), 40-49 years = 9 (33.3%), ≥50 = 4 (14.81%) Teaching experience: ≤4 years = 2 (7.42%) 5-9 years = 9 (33.3%) 10-14 years = 9 (33.3%), 15+ years = 5 (18.52%)	Australia	(1) To explore multiple community member views of core elements of trauma-responsive practice at a specialist school; (2) To explore impact on student wellbeing and learning outcomes, and educator experiences of their workplace; and, (3) To explore insights into implementation challenges and enablers.	Mixed-methods participatory action study	Neuroscience of learning & Trauma-informed, socioecological, systems, and Social equity theories	Quantitative Data Collection: ARTIC Scale Qualitative Data Collection: Semi structured interviews and focus groups	Quantitative Data: Descriptive statistics, ANOVAs, and Reliable Change Indicator analysis Qualitative Data: Reflexive thematic analysis approach	Quantitative Results: Results from the ARTIC scale indicate that the school established a strong trauma-responsive culture, showing substantial strengths within the Thrive range (75^{th}–100^{th} percentile), for understanding the underlying causes of behaviour; focusing on the importance of relationships, flexibility, kindness, and safety as the agents of change; being empathy-focused; personally supporting the implementation of trauma-informed practices; confidence in implementing and feeling that the school actively supports the use of trauma-informed practices. Qualitative Findings: Two supraordinate themes describe the collective stakeholder experience: (1) Care about us; (2) Power together. Five sub-themes further express stakeholder perspectives: (a) Collective care, collective understanding; (b) Feelings matter; (c) Trust; (d) Tell me what I do well, and plan with me to do better; (e) "I am hopeful for the future".

2.	Avery et al. (2022)	N = 11 (Teacher = 5, Psychologist = 2, Professor/Trauma Responsive Programme Lead = 2, Graduate School Education Dean = 1, and District Director =1) Gender: Female =11 (100%), Male = 0 (0%) Years experience = 3-25 years	USA	To inform emergent trauma-responsive practice in Australian schools by learning from the US experience.	Exploratory qualitative study	Phenomenolog-ical approach	Semi-structured interviews and focus groups.	Inductive and deductive thematic analysis approach (Braun et al., 2019)	The following themes emerges: (a) Relational pedagogy (b) Building skills; self-regulation and friendship (c) Professional learning (d) Teacher wellbeing (e) Equity and social justice
3.	Ballin (2023)	N = 21 (Teachers = 9, Principal = 1, Reading Coach = 1, Specialists staff (the school psychologist, adjustment counsellor, behaviour specialist, nurse, and Therapeutic Learning Centre teacher) = 5, and parents = 5).	USA	To explore the practices and strategies employed by one elementary school (K–5) to become trauma sensitive.	Case study	Theory of community (McMillan & Chavis, 1986)	Interviews, observations, and artefacts	Compiling the information gathered, coding the data, arranging the codes into clumps, and looking for common themes using methods detailed in Glesne (1999) and reflexive journal.	The following themes emerged: a) The faculty's commitment to creating a safe school, b) Intentional school design to foster support. c) A commitment to engaging families, d) A desire to make school fun, and e) The principal's support of the school community.
4.	Barrett & Berger (2021)	N = 6 Teachers Gender: Female =6 (100%), Male = 0 (0%) Teaching experience: 6-25 years (mean = 11.8 years)	Australia	To examine the experiences of teachers in supporting students from refugee backgrounds who have experienced trauma.	Qualitative	Social constructivism	Semi-structured interviews	Thematic Analysis (Braun & Clarke, 2006)	The following themes emerged: a) Characterisation of trauma related behaviours observed at school. a) Development of trusting relationships between student and teacher. b) The role of the teacher and additional considerations when supporting students from refugee backgrounds. c) The right school context to enhance refugee student wellbeing and teacher experience. d) Sharing of relevant background and trauma information. e) Challenges due to external factors outside of the control of teachers; and support and training needs for teachers regarding refugee students.

5.	Berger, Bearsley, & Lever (2021)	N = 27 teachers (Primary School Teachers = 13, Secondary School Teachers = 13, Both Primary and Secondary Teacher = 1) Age: 27-62 years (*M* = 43.44, *SD* = 11.26) Gender: Females = 21 (78%), Males = 6 (22%) Teaching experience: 5-40 years (*M* = 16.96, *SD* = 8.94).	Australia	To identify how teachers respond to student trauma, the availability of resources and training for trauma response, and the wellbeing and professional practice issues of teachers regarding student trauma.	Qualitative	N/A	Semi-structured interviews	Thematic Analysis (Braun & Clarke, 2006)	The following themes and subthemes emerged: a) Experiences of Student Trauma. - Responses to student trauma - Emotional consequences of student trauma - Impact on teacher performance a) Current Resources for Responding. - Training for staff - School policy and trauma-informed protocol - School support and external organizations b) Barriers to Responding. - Parents and traumatized students - Teacher lack of training - Lack of feedback and consultation c) Recommendations for Future.
6.	Berger & Samuel (2020)	N = 13 School mental health workers (*n*=10 wellbeing staff, n= 3 school counsellors) Age: 36-65 (mean = 50.9 years) Gender: Females = 12 (92%), Males = 1 (8%) Experience in current role: 9-35 years (mean=19 years)	Australia	Develop an understanding of the impact of the student trauma on school mental health workers and other staff including their experiences, and ongoing training and support needs.	Qualitative	N/A	Semi-structured interviews	Thematic Analysis (Braun & Clarke, 2006)	The following themes emerged: a) Emotional impact of student trauma. b) Responding to student trauma. c) Lack of support and communication. d) Training refreshes but does not extend knowledge. e) Requirement for external support through supervision. f) Need for attractive internal protocols. g) Availability and participation in training.
7.	Berger, Chionh & Miko (2022)	N = 15 School Leaders (Principal = 7, Assistant Principal = 3, Year-Level Coordinator = 5) Age: 25 to 60 years (mean= 45.13 years).	Australia	To explore the experiences of school leaders when responding to students exposed to domestic violence.	Qualitative	Constructive perspective	Semi-structured interviews	Thematic Analysis (Braun & Clarke, 2006)	The following themes emerged: a) School leaders' experiences with students exposed to domestic violence. b) Mixed levels of support and training for schools.

		Gender: Females = 3 (20%), Males = 12 (80%) Experience in current role: 4-32 years (mean=20.37 years)							c) Levels of school support from government for domestic violence victims. d) Role of school wellbeing officers. e) Trauma training and the impact on staff.
8.	Brunzell et al. (2018)	N = 18 teachers Age: 22-51 years Gender: Females = 13 (72%), Males = 5 (28%) Teaching experience: 1- 17 years	Australia	To identify and explore the specific sources and mechanisms of meaningful work that teachers derive from educating trauma affected pupils.	Qualitative, cross-sectional design.	Constructive perspective	Written journal entries using prompt, and semi-structured focus groups.	Interpretative Phenomenological Analysis (Smith, 1996)	Two major themes emerged as sources of meaningful work: (a) Practice Pedagogy - Student achievement - Student wellbeing (b) Teacher Wellbeing - Workplace coping - Self-regulation - Relationships - Professional identity
9.	Ellison & Walton-Fisette (2022)	N = 27 Physical Education Teachers Gender: Females = 18 (66.6%), Males = 9 (33.3%) Teaching experience: 4-33 years.	USA	To explore the experiences and knowledge of 27 physical education teachers in the United States related to trauma and trauma-informed practices.	Qualitative	Interpretivism	Semi-structured Interviews	Inductive Thematic Analysis (Braun et al., 2012)	The following themes emerged: a) Creating a physically safe and emotionally safe space, b) Formulating positive and healthy relationships with students, c) Developing student responsibility, and d) Guiding students toward self-regulation.
10.	Koslouski & Stark (2021)	N = 10 Elementary Teachers (grades K–5). Gender: Females=8 (80%), Males=2 (20%).	USA	To explore elementary teachers' strategies for promoting learning for their student's experiencing adversity and trauma.	Qualitative.	N/A	Semi- structured interviews	Thematic Analysis (Braun & Clarke, 2006)	The following themes emerged: (a) Teachers prioritize relationships with and between students. (b) Allocate time to teach self-regulation and social skills. (c) Provide and advocate for academic, social, and emotional support. (d) Practice cultural humility and responsiveness. (e) Strive to ally with parents. (f) Engage in ongoing learning and reflection.

11.	Luthar & Mendes (2020)	N = 10 School staff in a trauma-informed K-12 school including teachers (n=9) and a school leader (n=1). Gender: Females=8 (80%), Males=2 (20%).	USA	To explore the importance of trauma-informed practices in educational settings and the critical role of educators in supporting students who have experienced trauma.	Qualitive	N/A	Open-ended prompt question using social media.	Derived themes from the data however data analysis was not specified.	The following themes emerged: a) Compassion fatigue b) Feelings of inadequacy and even fearfulness that they were not doing the right things in response to their students' distress. c) Reporting of physical aggression and violence at school. d) The use of evaluative policies that compounded the stresses that student trauma histories had on their career. e) The conflicting use of standardised testing. f) The need for increasing the number of professionals dedicated to children's mental health needs on the premises g) The need for additional training. h) The need for overall policy changes at the institutional level.
12.	Puchner & Markowitz (2023)	N = 17 (Teachers = 14, Principal= 1, Assistant Principal =1, and an Aide = 1) Gender: Females=16 (94.1%), Males=1 (5.9%). Experience in education = 1=31 years (mean = 13 years)	USA	To understand teacher experiences implementing trauma informed practice at an elementary school in the Midwestern U.S.	Qualitive	Diffusion of Innovation Theory	Semi-structured interviews and observations	Thematic Analysis (Bogdan & Biklen, 2007; Esterberg, 2002; Glesne, 2011)	The following themes emerged: a) Interviewees support and implement TIP and perceive that most of their colleagues do too, b) Participants highly value TIP-related communication and collaboration with other educators, c) Participants see resistance to TIP in others, d) Implementation of TIP is difficult, e) The pandemic facilitated movement to a school-wide approach to TIP.
13.	Russell et al. (2023)	N = 17 Elementary Teachers Gender: Females = 12 (70.6%), Males = 5 (29.4%) Mean years teaching = 15.6 years.	USA	To examine the experience of ACT teachers who received professional development and subsequently implemented learned content in the classroom.	Mixed methods	Ecological systems theory (Bronfenbrenner, 1979)	Semi- structured interviews New Orleans Trauma-Informed Schools Environmental Scan Checklist (Orchard Place/Child Guidance Center's Trauma Informed Care Project, 2020)	Quantitative Data: A priori coding (from teacher interviews and observation scores) and independent samples t-tests. Qualitative Data: Reflexive approach to thematic analysis (Braun & Clarke, 2006)	Quantitative Findings: Significant change over time in teachers' attitudes and trauma-informed classroom responses. Qualitative Findings: a) Teachers learned from and implemented the intervention content in their classrooms dependent upon the support the teacher was given. b) Teachers' perspectives on the connections between the student-

	The Positive Behavioral Interventions and Supports Classroom Management Practices Observation Tool (Midwest PBIS Network, 2020)		teacher relationship and trauma-informed attitudes or practices influenced teacher behaviour. c) Teachers' own emotions and experiences implementing trauma-informed practices were key to classroom management.

