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Engaging Parents of Black Students in Therapeutic Processes to Decrease Disciplinary Action

Lateshia B. Milton
Walden University

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Walden University

College of Social and Behavioral Sciences

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Lateshia Milton

has been found to be complete and satisfactory in all respects,
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the review committee have been made.

Review Committee

Dr. Martha Markward, Committee Chairperson, Social Work Faculty
Dr. La Tonya Noel-Wilburn, Committee Member, Social Work Faculty
Dr. Kristin Richards, University Reviewer, Social Work Faculty

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2019

Abstract

Engaging Parents of Black Students in Therapeutic Processes to Decrease Disciplinary
Action

by

Lateshia B. Milton

MSW, Florida State University, 2010

BS, Howard University, 2007

Doctoral Study Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Social Work

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Abstract

The disproportionate frequency of disciplinary actions involving Black students in the school setting is of concern. The behavior that leads to disciplinary action may be related to adverse childhood events that resulted in behavior related to trauma. This action research study focused on how school social workers in 1 school district might engage parents of Black students in the therapeutic processes to decrease disciplinary action. In this study, the trauma systems therapy (TST) model was presented to a focus group composed of school social workers who served Black students. The social workers were asked to share their thoughts in response to 5 questions related to how social workers might engage parents of Black students in the therapeutic processes to decrease disciplinary action. Data analysis included reviewing the focus-group transcript and coding categories. Themes in the responses to each question were categorized to provide insight into the feasibility of implementing TST in practice with Black students who received disciplinary action. The results of this research might inform school social workers' practice by helping them connect adverse childhood experiences and disciplinary outcomes as they engage parents of Black students in the therapeutic process to decrease disciplinary actions. The implications of this study for positive social change include modifying school social work services, creating safe therapeutic school environments, and changing the course of disciplinary actions for Black students.

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Section 1: Foundation of the Study and Literature Review

It is possible that trauma effects will result in behaviors for which Black students receive disproportionate disciplinary actions in one school district in the southeastern United States. In this action research, I presented the trauma systems therapy (TST) model of practice as a model with potential for addressing the needs of Black students whose negative behaviors may be related to adverse childhood experiences (ACEs) and trauma. Because disciplinary actions taken with Black students may fail to address the effects of trauma associated with ACEs or re-traumatize the trauma-affected (Crosby, 2015; Massachusetts Advocates for Children, 2005; Wilson, Pence, & Conradi, 2013), the TST model helpful in addressing the needs of trauma-affected Black students to help them avoid disciplinary actions in the school setting. This study focused on determining the feasibility of social workers implementing TST with Black students who experience disciplinary action.

This manuscript will focus on two sections. The first section includes the problem statement, the purpose and research questions, the nature of the study, significance of the study, the theoretical/conceptual framework, the values and ethics focus of the study, and finally, the review of the literature. The second section of the manuscript focuses on the research design, methodology, including description of the participants, the data analysis procedure, and any ethical procedures that are relevant to the study. The third section of the manuscript focuses on the presentation of findings relative to the research.

Problem Statement

In the 2016 National Survey of Children's Health (NSCH) study, the following eight ACEs were identified: (a) economic hardship; (b) parent or guardian divorced or separated; (c) parent or guardian died; (d) parent or guardian served time in jail; (e) saw or heard parents or adults slap, hit, kick, punch one another in the home; (f) was a victim of violence or witnessed violence in his or her neighborhood; (g) lived with anyone who was mentally ill, suicidal, or severely depressed; and (h) lived with anyone who had a problem with alcohol or drugs (Sacks & Murphey, 2018).

Sacks and Murphey (2018) noted that one in every 10 children in the United States has experienced at least three ACEs. The authors highlighted that 61% of Black children experience at least one adverse event compared to 40% of White non-Hispanic children. The prevalence of two or more ACEs is highest among Black children in all regions of the country, but in the south Atlantic region that includes Florida, 30% of Black children experienced two or more ACEs, and 29% of Black children experienced at least one ACE. Nationally, Black students experience economic hardship (37%), parent/guardian divorce or separation (35%), parent/guardian incarceration (16%), and child abuse/neglect (9%). Given these figures, it seems plausible that some portion of Black students who receive disciplinary action are trauma affected.

Trauma-affected children often display behaviors that typically mimic attention deficit disorder (AD/HD) and oppositional defiant disorder (ODD) in the educational process (Walkley & Cox, 2013). Perry (2006) noted that emotional regulation is difficult for trauma-affected children because they may be in a perpetual "fight, flight," or a

“freeze” state, which in the school setting may result in their receiving punitive disciplinary actions. Disciplinary actions may further intensify the impact of trauma among Black students and may re-traumatize those students (Walkley & Cox, 2013).

State Kids Count data (2016) show that Black students in the school district that is the focus of this study experience disciplinary actions twice as often as White students. Based on data collected from 13 southern school districts in 2011-2012 school year, the Center for the Study of Race and Equity in Education (CSREE, 2015) found that the enrollment in the school district was 197,155 students, and among the 21.5% of students who were Black, the suspension rate was 42.1%. Statewide, more Black females than Black males were suspended (46.1%, 36%) and expelled (34.2%, 26%), respectively. In 2014, the United States Department of Education Office for Civil Rights found that Black students were suspended and expelled at a rate three times higher than White students were.

During the 2017-2018 school year, Black students accounted for 43% of behavioral incidents and disciplinary actions in the identified school district. More specifically, at one high-risk elementary school with an enrollment of 627 students, there were 103 incidents of either personal misconduct, physical attack, fighting, sexual offenses, or minor incidents. These behaviors led to 41 students receiving suspensions from school throughout the school year.

School social workers in the school district are responsible for reducing barriers that interfere with the academic success of students. This responsibility is important when one considers that at one high-risk elementary school with an enrollment of 627 students,

there were 103 incidents of either personal misconduct, physical attack, fighting, sexual offenses, or minor incidents, which led to 41 students receiving suspensions from school throughout the school year. These data suggest that some portion of those students may be trauma affected and in need of help to regulate their emotions.

TST is a model of practice that focuses on helping trauma affected children and adolescents regulate their emotions and is one that seems needed in the school district, especially if trauma-related behaviors among some portion of Black students result in disciplinary actions that may actually re-traumatize them (Crosby, 2015; Massachusetts Advocates for Children, 2005; Wilson, Pence, & Conradi, 2013). Given that the first step in TST is to engage families in helping to regulate the negative behavior of children, the feasibility of using TST in the school district is dependent on how social workers who work primarily with Black students in achievement zone schools can engage parents and families in understanding that ACEs may contribute to a child's behavior in the school setting, and in turn, to disciplinary action.

Purpose of the Study

The purpose of this study was to explore how social workers in the achievement schools of one school district in the southeastern United States might engage parents of Black students who receive disciplinary actions in the therapeutic process. This information is necessary to determine the feasibility of using the TST model of practice in schools designated to serve students with high psychosocial needs and low academic achievement where the highest rate of disciplinary action is taken with Black students. I presented an overview of the TST model of practice to a focus group of social workers

who serve students in Grades two through five of those schools. I emphasized that the first step in using TST is to engage the family in the therapeutic process in order to help their trauma-affected children regulate emotions. I developed the following research questions (RQs) to guide the study:

RQ1: In what ways do school social workers think that adverse events in the home might result in trauma effects among Black students who receive disciplinary action and which events do they perceive have the greatest traumatic effect? Examples of adverse events that have been shown to affect Black children