Appendix C: Weight of Evidence

Table C1

WoE A: Methodological Quality Criteria adapted from Nha Hong et al.'s Mixed Methods Appraisal Tool (2018)

	Avery et al. (2023)	Avery et al. (2022)	Ballin (2023)	Barrett & Berger (2021)	Berger, Bearsley, & Lever (2021)	Berger & Samuel (2020)	Berger, Chionh & Miko (2022)	Brunzell et al. (2018)	Ellison & Walton-Fisette (2022)	Koslouski & Stark (2021)	Luthar & Mendes (2020)	Puchner; & Markowitz (2023)	Russell et al. (2023)
Qualitative													
1.1. Is the qualitative approach appropriate to answer the research question?	X	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	X
1.2. Are the qualitative data collection methods adequate to address the research question?	X	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	X
1.3. Are the findings adequately derived from the data?	X	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	X
1.4. Is the interpretation of the results sufficiently substantiated by data?	X	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	X

1.5. Is there coherence between qualitative data sources, collection, analysis, and interpretation?	X	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	X
Mixed Methods													
3.1. Is there an adequate rationale for using a mixed methods design to address the research question?	No	X	X	X	X	X	X	X	X	X	X	X	Yes
3.2. Are the different components of the study effectively integrated to answer the research question?	Yes	X	X	X	X	X	X	X	X	X	X	X	Yes
3.3. Are the outputs of the integration of qualitative and quantitative components adequately interpreted?	No	X	X	X	X	X	X	X	X	X	X	X	Yes
3.4. Are divergences and inconsistencies	Yes	X	X	X	X	X	X	X	X	X	X	X	Yes

between quantitative and qualitative results adequately addressed?													
3.5. Do the different components of the study adhere to the quality criteria of each tradition of the methods involved?	No	X	X	X	X	X	X	X	X	X	X	X	No
WoE Quality Score*	2	5	5	5	5	5	5	5	5	5	2	5	4
WoE A Quality Rating Score	**Low (1)**	**High (3)**	**High (3)**	**High (3)**	**High (3)**	**High (3)**	**High (3)**	**High (3)**	**High (3)**	**High (3)**	**Low (1)**	**High (3)**	**Medium (2)**

**High = 5, Medium = 3-4, Low = 0-2*

Table C2

WoE B Qualitative Methodological Relevance Weighting Criteria.

Weighting	Descriptor
High (3)	The study includes at least four of the following: 1. Rationale is given for the use of qualitative design. 2. Data collection methods are appropriate for the type of data required and for the specific qualitative method. 3. Theoretical or philosophical perspective was identified for this study e.g. researcher's perspective. 4. Are participants, and their voices, adequately represented? 5. Triangulation of data sources was used.
Medium (2)	The study includes at least three of the following: 1. Rationale is given for the use of qualitative design. 2. Data collection methods are appropriate for the type of data required and for the specific qualitative method. 3. Theoretical or philosophical perspective was identified for this study e.g. researcher's perspective. 4. Are participants, and their voices, adequately represented? 5. Triangulation of data sources was used.
Low (1)	The study includes at least two of the following: 1. Rationale is given for the use of qualitative design. 2. Data collection methods are appropriate for the type of data required and for the specific qualitative method. 3. Theoretical or philosophical perspective was identified for this study e.g. researcher's perspective. 4. Are participants, and their voices, adequately represented? 5. Triangulation of data sources was used.

Table C3

WoE B: Appraisal of Methodological Appropriateness for Qualitative Studies (Briggs, 2017, Letts et al., 2007; Walsh & Downe, 2006)

Criteria (See Table C2)	Avery et al. (2022)	Ballin (2023)	Barrett & Berger (2021)	Berger et al. (2021)	Berger & Samuel (2020)	Berger et al. (2022)	Brunzell et al. (2018)	Ellison & Walton-Fisette (2022)	Koslouski & Stark (2021)	Luthar & Mendes (2020)	Puchner; & Markowitz (2023)
1. Rationale is given for the use of qualitative design	Yes, the researcher sought to describe the core elements of, and key issues for, trauma-responsive school practice, insights into the implementation process and challenges.	Yes, the researcher sought to witness what a selected group of teachers in the school were doing to embrace a trauma-sensitive approach and to analyze their beliefs about this approach from different perspectives.	Yes, the researcher stated that a qualitative was appropriate for the study to gather data that has not already been explored. Specifically, to promote discussion regarding teachers' experiences and strategies used when supporting students from refugee backgrounds.	Yes, the researchers chose a qualitative design to examine teachers' experiences and training regarding trauma-impacted students.	Yes, the researchers chose to develop an understanding of the impact of student trauma on school mental health workers and other staff, including their experiences, and ongoing training and support needs.	Yes, a qualitative approach was chosen for this study to replicate earlier research on the experiences and perceptions of teachers regarding student exposure to DV and trauma (e.g. Davies & Berger, 2019)	Yes, the researchers chose to identify and explore the specific sources and mechanisms of meaningful work that teachers derive from educating trauma affected pupils.	Yes, the researchers sought to investigate PE teachers' subjective experiences and knowledge related to trauma and TIPs.	Yes, the researchers chose to explore elementary teachers' strategies for promoting learning for their student's experiencing adversity and trauma.	Yes, the researchers chose to conduct qualitative interviews in line with the work of Santoro's (2018) with colleagues from trauma-informed K-12 institutions to identify their most pressing needs.	Yes, the researchers chose to use a qualitative design to understand teacher and other staff members' experiences implementing TIP at Mills Elementary School.
2. Data collection methods are appropriate for the type of data required and for the specific qualitative method.	Yes. Semi-structured interviews and focus groups were used to encourage participant reflection on their experience of Trauma	Yes. A variety of data-gathering techniques, such as interviews, observations, and artifacts (school	Yes. The researcher chose semi-structured interviews to collect data as it would gather deep reflections on experiences of interest and	Yes. A semi-structured interview schedule explored teacher experiences of dealing with student	Yes. Semi-structured interviews were conducted with mental health workers to explore their	Yes. A list of open-ended questions was used during the interviews with school leaders. These questions were followed by varying	Yes. At the start of the first session, participants were first asked to complete a written journal entry with prompts related to the effects of	Yes. Teachers' experiences were examined through semi-structured interviews informed by the literature.	Yes. Semi-structured interviews were conducted using purposeful sampling. Because	No. Social media was used to collect open ended qualitative feedback from participants. They were provided with	Yes. Data was collected using semi-structured interviews with teachers and Principals and observations were carried out of two virtual staff

	Responsive school development, practice learnings, barriers, and enablers to implementation.	records including discipline records) were used which was appropriate for a case study.	could guide further research and development of understanding of TIP.	trauma, resources for responding to student trauma, interactions with colleagues and parents regarding student trauma, and training and other recommendations for future	experiences of student trauma, current support and training, and their need for further support and training.	probing questions asked of school leaders based on their responses to the central questions.	childhood trauma on meaningful work. At the end of the session, group semi-structured interviews were carried out to discuss their journal entry responses which are commonly used in phenomenological research.		trauma-informed schools are not yet common, the researchers choose to interview teachers who have experience responding to the impacts of trauma in their classrooms.	one question to answer.	meetings at the school.
3. Theoretical or philosophical perspective was identified for this study e.g. researcher's perspective.	Yes, the research was guided by phenomenology	Yes, theory of community, developed by McMillan and Chavis (1986), focusing on "the dynamics of the sense-of-community force" (p. 1).	Yes, social constructivism theory.	No. Not specified by authors.	No. Not specified by authors.	Yes, constructivist theoretical approach.	Yes, constructivist paradigm.	Yes, interpretivism.	No. Not specified by authors.	No. Not specified by authors.	Yes, diffusion of innovation theory (Rogers, 2003).
4. Are participants, and their voices, adequately represented?	Yes, interviews and focus groups were carried out with a range of trauma informed program developers and training providers, researchers,	Yes, interviews were carried out with 15 teachers, including specialists, five parents and their children, and the principal of the school	Yes, interviews were carried out with each of the six teachers in the study who have supported students from refugee backgrounds who have experienced trauma.	Yes, interviews were conducted with teachers who have experience dealing with student trauma.	Yes, interviews were carried out with the wellbeing staff and school counsellors regarding student trauma.	Yes, fifteen school leaders agreed to participate in an interview following completion of a survey as part of the larger study into school staff experiences	Yes, interviews were carried out with teachers in two schools identified as having trauma-affected students within their cohorts.	Yes, interviews were carried out with PE teachers related to trauma and TIP.	Yes, interviews were carried out with a sample of elementary teachers of student's experiencing adversity and trauma.	Yes, interviews were carried out with teachers from diverse backgrounds in K-12 education.	Yes, interviews were carried out with teachers and Principals in a school using TIP.

	schools using TIP.	that was in the process of becoming trauma sensitive.				with traumatised students.					
5. Triangulation of data sources was used.	Yes	Yes	No	No	No	No	Yes	No	No.	No	Yes
WoE Quality Score	5	5	4	3	3	4	5	4	3	2	5
Overall Weighting for WoE B*	**High (3)**	**High (3)**	**Medium (2)**	**Medium (2)**	**Medium (2)**	**Medium (2)**	**High (3)**	**Medium (2)**	**Medium (2)**	**Low (1)**	**High (3)**

**High =5, Medium = 3-4, Low ≤2*

Table C4

WoE B Mixed-Methods Methodological Relevance Weighting Criteria.

Weighting	Descriptor
High (3)	The study includes all the following: 1. Described the justification for using a mixed methods approach to address the research question. 2. Described each method in terms of sampling, data collection, and analysis. 3. Combination of qualitative and quantitative data collection analysis techniques or procedures. 4. Integration of qualitative and quantitative data or results. 5. Described any insights gained from mixing or integrating methods.
Medium (2)	The study includes at least three of the following: 1. Described the justification for using a mixed methods approach to address the research question. 2. Described each method in terms of sampling, data collection, and analysis. 3. Combination of qualitative and quantitative data collection analysis techniques or procedures. 4. Integration of qualitative and quantitative data or results. 5. Described any insights gained from mixing or integrating methods.
Low (1)	The study includes at least two of the following: 1. Described the justification for using a mixed methods approach to address the research question. 2. Described each method in terms of sampling, data collection, and analysis. 3. Combination of qualitative and quantitative data collection analysis techniques or procedures. 4. Integration of qualitative and quantitative data or results. 5. Described any insights gained from mixing or integrating methods.

Table C5

Criteria for WoE B Mixed-Methods Studies adapted from Pluye et al. (2009) and O'Cathain et al. (2008)

Criteria (See Table C4)	**Avery et al. (2023)**	**Russell et al. (2023)**
1. Described the justification for using a mixed methods approach to address the research question	Yes, the researchers chose a mixed method design to respond to the two research questions exploring student outcomes and how the school was experienced by the community members.	Yes, the researchers sought to answer questions around teachers' trauma attitudes both self-described in interviews and rated by a clinician through classroom observations.
2. Described each method in terms of sampling, data collection, and analysis.	Yes	Yes
3. Combination of qualitative and quantitative data collection analysis techniques or procedures	Yes	Yes
4. Integration of qualitative and quantitative data or results.	Yes, findings from both the quantitative surveys and qualitative interviews were used to answer the research questions	Yes, findings from both the quantitative surveys and qualitative interviews were integrated to answer the research questions.
5. Described any insights gained from mixing or integrating methods.	Yes	Yes
WoE Quality Score	5	5
Overall Weighting for WoE B*	**High (3)**	**High (3)**

**High =5, Medium = 3-4, Low ≤2*

Table C6

WoE C Weighting Criteria

Weighting		Criteria based on the focus of the study, sample, and experiences of trauma informed practice.
High (3)	**Focus of the Study**	The study is centred on the experiences and perspectives of participants in their professional work with students who have experienced trauma.
	Sample	The study had a large sample size including participants from more than one professional group including Teachers, Principals, Educational Psychologists, or equivalent.
	Experiences using TIP	Participants in the study worked with students directly who experienced trauma using trauma informed practice.
Medium (2)	**Focus of the Study**	The study does not focus on the experiences and perspectives of participants in their professional work with students who have experienced trauma.
	Sample	The study had a large sample size including participants from only one of the following professional groups: Teachers, Principals, Educational Psychologists, or equivalent OR the study had a small sample size* from a range of the aforementioned professional groups.
	Experiences using TIP	Participants in the study worked directly with trauma affected students but did not specify that trauma informed practice was implemented.
Low (1)	**Focus of the Study**	It is not possible to tell if the focus of the study is based on the experiences and perspectives of participants on their work with students who have experienced trauma.
	Sample	The study had a small sample size* of participants from the same professional groups.
	Experiences using TIP	Participants in the study work indirectly with students who have experienced trauma e.g., whole-school level using trauma informed practice.

**Small sample size ≤10 participants as determined by the researcher*

Table C7

WoE C Summary

	Focus of the Study	Sample	Experiences using TIP	Total
Avery et al. (2023)	3	3	3	3
Avery et al. (2022)	3	3	1	2.3
Ballin (2023)	3	3	3	3
Barrett & Berger (2021)	3	1	2	2
Berger, Bearsley, & Lever (2021)	3	2	3	2.7
Berger & Samuel (2020)	3	3	2	2.7
Berger, Chionh & Miko (2022)	3	2	3	2.7
Brunzell et al. (2018)	3	2	2	2.3
Ellison & Walton-Fisette (2022)	3	2	3	2.7
Koslouski & Stark (2021)	2	1	3	2
Luthar & Mendes (2020)	3	2	3	2.7
Puchner & Markowitz (2023)	3	3	3	3
Russell et al. (2023)	3	2	3	2.7

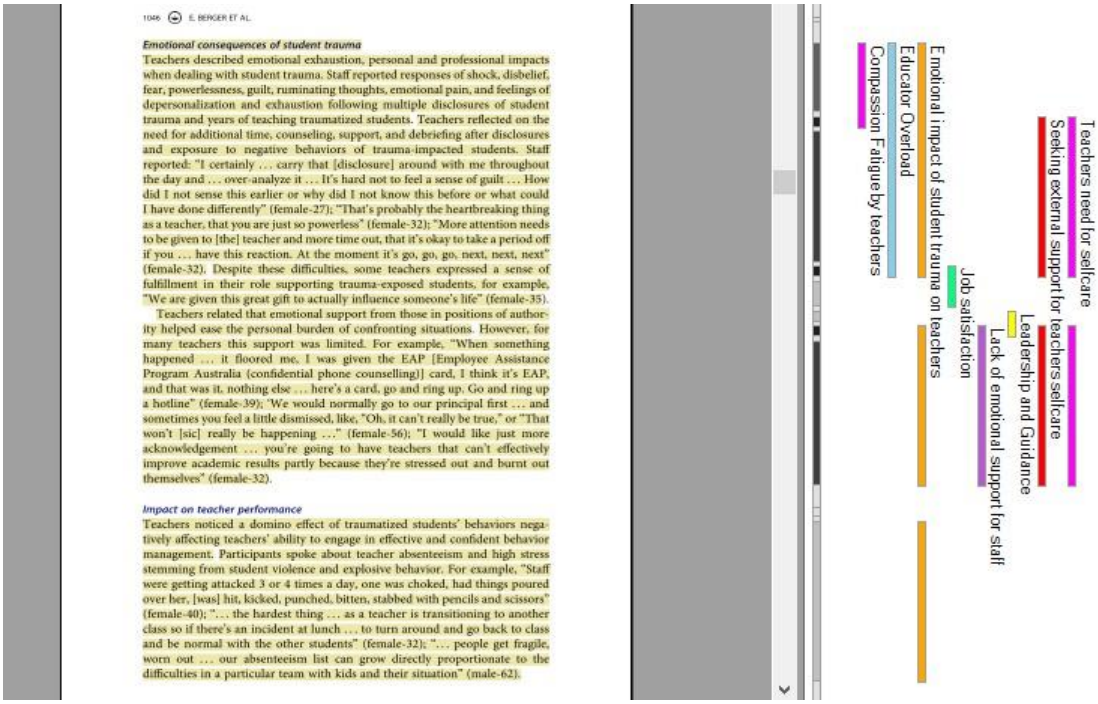
Appendix D: Thematic Synthesis

Step 1: Line-by-line Coding

The researcher entered the findings from the 13 included studies verbatim into NVIVO (QSR International, 2022) software. Subsequently, the researcher coded each line of text according to its meaning and content. Figure 1 below illustrates the line-by-line coding for the results from Berger, Bearsley, and Lever (2021) study. Codes were then developed inductively to capture the meaning and content of each sentence. Every sentence received at least one code, and all coded text was reviewed to ensure consistent interpretation and to determine if further coding was needed. A total of 194 codes emerged from the initial stage capturing the experiences of teachers, principals, and psychologists in their role in implementing trauma-informed practice in primary school settings.

Figure 1

Sample extract of line-by-line coding on NVIVO from Berger, Bearsley, & Lever (2021)



Step 2: Descriptive Coding

The second step involved developing descriptive themes by searching for similarities and differences in the codes and generating new codes that grouped together from the initial coding. New codes were then created to capture the meaning of the groups of initial codes. A total of 16 descriptive themes were identified.

Step 3: Analytic Themes

The final step involved creating analytical themes. The researcher synthesized the findings across the studies, moving beyond the primary reported data to generate new constructs, explanations, and hypotheses aimed at addressing the review question. The analytic themes included 1) Professional development and Support Structures, 2) Pedagogical Practices and Creating a Trauma-Informed Environment, 3) Professional Wellbeing 4) Addressing Barriers and Negative Perceptions. Table D1 provides a summary of the development of descriptive themes to analytic themes.

Table D1

Summary of the Evolution of Descriptive Themes to Analytical Themes

Descriptive Themes	Analytical Theme
Professional development Policy Collaboration and community engagement	Theme 1: Professional development and support structures
Emotional and psychological impact Commitment and dedication of teachers in their roles	Theme 2: Professional wellbeing
Classroom and school environment Pedagogical practices and strategies What it means to be trauma-informed Cultural considerations How trauma-informed practice is implemented in schools Involving parents Benefits of trauma-informed practice	Theme 3: Pedagogical practices and creating a trauma informed environment
Changing Mindsets Challenges and Barriers Impact of the Covid-19 Pandemic Negative Attitudes and Perceptions	Theme 4: Addressing Barriers and Negative Perceptions

Appendix E: Participant Recruitment Emails

NEPS Psychologists

To whom it may concern,

My name is Leanne Maher, and I am postgraduate student attending Mary Immaculate College. I am studying for a Doctorate in Child and Educational Psychology under the supervision of Dr. Margaret Nohilly and Dr. Gerard Farrelly. I am conducting research into the Trauma-Informed Practice in Irish Primary Schools.

I am reaching out to inquire whether you would be interested in taking part in this study. Please note that participation is entirely voluntary, and all responses will be kept confidential. The purpose of this research project is to gain a deeper understanding of trauma-informed practice in Irish Primary Schools, specifically focusing on teachers', principals, and NEPS psychologists' perspectives and experiences. For more details about the research study, you can refer to the attached participant information letter.

This research study has received Ethics approval from the Mary Immaculate College Research Ethics Committee (MIREC). If you have any concerns about this study and wish to contact an independent authority, you may contact Mary Collins, MIREC Administrator, Research and Graduate School, Mary Immaculate College, South Circular Road, Limerick. Telephone: 061-204980 / E-mail: mirec@mic.ul.ie

If you have any questions, please do not hesitate to contact me by email at [redacted]

Thank you for your time.
Leanne Maher,
Postgraduate Student,
Mary Immaculate College

Principals and Teachers

To whom it may concern,

My name is Leanne Maher, and I am postgraduate student attending Mary Immaculate College. I am studying for a Doctorate in Child and Educational Psychology under the supervision of Dr. Margaret Nohilly and Dr. Gerard Farrelly. I am conducting research into the Trauma Informed Practice in Irish Primary Schools.

I am reaching out to inquire whether your school would be interested in taking part in this study. Please note that participation is entirely voluntary, and all responses will be kept confidential. The purpose of this research project is to gain a deeper understanding of trauma-informed practice in Irish Primary Schools, specifically focusing on teachers', principals, and NEPS psychologists' perspectives and experiences. I am inviting the principal of the school and the wider teaching staff team to participate in the study. The offer is open to all teachers in the school. If more than one teacher is interested in taking part, a selection process will be made. For more details about the research study, you can refer to the attached participant information letter. I would greatly appreciate it if you could kindly share this email to teaching staff in your school for their consideration.

This research study has received Ethics approval from the Mary Immaculate College Research Ethics Committee (MIREC). If you have any concerns about this study and wish to contact an independent authority, you may contact Mary Collins, MIREC Administrator, Research and Graduate School, Mary Immaculate College, South Circular Road, Limerick. Telephone: 061-204980 / E-mail: mirec@mic.ul.ie
If you have any questions, please do not hesitate to contact me by email at [redacted]

Thank you for your time.
Leanne Maher,
Postgraduate Student,
Mary Immaculate College

Appendix F: Participant Information Leaflet

An exploration of trauma informed practice in Irish primary schools: Experiences from teachers, principals and National Educational Psychological Service [NEPS] psychologists.

What is the project about?

This research will focus on trauma informed practice in Irish primary school settings. Trauma informed practice is a model of care that considers the prevalence of childhood trauma and its subsequent impacts on development, learning, and wellbeing (Morgan et al, 2015). Trauma informed practices commonly centre on educating and empowering students, families, and/or school staff through efforts that promote system-wide safety, support, and wellness (Perry & Daniels, 2016). This research aims to investigate the experiences of Teachers, Principals, and National Educational Psychological Service (NEPS) Psychologists in implementing trauma informed practice within Irish primary schools. Special attention will be devoted to identifying the factors that facilitate or hinder the implementation of these practices.

Who is undertaking it?

This research is being conducted by Leanne Maher, a trainee Educational Psychologist in the Doctorate in Educational and Child Psychology programme at Mary Immaculate College (Department of Educational Psychology, Inclusive and Special Education). The research is being supervised by Dr. Margaret Nohilly and Dr. Gerard Farrelly. The current study will form part of my doctoral thesis.

Why is it being undertaken?

The purpose of this research project is to gain a deeper understanding of trauma-informed practice in Irish Primary Schools, specifically focusing on teachers', Principals, and NEPS Psychologists' perspectives and experiences.

What are the risks and benefits of taking part?

While there are no direct benefits to participating in this research, your insights and experiences will contribute to the advancement of the current application of trauma informed practice in Irish Primary Schools. It is hoped that this research will contribute to policy and practice by giving an insight into the lived experiences of those directly involved with implementing trauma informed practice. There are no anticipated risks beyond the possibility of discussing sensitive topics, in which case, the researcher will follow the distress and disclosure protocol. If, at any point you feel the need to discontinue your participation in the study, you are entirely

free to do so without facing any consequences. Your decision to withdraw from the study will be respected.

What will I have to do?
You will be asked to provide informed consent before the interview. You will be asked to discuss your experiences of your role in implementing trauma informed practice with the researcher. The interview will be conducted via Microsoft Teams or within your school setting. You will be asked for permission for the interview to be recorded via Microsoft Teams or using an audio recording device. The interview will be exploratory and non-judgemental; any information which you share in the interview will not be shared with other participants. Further information about confidentiality is provided below.

How long will it take?
The interview will take approximately 45-60 minutes.

Can I withdraw from the study?
Your participation is voluntary, and you are under no obligation to participate. You can withdraw at any point before or during your participation in the study without providing any reason and without any consequences. If you wish to withdraw your data afterwards you can do so by contacting the researcher.

How will my information be used?
The data from all the participants in the study will be combined and used to form the results section of my thesis. Direct quotes from participants' semi-structured interviews may be incorporated into the thesis write-up and subsequent publications or conference presentations. However, individual participants or schools will not be identifiable to ensure confidentiality.

How will confidentiality be kept?
All information collected during the research study will be kept strictly confidential. Each participant will be assigned a pseudonym and ID number, and it is this name and number, rather than the participant's name, that will be associated with their data to uphold confidentiality.

What will happen to the data after research has been completed?
In accordance with the MIC Record Retention Schedule, anonymized data may be retained indefinitely.

Contact details
If at any time you have any queries / issues with regard to this study, my email is as follows: [redacted]

This research study has received Ethics approval from the Mary Immaculate College Research Ethics Committee (MIREC). If you have concerns about this study and wish to contact someone independent, you may contact: Mary Collins, MIREC Administrator, Research and Graduate School, Mary Immaculate College, South Circular Road, Limerick. Telephone: 061-204980 / E-mail: mirec@mic.ul.ie

Appendix G: Participant Consent Forms

An exploration of trauma informed practice in Irish primary schools: Experiences from teachers, principals and National Educational Psychological Service [NEPS] psychologists.

Dear Participant,

As outlined in the Participant Information Letter the current study will investigate the experiences of Teachers, Principals, and NEPS Psychologists with implementing trauma informed practice in Irish primary schools. The participant information letter should be read fully and carefully before consenting to take part in the study.

Your anonymity is assured, and you are free to withdraw from the study at any time. All information gathered will remain confidential and will not be released to any third party. In accordance with the MIC Record Retention Schedule all anonymised data may be stored indefinitely.

Please read the following statements before signing the consent form.

- I have read and understood the Participant Information Letter.
- I understand what the study is about, and what the results will be used for.
- I am fully aware of all of the procedures involving myself (including the audio recording of my interview), and of any risks and benefits associated with the study.
- I know that my participation is voluntary and that I can withdraw from the project at any stage without giving any reason.
- I am aware that my results will be kept confidential.

Participant Name (Printed): _____

Participant Signature: _____

Date: _____

Appendix H: Semi-structured Interview Development Guide

To ensure rigor, a semi-structured guides was developed using the five-step approach by Kallio et al. (2016). Phase 1 asked the researcher to evaluate the pre-requisites for using semi-structured interviews (Kallio et al., 2016). The researcher deemed that semi-structured interviews were the most appropriate method of data collection for the research as it allowed participants the flexibility to fully share their perspectives on the complex experience of implementing trauma informed practice in their school setting.

Phase 2 suggests retrieving and using previous knowledge of the topic to create a list of interview questions which can be achieved by carrying out an extensive literature review on the topic (Barriball & While, 1994, Krauss et al., 2009) and gaining methodological guidance and feedback from the other qualitative researchers e.g. research supervisors (Rabionet, 2011). At phase 2, it was agreed that using two different semi-structured interview guides was appropriate for the multi-perspective research design which included one for the teachers and principals in their role implementing TIP in schools, and another for NEPS psychologists in their role supporting schools implement TIP. This ensured that each interview guide reflected the distinct experiences of participant groups in the study. The interview questions were informed by previous literature on TIP in schools, existing literature protocols in studies using IPA and collaborative meetings with the researcher's supervisors regarding the topic.

Phase 3 involved formulating preliminary interview questions to be used as a tool for data collection (Kallio et al., 2016). The researcher designed a semi-structured interview guide using both main themes and follow up questions that aligned with IPA. The interview questions focused on encouraging participants to reflect deeply on their lived experiences of implementing TIP in their distinct roles.

Phase 4 involved pilot testing the semi-structured interview guide. The researcher conducted internal testing, collaborating with their research supervisors to evaluate and refine the preliminary semi-structured interview guide (Barriball & While, 1994; Chenail, 2011). This process ensured that the guide was clear, relevant, and effective for IPA research. Of note, the research supervisors assigned to this study are qualitative researchers with a special interest in IPA research. A follow up discussion between the researcher and the research supervisors took place after the first semi-structured interview with a participant. On reflection, the researcher felt that including a specific question regarding the overview and context of the school would be beneficial, despite it coming up naturally during the interview. There were no other changes made to the interview guide.

The last phase of the development process was presenting the final semi-structured interview guides for data collection. Both guides are organised thematically which include eight to ten overarching theme questions with probing questions for each. It also includes introductory and closing question to ensure a natural dialogue between the researcher and participants.

Teachers and Principals

1. **Participant Role and Experience**
   - Please describe your current role and responsibilities within the primary school.
   - How many years of experience do you have in your current role?

2. **Exposure to Trauma-Informed Practice**
   - Can you share your experience with trauma-informed practice in your school?
   - What motivated your school to adopt trauma-informed practice?

3. **Implementing Trauma-Informed Practice**
   - Could you describe the key trauma-informed practice that have been implemented in your school and describe your role in them?
   - How have these practices been received by staff, students, and parents?
   - Do you feel supported to implement these trauma informed strategies?

4. **Challenges and Barriers**
   - What challenges or barriers have you encountered when implementing trauma-informed practice?
   - How did you address or overcome these challenges?

5. **Facilitators**
   - What facilitators have helped you adopt trauma-informed practice in your school?

6. **Collaboration with NEPS**
   - How do you collaborate with NEPS psychologists in implementing trauma-informed practice?
   - Do you think those supports were effective?

7. **Professional Development**
   - Have you and your colleagues received specific training on trauma-informed practice?
   - How has this training influenced your approach?

8. **Effectiveness of Trauma-informed Practice**
   - How do you assess the impact of trauma-informed practice on students, staff, and the school environment?

9. **Positive Outcomes**
    - Can you share any positive outcomes or changes you've observed as a result of trauma-informed practice?

10. **Future Directions**
    - Where do you see the future of trauma-informed practice in Irish primary schools?
    - Do you have any additional insights or comments you'd like to share?

NEPS Psychologists

1. **Professional Role and Experience**
   - Please describe your role as a NEPS psychologist.
   - How many years of experience do you have in this role?

2. **Involvement with Trauma-Informed Practice**
   - Could you describe your involvement in supporting primary schools with trauma-informed practice?
   - What motivated your engagement in this area?
   - Is trauma-informed practice an area that is recent to the work of NEPS and if so, why?

3. **Challenges**
   - What challenges do you face in your role as a NEPS psychologist in the context of trauma-informed practice in Irish primary schools?

4. **Facilitators**
   - What facilitators have helped you support your schools using trauma-informed practice?

5. **Professional Development**
   - Have you received specific training in trauma-informed practice?

6. **Effectiveness of Trauma-Informed Practice**
   - How do you assess the impact of trauma-informed practice in the schools you support?

7. **Positive Outcomes**
   - Can you share any positive outcomes resulting from the implementation of trauma-informed practice?

8. **Future of Trauma-Informed Practice**
   - Where do you see the future of trauma-informed practice in Irish primary schools?
   - Do you have any additional insights, experiences, or comments you'd like to share?

Appendix I: Evidence of Ethical Approval

MIREC-5

Research Ethics Committee

MIREC Final Decision Form

APPLICATION NUMBER:	A23-047

1. PROJECT TITLE

Trauma informed Practice: Experiences and Perspectives from Teachers, Principals, and National Educational Psychological Service (NEPS) Psychologists in Irish Primary Schools.

2. APPLICANT

Name:	Leanne Maher
Department / Centre / Other:	LSRE
Position:	Postgraduate Researcher (DECPsy)

3. DECISION OF MIREC CHAIR (✓)

☐	Ethical clearance through MIREC is not required and therefore the applicant need take no further action in this regard.
✓	Ethical clearance is required and is hereby granted by the Chair without need for referral to the MIREC committee.
☐	Ethical clearance for a funding application or a similar purpose is granted by the Chair ***pro tem*** without need for referral to the MIREC committee. However, the applicant must subsequently seek ethical clearance from MIREC prior to embarking on any related project work involving human participants or their data.
☐	Ethical clearance is granted following review of the application by the MIREC committee.
☐	Ethical clearance is not granted following review of the application by the MIREC committee.

Appendix J: Distress and Disclosure Protocol

Adapted from Dempsey et al. (2016), the steps outlined below are for participants benefit if they become distressed or disclose something while being interviewed.

1) The participant is under no obligation to answer all questions. They can skip questions or decline to answer questions they find distressing.

2) The interview will be terminated if:

- The participant decides to terminate the interview.
- The participant decides to participate in the interview at another time or place.

3) The researcher will intervene if the participant is:

- Experiencing anxiety or distress during the interview: The participant will be asked if they would like to take a break and if they wish for the audio-recorder to be switched off.
- Continuing to show signs of upset: The participant will be asked if they would like the interview to end and if they would like the researcher to call someone to spend time with them, such as a family member or friend.
- Unduly distressed: The researcher will remain with the participant until they are calm and composed. The participant may then decide to continue with the interview or not.

4) The researcher will, with the participants consent:

- Gain permission to call them later in the day or the following day to debrief and ensure they are no longer distressed. Alternatively, the researcher may ask if

they would like a family member or someone from the local community to call them to offer support.

- Contact details of useful numbers and support groups will be offered to the participant if they require them e.g. the employee assistance support provided by Spectrum Life.

5) If during a research interview information is revealed which indicates that someone might be hurt or in danger the researcher will be obliged to break confidentiality and share their concerns with their research supervisors and any relevant agencies.

Appendix K: Sample Reflective Journal Entry

N2 Interview Reflection

17.05.24

In my interview with participant N2, he spoke at length about how the job as a NEPS psychologist has changed since the Covid pandemic and the influx of Ukrainian students in Ireland. Initially, I was stuck by the psychologist's admission that NEPS, as an organisation does not implement formal approaches to TIP in schools, even those with higher levels of community trauma. This challenged my assumption that such an organisation would play a more structured, system-wide role in adopting TIP in schools. As a result, I wondered whether the inclusion of NEPS psychologists in the study would contribute to this area of research.

However, as the interview proceeded, the psychologist emphasised that TIP is often manifested informally through their relationship with the school and families. He highlighted that understanding the children's backgrounds and experiences was crucial to his role in adopting TIP. His reflection on offering choices, adjusting expectations for family engagement, and providing multiple opportunities and support for families highlighted a deeply compassionate approach. These strategies, though not formally embedded in NEPS, seem aligned with core trauma-informed values.

One example he shared involved a child who frequently did not attend school. Rather than following a rigid assessment schedule, the psychologist adapted his approach, offering the child choice and autonomy around when and how to engage. This flexibility, he noted, was not universally applied amongst NEPS psychologist, but in this case he felt it was essential. This prompted me to reflect on how TIP is an approach that focuses on supporting the person where they are at. It is highly individualised and context dependent.

Moreover, his comments on interagency collaboration (e.g., working with family support workers and home liaison officers) reframed my understanding of how TIP can be facilitated indirectly. Reflecting on my first interview with a NEPS psychologist, I realised I had brought an assumption of what TIP 'should' look like in NEPS. I expected their involvement to include more whole-school approaches such as setting up nurture groups, offering professional development, and advising schools on best practices for responding to trauma. What I encountered instead was a more informal, organic, and individualised approach, rooted in the psychologists discretion and relationship with their schools. This led me to reconsider the role of NEPS in supporting schools adopt TIP.

Appendix L: Sample Excerpt of Transcript with Exploratory Comments and Experiential Statements

The following section presents an extract from the transcript of N4's interview. The right-hand column presents the exploratory notes which were divided into descriptive, linguistic and conceptual notes. The left-hand column presents a list of experiential statements.

Experiential Statements	N4 Transcript	Exploratory Noting *Pink: Descriptive notes* *Yellow: Linguistic notes* *Blue: Conceptual Notes*
Role as advocate draws her focus to working marginalised groups Drawn to the challenge	**R: You mentioned you have a patch of schools. Can you give me a brief overview of the context of those schools?** **N4**: So I have a lot of different responsibilities. Like I mentioned, there's social inclusion [working group], so I don't have a massive patch of schools, but the schools I have are quite diverse really. So I have some in the city and then I have some rural. And as it happens, I have a lot of DEIS schools, which is kind of my preference actually, because I suppose with my own research. And my own kind of area of interest as well. I like working with marginalised groups because I think you can really kind of bring a lot of psychology to try and support the needs of those communities. So in terms of the context then, yeah, so I suppose, yeah, it's just the fact that it's rural city. And I suppose the kind of work then would be very varied as well. So obviously we would, you know, kind of obviously look at learning and I	Prefers working with DEIS schools due to her interest in social inclusion and working with marginalised groups. There is a sense that these schools challenge her – *"because I think you can really kind of bring a lot of psychology to try and support the needs of those communities"* There is a recognition that learning and assessments are integral to NEPS however there is a sense that she feels that all others view her role as assessment focussed. She feels that the work of NEPS is not often recognised by schools.

Disconnect between schools understanding of TIP and her own Complexity in casework prompted a shift in her approach to TIP Experiences conflict between traditional assessment methods and a broader, systemic view of supporting the child within their wider context. Values parental expertise in her own TI approach	think. Traditionally, I think a lot and still a lot of professionals, parents, teachers still often assume that our focus is is on, you know, supporting young people's learning, which you know is obviously a massive part of our role. And in order to do that, we need to look at the wider picture as well. Do you know? But some schools still assume that it's assessments, which obviously we do as well if it's appropriate. But I suppose with the diversity in our schools, you know, cognitive assessments, which often schools assume that we kind of focus solely on, do you know, often aren't appropriate, do you know? So, but if it is appropriate to look at learning and we are looking at children with, you know, kind of coming from diverse backgrounds. It also is about looking at alternative forms of assessment as well. And then I suppose other pieces of work then would be around. I suppose a lot of the work in NEPS has changed, I think. Because of the complexity of need and also maybe because other services are stretched, I'm wondering if that's part of it as well, but certainly I find I do very little assessment work. My work would mainly be around, a lot around trauma, actually, a lot around helping schools to understand trauma, understand the needs of the students they're working with, understanding the diversity of needs. A lot of focus on building kind of relational approaches. And and work with families as well. Do you know to try and help them understand the needs of their their children, but also supporting schools to value the	N4 acknowledge the stark changes in how NEPS work due to increasing complexity of casework She questions whether this is due to a systemic issue relating to other services and their waiting lists. This shift has resulted in reduced assessment work and more focused on trauma 'actually' – N4 explains how this may be surprising to here considering previously help assumptions of assessment work Involving parents and their expertise is an integral part of her role implementing TIP in her work "we're quite lucky in" - N4 appreciates the influential nature of the role and organisation in terms of advising policy and practice. There is a sense of pride

Values the influential role of NEPS in progressing TIP nationally Responsibility of addressing and challenging practice is integral to TIP	expertise of families and parents and ensuring that parents are brought to the table? Do you know? And so yeah. And the and then the national piece is really important as well. I think in NEPS we're quite lucky in the sense that we do have some influence at departmental level. Do you know to look at some of the policies and practises that are, you know, kind of introduced to schools. And I think that's kind of unique to NEPS as well. So I think that is quite quite good and I think I really like the social inclusion piece. And because it's really really important, and I think school, a lot of schools think that they are, you know, they are doing what they should be doing. And I think all schools are really well-intentioned. But sometimes I think they don't realise that some of the practises that they are adopting are actually trauma inducing rather than trauma reducing. Do you know and discriminatory. And maybe failing to acknowledge the needs of particular groups. So I think we have a lot to do, but I think we have a lot to bring as well in terms of the psychology. **R: You mentioned that NEPS has evolved over time. Do you think trauma-informed practice is an area that is recent to NEPS or has it always been there?** **N4:** Yeah. No, I think it is. And I think I think there's definitely an acknowledgement that it's an area that an NEPS needs needs to upskill in.	working for an organisation with such influence. N4 hesitates here highlighting her point that schools are well intentioned, however they sometimes are doing the opposite "we have a lot to do" – suggests perhaps that schools are ignorant to their needs or perhaps some psychologist may also be ignorant to these assumptions N4 acknowledges the efforts of NEPS to become more trauma-informed however, there is a sense that N4 feels this is not enough "NEPS needs, needs to upskill". The emphasis on 'needs' highlights this point further. She played a role in the progressing NEPS towards TIP by organising training for psychologists. N4 hesitates between referencing the importance of TI training however it misses the wider impact of how trauma manifests.

Urgent need for NEPS to upskill in TIP Proactive in supporting organisational upskilling – feels part of the journey towards TIP Hesitates to support organisational efforts to progress TIP Deeping disappointed by the disconnect between expertise and inadequate efforts of NEPS to progress TIP	And so in next we've had different training with Karen Treisman over I was involved in organising that. She came over in during COVID. But look, I think that definitely there's an acknowledgement that. You know, we have a key role to play in supporting schools to be more trauma informed. You know, culturally trauma informed. And I think that work is ongoing. I think we have a lot of work to do. So you're probably familiar with the *Stress Factor*, so there's a lot of really good content in that. I do think that. And I know they're updating it at the moment actually. Because I personally, I do think that that's still very within child. I think it is. As I said, all the information there on the trauma is really, really important in terms of the stressors stress response. All that kind of stuff is really, really important and it's really important knowledge for schools to have, umm, but I don't think it acknowledges the wider impact of trauma. Do you know? So what I was saying around poverty, discrimination, kids from the traveller community. Just just, I suppose the impact that life, you know, can have on particular groups of students. And and and I think it kind of adapts a one size, fits all approach rather than looking at the intersectionality of trauma. Do you know and looking at, you know, but even how one group you know? So it could be somebody, you know, it could be somebody from a minority group. But even a person from a minority group can be different	"One size fit all" – this phrase my indicate that N4 is disappointed by the organisations efforts to develop training. This further captures the responsibility of NEPS to inform schools of best practices related to trauma. Sense of relief that changes are being made to adapt the stress factor – this further highlights the unique influence NEPS psychologists have on practice. Her personal interest and research in intersectionality emerges as a common theme and important point throughout the interview. "psychologists need to understand this space really, really well" – N4 reflects on how some psychologists may not actually understand TIP and as such the training is not landing to schools.

Advocates for deeper, contextual understanding and accountability within NEPS Views role as implicitly embedding TIP into school practice Concerned regarding lack of organisation effort to disseminate and embed TIP systemically	from, you know, a person from travelling community can be different from another traveller person, from the traveller community. Do you know? Because one child could come from a house where both parents were educated. One might have even gone to third level. They you know another child from the traveller community, do you know? Might come from a home where there's homelessness and there's extreme poverty, so it is looking at the individual needs of students. Do you know as well? So there's that intersectionality piece. And and I think as well as that. I think we have quite a long road to go even in terms of understanding, power, privilege. And you know, I just think all you know, all those things are not part of the stress factor. And the other piece as well around the idea of the *Stress Factor*, I think the idea of these webinars are fine for giving information. But I actually think what needs to happen is psychologists need to understand this space really, really well and I think change will happen when psychologists are going out, having the conversations with schools having the conversations with parents using the continuum of support using the model of service to consultation training. Yeah, absolutely. But training isn't enough. I think training needs to happen, but I think webinars are not the answer because I think it's about that's about throwing information, but it doesn't land unless it's being repeated. It's being ingrained in conversations that are being had in school. So I think that we are on the road and I think we're on the right road.	There is a sense of fear that some psychologists feel that training is enough for schools to implement change She acknowledges the importance of training, however "ingrain [ing]" it is the role of psychologists. She feels there is a greater responsibility of NEPS to disseminate TIP systemically

	And as I said this, I think that's involved in meeting recently before Christmas and I know that they are updating the *Stress Factor* and I think they are trying to bring in those these other areas. But I do think that also we need to look at how this information is disseminated out schools and to wider communities.	

Appendix M:Summary of Personal Experiential Themes and Group Experiential Themes

Table M1

Summary of Personal Experiential Themes for Teachers

Personal Experiential Themes for T1	
Theme 1	Changing Mindsets
Theme 2	Challenges in embracing a trauma-informed vision
Theme 3	Personal approaches to TIP
Theme 4	Professional development as a driving force for change
Theme 5	Becoming trauma-informed
Theme 6	Value of strong leadership, guidance and systemic support in adopting TIP
Theme 7	Emotional impact and commitment to TIP
Theme 8	The journey to becoming trauma-informed
Personal Experiential Themes for T2	
Theme 1	Feeling unsupported by the Department of Education
Theme 2	Integrating TIP across the school community
Theme 3	Negative perceptions and criticisms of TIP
Theme 4	Personal commitment to embed TIP into school culture
Theme 5	Successful outcomes of TIP
Theme 6	Taking responsibility to become trauma aware
Theme 7	Future vision for TIP
Personal Experiential Themes for T3	
Theme 1	Challenges in gaining support and resources to adopt TIP
Theme 2	Factors influencing staff buy-in
Theme 3	Observed effectiveness of adopting TIP
Theme 4	Developing trauma awareness as a step towards TIP
Theme 5	Embedding TIP into school culture
Theme 6	Personal freedom and experience as key facilitators in adopting TIP
Theme 7	Exploring personal motivation and its influence on the adoption of TIP
Theme 8	Tailored school approaches to adopting TIP
Theme 9	Prompting diverse pre-service teacher training placements to foster trauma awareness
Personal Experiential Themes for T4	
Theme 1	Value of creating professional relationships for effective implementation of TIP
Theme 2	Alignment of personal values with trauma informed teaching practices
Theme 3	Commitment to embedding TIP into school culture
Theme 4	Struggles with systemic barriers and support in adopting TIP
Theme 5	Engaging parents as key partners in adopting TIP
Theme 6	Commitment to advancing TIP through a future focused vision
Theme 7	Professional development served as the foundation for validating practices and building a structured framework for TIP
Theme 8	Careful planning and humble consideration of adopting TIP

Table M2

Summary of Group Experiential Themes for Teachers

GETs	PETs	Quotes
Theme 1: Role of embedding TIP in school culture	T2 Theme 2: Integrating TIP across the school community	*"we're really trying to identify as a whole school being trauma informed in our approach today"*
	T2 Theme 4 Personal commitment to embedding TIP	*"I really believe in this"*
	T3 Theme 5 Embedding TIP into school culture	*"it's become ingrained"*
	T4 Theme 3: Commitment to embedding TIP into school culture	*"we would naturally be doing a lot of this in class now"*
	T4 Theme 5: Engaging parents as key partners in adopting TIP	*"in terms of us, the school, the parent, the child and everybody working together"*
Theme 2: Evolving awareness of trauma as a key factor in developing TIP	T1 Theme 1: Changing mindsets	*"Not everybody is trauma informed. Even if you work in a trauma informed school"*
	T1 Theme 4: Professional development as a driving force for change	*"I think good quality training is really important, even for people's mindsets"*
	T1 Theme 6: Value of strong leadership, guidance and systemic support in adopting TIP	*"we have that support from the top down"*
	T1 Theme 8: The journey to becoming Trauma-informed	*"we're still evolving all the time"*
	T2 Theme 5: Successful outcomes of TIP	*"But actually I found in here it's the fastest working intervention I've seen in 20 years"*
	T2 Theme 6: Taking responsibility to become trauma aware	*"we have greater responsibility, I think, to get it right and I find that challenging if people aren't on the same page sometimes, you know, well-meaning teachers can do damage without realising"*
	T3 Theme 2: Factors influencing staff buy in	*"I think all the staff have been quite intrigued by like the approach this year."*
	T3 Theme 4: Developing trauma awareness as a step towards TIP	*"it's being aware that they could be having had the trauma, or they could be experiencing trauma at the time. And that you can just I think it just changes your whole approach"*
	T4 Theme 7: Professional development served as the foundation for validating practices and building a structured framework for TIP	*"the scientific reasoning behind all of it, you know, it just it just made sense to me"*

Theme 3: Personal and strategic engagement in adopting TIP	T1 Theme 3: Personal approaches to TIP	*"first and foremost…my role as class teacher is to, I suppose, develop a relationship with every child that comes into my room"*
	T1 Theme 7: Emotional impact and commitment to adopt TIP	*"you're just at the end of their patience and ideas and you know… you have staff going out on stress leave and all of that"*
	T3 Theme 6: Personal freedom and experience as key facilitators in adopting TIP	*"I think the freedom to be allowed to it, like, you know, the way I think and that that comes from.. [Principal]"*
	T3 Theme 7: Exploring personal motivation and its influence on the adoption of TIP	*"if we can try and have themselves feeling a bit better about themselves and seeing that they are like worthy and that they are important and that they are like, I suppose that was my big motivation going into it"*
	T3 Theme 8: Tailored school approaches to adopting TIP	*"in the school, I feel like there's always had to be that kind of focus on looking after the kids, which I think feeds in very much into a trauma informed approach."*
	T3 Theme 9: Prompting diverse pre-service teacher training placements to foster trauma awareness	*"I feel like that should be it…you have to do a DEIS"*
	T4 Theme 1: Value of creating professional relationships for effective implementation of TIP	*"So I think networking is really important"*
	T4 Theme 2: Alignment of personal values with trauma informed teaching practices	*"that was an important part of me and who I am"*
	T4 Theme 8: Careful planning and humble consideration of adopting TIP	*"But it doesn't have to be explicit. We keep reminding ourselves it's working on a very deep level"*
Theme 4: TIP as an unsupported school initiative	T1 Theme 2: Challenges in embracing a trauma-informed vision	*"if you are really you know really for it and really committed to it, it is the only way. There is no other way"*
	T2 Theme 1: Feeling unsupported by the Department of Education	*"they've been no support whatsoever"*
	T2 Theme 3: Negative perceptions and criticisms of TIP	*"With the staff, I suppose, change is hard"*
	T3 Theme 1: Challenges in gaining support and resources to adopt TIP	*"it's trying to get the balance right. So I suppose that's a big obstacle to it.. you're limited"*
	T4 Theme 4: Struggles with systemic barriers and support in implementing TIP	*"We had a WSE and they said we had to focus on Irish, so we're focusing on Irish, but it was meant to be trauma informed practise"*

Theme 5: Key contributors for effective implementation of TIP	T1 Theme 6: Value of strong leadership, guidance and systemic support in adopting TIP	*"we have that support from the top down"*
	T2 Theme 2: Key Drivers in Integrating TIP Across the School Community	*"we're really trying to identify as a whole school being trauma informed in our approach today"*
	T3 Theme 6: Personal freedom and experience as key facilitators to adopting TIP	*"I think the freedom to be allowed to it, like, you know, the way I think and that that comes from.. [Principal]"*
	T4 Theme 1: Value of creating professional relationships for effective implementation of TIP	*"So I think networking is really important"*

Table M3

Summary of Personal Experiential Themes for Principals

Personal Experiential Themes for P1	
Theme 1	Personal mindset and experience served as a perquisite for effective change to TIP
Theme 2	Criticising previous personal and systemic understanding of trauma
Theme 3	Professional development served as a catalyst for change
Theme 4	Deep resistance from others inspired a personal commitment to change mindsets
Theme 5	Personal understanding of TIP is integrated into school approaches
Theme 6	Observed students' challenges adjusting to new approaches
Theme 7	Perceived role as a role model to students in adopting TIP
Theme 8	Deep frustration inspires advocacy for future developments in TIP in school settings
Personal Experiential Themes for P2	
Theme 1	Navigating systematic barriers beyond control
Theme 2	School Approaches to TIP
Theme 3	Frustration at lack of DES Support
Theme 4	Perceived Successful impact of TIP
Theme 5	Deep awareness of the embodiment of trauma in the school and wider community
Theme 6	Isolating journey towards TIP
Personal Experiential Themes for P3	
Theme 1	TIP prompted a shift in thinking and practice
Theme 2	Ideal vision of TIP hindered by lack of DES support
Theme 3	Personal commitment and vision for long term change
Theme 4	Extensive experience in the role informs TI approach
Theme 5	Individual approach to adopting TIP
Theme 6	Adoption of TIP in response to urgent need
Theme 7	Recognition of intergenerational trauma within the wider school community
Theme 8	Shifting long standing attitudes
Personal Experiential Themes for P4	
Theme 1	Value of TI professional development
Theme 2	Fostering a whole-school culture through TIP
Theme 3	Personal approaches to adopting TIP in the role as Principal
Theme 4	TIP served as a catalyst for internal job satisfaction
Theme 5	Personal commitment to adapting TIP to the unique school environment
Theme 6	Implications of having DEIS status on TIP
Theme 7	Value of relationship building in TIP
Theme 8	Navigating future challenges
Theme 9	Embedding TIP into school policies
Theme 10	Value of NEPS support in the journey towards TIP

Table M4

Summary of Group Experiential Themes for Principals

GETs	PETs	Quotes
Theme 1: Principal leadership role in driving TIP to individual school context	P1 Theme 5: Personal understanding of TIP is integrated into school approaches	*"I always say if a child can't spell. You teach them to spell. If a child can't read, you teach them to read. But what if a child can behave, what we do, we we…we suspend them? No… I made a very good connection with her."*
	P1 Theme 7: Perceived role as a role model to students in adopting TIP	*"one good adult"*
	P2 Theme 5: Deep awareness of the embodiment of trauma in the school and wider community	*"We're trying to address the intergenerational trauma. You know, it was very frustrating hearing the minister saying that they are disadvantaged children in every school. Yes, of course there is, but there is 150 really disadvantaged children in this school."*
	P3 Theme 5: Individual approach to adopting TIP	*"So a lot of work like I would say 90% of the work done in this school is helping the children be ready to learn and to regulate your emotions, understand their emotions, talk through to them."*
	P3 Theme 7: Recognition of intergenerational trauma within the wider school community	*"we would be in one of the most disadvantaged places in Ireland"*
	P4 Theme 2: Fostering a whole-school culture through TIP	*"It's really becoming ingrained in our schools"*
	P4 Theme 3: Personal approaches to adopting TIP in the role as Principal	*"From being in a leadership role or like even deputy, just trying to make sure we have the best practises in place"*
Theme 2: Fostering whole-school buy-in as a critical step in adopting TIP	P1 Theme 1: Personal mindset and experience served as a perquisite for effective change to TIP	*"having worked in a DEIS school for so long. It.. it changes your whole outlook. And I really think that people who work in their schools have to bring a different mindset to the role"*
	P1 Theme 3: Professional development served as a catalyst for change	*"I can safely say that was the most effective and useful CPD that I've ever done and that changed everything here."*
	P1 Theme 4: Deep resistance from others inspired a personal commitment to change mindsets	*"And so that's when things got difficult. But you know, we weathered that storm"*
	P3 Theme 1: TIP prompted a personal shift in thinking and practice	*"But I do think it's changed the way I look. It's you know, it's changed my approach"*
	P3 Theme 8: Shifting long-standing attitudes	*"That's challenging, you know changing attitudes."*
		"it was a real eye opener for everybody"

	P4 Theme 1: Value of TI professional development	
Theme 3: Commitment to transforming school practices through TIP	P1 Theme 2: Criticising previous personal and systemic understanding of trauma	*"..it was really very obvious that it wasn't effective"*
	P2 Theme 6: Isolating journey towards TIP	*"So, we just have to keep going off doing our own thing"*
	P3 Theme 3: Personal commitment and vision for long term change	*"what I would like to think is that it's just going to be embedded in the culture of the school"*
	P3 Theme 6: Adoption of TIP in response to urgent need	*"I'd be waiting. We're just doing it."*
	P4 Theme 5: Commitment to adapting TIP to the unique school environment	*"So we're trying to think outside the box"*
	P4 Theme 9: Embedding TIP into school policies	*"we need to review our policy."*
Theme 4: Motivation hindered by systemic challenges	P1 Theme 8: Deep frustration inspires advocacy for future developments in TIP in school settings	*"We're not breaking the cycle."*
	P2 Theme 1: Navigating systematic barriers beyond control	*"we've been pushing this, and we're looking for an answer from the department"*
	P2 Theme 3: Frustration at lack of DES Support	*"one of the biggest kickbacks we've had from the department is that they're not ready to acknowledge it"*
	P3 Theme 2: Ideal vision of TIP hindered by lack of DES support	*"I wish we had that there was more acknowledgement of it or understanding from the Department of Education"*
	P4 Theme 6: Implications of having DEIS status on TIP	*"if we had the DEIS status,"*

Table M5

Summary of Personal Experiential Themes for NEPS Psychologists

Personal Experiential Themes for N1	
Theme 1	Building competence through multi-tiered support
Theme 2	Positive adaption to the systematic changes within NEPS
Theme 3	Creating meaningful working with schools
Theme 4	Facilitating collaborative relationships
Theme 5	Evolving Identity of educational psychologists in TIP
Theme 6	Investing time to TIP
Theme 7	Observes school readiness as a key factor for change
Personal Experiential Themes for N2	
Theme 1	Uncertainty within the role
Theme 2	Adapting role to school context
Theme 3	Navigating social inequalities as an integral part of TIP
Theme 4:	Deep admiration of school approaches to TIP despite limited resourcing
Theme 5	Evolving role of NEPS in adopting TIP
Theme 6	Navigating role boundaries within NEPS
Personal Experiential Themes for N3	
Theme 1	Balancing school needs with trauma informed approaches
Theme 2	Proactive role in supporting schools adopt TIP
Theme 3	Adapting to the evolving complexity of role
Theme 4	Feeling restricted within the organisation to support schools adopt TIP
Theme 5	Building teacher capacity to understand trauma
Theme 6	Acknowledgement of the factors affecting trauma in the school and wider community
Theme 7	Supporting individual school approaches to TIP
Theme 8	Perceived impact of NEPS resources on the implementation of TIP in schools
Personal Experiential Themes for N4	
Theme 1	Personal commitment and responsibility of embedding TIP in school cultures
Theme 2	Misunderstood narratives in society contribute to deep frustration
Theme 3	Advocates for greater understanding and accountability within NEPS to progress TIP
Theme 4	Demonstrates implicit means to embed TIP in schools
Theme 5	Being the champion to challenge assumptions and promote change
Theme 6	Struggles to maintain a balance between praising progressive efforts and reality within the organisation

Table M6

Summary of Group Experiential Themes for NEPS Psychologists

GETs	PETs	Quotes
Theme 1: Taking charge of change	N1 Theme 1: Building competence through multi-tiered support	"*it became huge in NEPS, you know, even relating to CPD and regional teams, a lot of the focus started to be on trauma informed practise*"
	N1 Theme 3: Creating meaningful working with schools	*"I suppose what it's doing is it's making schools feel empowered"*
	N1 Theme 4: Facilitating collaborative relationships	*"you should link with your your colleagues down the road… that kind of reflective practise and that sharing of ideas between schools, not within schools but between schools.."*
	N1 Theme 6: Investing time to TIP	*"There's nothing that beats the kind of face to face contact with a team of teachers or a school"*
	N2 Theme 2: Adapting role to school context	*"the one thing I do is I would probably be more forgiving"*
	N3 Theme 2: Proactive role in supporting schools adopt TIP	*"I just gave it the kickstart really"*
	N3 Theme 5: Building teacher capacity to understand trauma	*"I do think teachers need to be more upskilled. And you know, I would always say we don't expect you to be therapist. But you know, but... it's good to understand it"*
	N3 Theme 7: Supporting individual school approaches to TIP	*"Once I even had the caretaker there because everybody's involved in what happens in a school"*
	N4 Theme 1: Personal commitment and responsibility of embedding TIP in school cultures	*"I think it is about just really trying to kind of continue to have those conversations with them and modelling as well"*
	N4 Theme 3: Advocates for greater understanding and accountability within NEPS to progress TIP	*"I actually think what needs to happen is psychologists need to understand this space really, really well and I think change will happen when psychologists are going out, having the conversations with schools, having the conversations with parents using the continuum of support, using the model of service in consultation"*
	N4 Theme 4: Demonstrates implicit means to embed TIP in schools	*"So it's through those kind of problem solving and discussion at consultation level and then at a wider level then I think again looking at what the school are doing in terms of policies and practises"*

	N4 Theme 5: Being the champion to challenge assumptions and promote change	*"So that's why responsibility as NEPS psychologists to try and start having these conversations with schools, just to alert them to kind of maybe look at what they're doing and to maybe be open to thinking about some changes that they could make"*
Theme 2: Significant factors impacting the effecting adoption of TIP	N1 Theme 7: Observes school readiness as a key factor for change	*"you have teachers in front of you who are open and willing to take the stuff on board, like I remember you would have met with resistance from teachers…depending on where teachers are, how open they are, where they are on their own personal lives, whether they're stressed or whether they're under undue pressure due to maybe challenging behaviour in their classes"*
	N2 Theme 3: Navigating social inequalities as an integral part of TIP	*"I think it's nearly inbuilt. I think you figure out fairly quick that you know the kind of locality you're in and the type of family trauma and history of stuff that exists, you know*
	N2 Theme 4: Deep admiration of school approaches to TIP despite limited resourcing	*"I'm amazed that schools are now supposed to be all things to all people. I think there's a huge expectation on schools to be much more than a school, which I think is unfair"*
	N2 Theme 6: Navigating role boundaries within NEPS	*"I'll be softer in my approach and I'd be also more inclined to throw time and face to face meetings, you know, 'cause again, a lot can be lost over the phone here. And I want to show kind of buy in and that I'll support you."*
	N3 Theme 1: Balancing school needs with TI approaches	*"it's just in my daily practise with whatever cases come up"*
	N3 Theme 4: Feeling restricted within the organisation to support schools adopt TIP	*"I would have done a lot more training around that with schools, except for the fact that NEPS have brought in this thing where we…. we're agents of the government and work for them…"*
	N3 Theme 6: Acknowledgement of the factors affecting trauma in the school and wider community	*it was like an unusual ish thing when it happened 6-7 years ago. But now I reckon it's going to be happening more and more*
	N3 Theme 8: Perceived impact of NEPS resources on the implementation of TIP in schools	*"it's embedded in our practise, the well-being documents the..the stress factor there is a well-being tool kit that's out there. There's a lot of stuff which…we would signpost all of that at our meetings at the beginning of the year but I would say that very few teachers are looking at any of this stuff"*
	N4 Theme 2: Misunderstood narratives in society contribute to deep frustration	*"one of the things that I found really challenging and I continue to find challenging is the whole kind of obsession with diagnosis…it's much easier to kind of put it*

		down to a genetic difficulty within a child rather than looking at the wider system"
	N4 Theme 6: Struggles to maintain a balance between praising progressive efforts and reality within the organisation	*"I think we're going the right way. But I do think that we have quite a long way to go"*
Theme 3: Being part of an evolving organisation	N1 Theme 2: Positive adaption to the systematic changes within NEPS	*"just before COVID hit, there was more kind of momentum on the ground and NEPS were moving away from a huge kind of tunnel based focus on academic and cognitive abilities and testing and more to looking at the child holistically"*
	N1 Theme 5: Evolving identity of educational psychologists in TIP	*"our thinking has nearly been turned upside down"*
	N2 Theme 1: Uncertainty within the role	*"So for me, I suppose, yeah, I don't feel like I do anything super specific for these schools, maybe apart from just what I've been saying, that it's like time and a bit more understanding and you know less expectations…a more hand holding role for parents sometimes than my usual maybe"*
	N2 Theme 5: Evolving role of NEPS in adopting TIP	*"it's an appreciation that psychology really shouldn't be working in isolation"*
	N3 Theme 3: Adapting to the evolving complexity of role	*"So NEPS has grown up a lot in the 14 and a half years I've been in it. It's changed a lot and in some ways I would have resisted that change in my head and giving out, but actually a lot of the changes have been quite good"*

Appendix N: Across Case Analysis

Table N1

Summary of Across-Group GETs

GETs	Teachers	Principals	NEPS Psychologists
Theme 1: A transformational journey in shaping school culture			
Subtheme 1: Becoming trauma aware	**Evolving awareness of trauma as a key factor in developing TIP** Professional development as a driving force for change The journey to becoming trauma-informed Taking responsibility to become trauma aware Developing trauma awareness as a step towards TIP Professional development served as the foundation for validating practices and building a structured framework for TIP	**Fostering whole-school buy-in as a critical step in adopting TIP** Professional development served as a catalyst for change Criticising previous personal and systemic understanding of trauma TIP prompted a personal shift in thinking and practice	**Being part of an evolving organisation** Positive adaption to the systematic changes within NEPS Evolving identity of educational psychologists in TIP Evolving role of NEPS in adopting TIP Adapting to the evolving complexity of role **Significant factors impacting the effecting adoption of TIP** Misunderstood narratives in society contribute to deep frustration **Taking charge of change** Building competence through multi-tiered support Building teacher capacity to understand trauma Advocates for greater understanding and accountability within NEPS to progress TIP Being the champion to challenge assumptions and promote change

Subtheme 2: Fostering whole-school buy-in	**Evolving awareness of trauma as a key factor in developing TIP** Changing Mindsets Professional development as a driving force for change Factors influencing staff buy in **TIP as an unsupported school initiative** Negative perceptions and criticisms of TIP **Role of embedding TIP in school culture** Engaging parents as key partners in adopting TIP	**Fostering whole-school buy-in as a critical step in adopting TIP** Deep resistance from others inspired a personal commitment to change mindsets Personal mindset and experience served as a perquisite for effective change to TIP Shifting long-standing attitudes TIP prompted a shift in thinking and practice Value of TI professional development Fostering a whole-school culture through TIP	
Subtheme 3: Embedding TIP into school culture	**Role of embedding TIP in school culture** Integrating TIP across the school community Personal commitment to embedding TIP Embedding TIP into school culture Commitment to embedding TIP into school culture **TIP as an unsupported school initiative** Challenges in embracing a trauma-informed vision	**Principal leadership role in driving TIP to individual school context** Fostering a whole-school culture through TIP **Commitment to transforming school practices through TIP** Personal commitment and vision for long term change Embedding TIP into school policies	**Taking charge of change** Facilitating collaborative relationships Proactive role in supporting schools adopt TIP Personal commitment and responsibility of embedding TIP in school cultures Demonstrates implicit means to embed TIP in schools

Theme 2: Striving for TIP in challenging systemic conditions

Subtheme 1: Failure to recognise trauma	**TIP as an unsupported school initiative** Feeling unsupported by the Department of Education	**Motivation hindered by systemic challenges** Deep frustration inspires advocacy for future developments in TIP in school settings Navigating systematic barriers beyond control Frustration at lack of DES Support Ideal vision of TIP hindered by lack of DES support Implications of having DEIS status on TIP	**Taking charge of change** Advocates for greater understanding and accountability within NEPS to progress TIP **Significant factors impacting the effecting adoption of TIP** Deep admiration of school approaches to TIP despite limited resourcing Feeling restricted within the organisation to support schools adopt TIP Struggles to maintain a balance between praising progressive efforts and reality within the organisation
Subtheme 2: Resource limitations	**TIP as an unsupported school initiative** Challenges in embracing a trauma-informed vision Challenges in gaining support and resources to adopt TIP Struggles with systemic barriers and support in implementing TIP **Evolving awareness of trauma as a key factor in developing TIP** Successful outcomes of TIP	**Motivation hindered by systemic challenges** Navigating systematic barriers beyond control Ideal vision of TIP hindered by lack of DES support Implications of having DEIS status on TIP	**Significant factors impacting the effecting adoption of TIP** Deep admiration of school approaches to TIP despite limited resourcing

Theme 3: Tailoring trauma-informed approaches to individual school needs

Subtheme 1: Being familiar with intergenerational trauma	**Role of embedding TIP in school culture** Personal commitment to embedding TIP **Personal and strategic engagement in adopting TIP** Attributes DEIS placements to her awareness of trauma in school communities	**Principal leadership role in adopting TIP to individual school context** Deep awareness of the embodiment of trauma in the school and wider community Recognition of intergenerational trauma within the wider school community	**Significant factors impacting the effecting adoption of TIP** Navigating social inequalities as an integral part of TIP Adapting role to school context Acknowledgement of the factors affecting trauma in the school and wider context
Subtheme 2: Understanding students' needs	**Evolving awareness of trauma as a key factor in developing TIP** Value of strong leadership, guidance and systemic support in adopting TIP **Role of embedding TIP in school culture** Personal commitment to embedding TIP **Personal and strategic engagement in adopting TIP** Tailored school approaches to adopting TIP Personal freedom and experience as key facilitators in adopting TIP Careful planning and humble consideration of adopting TIP	**Principal leadership role in driving TIP to individual school context** Perceived role as a role model to students in adopting TIP Individual approach to adopting TIP	**Significant factors impacting the effecting adoption of TIP** Adapting role to school context **Taking charge of change** Proactive role in supporting schools adopt TIP

Subtheme 3: Being responsive to school needs	**Commitment to transforming school practices through TIP** Isolating journey towards TIP Adoption of TIP in response to urgent need Commitment to adapting TIP to the unique school environment **Fostering whole-school buy-in as a critical step in adopting TIP** Deep resistance from others inspired a personal commitment to change mindsets	**Taking charge of change** Creating meaningful work with schools Investing time to TIP Adapting role to school context Supporting individual school TI approaches **Significant factors impacting the effecting adoption of TIP** Balancing school needs with TI approaches Perceived impact of NEPS resources on the implementation of TIP in schools Misunderstood narratives in society contribute to deep frustration

Appendix O: Prevalence of Group GETs and Subthemes

Table O1

Prevalence of GETS and subthemes

Themes and Subthemes	Teachers				Principals				NEPS Psychologists				Total
	T1	T2	T3	T4	P1	P2	P3	P4	N1	N2	N3	N4	
Theme 1: A transformational journey in shaping school culture	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	11
Becoming trauma aware	✓	✓	✓	✓	✓		✓		✓	✓	✓	✓	10
Fostering whole-school buy-in	✓	✓	✓	✓	✓		✓	✓					7
Embedding TIP into school culture	✓	✓	✓	✓			✓	✓	✓		✓	✓	9
Theme 2: Striving for TIP in challenging systemic conditions	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	11
Failure to recognise trauma		✓			✓	✓	✓	✓		✓	✓	✓	8
Resource limitations	✓	✓	✓	✓		✓	✓	✓		✓			8
Theme 3: Effectiveness of tailoring trauma-informed approaches to individual school needs	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	12

Being familiar with intergenerational trauma		✓	✓			✓	✓			✓	✓			6
Understanding students' needs	✓	✓	✓	✓	✓		✓			✓	✓			8
Being responsive to school needs					✓	✓	✓	✓	✓	✓	✓	✓		8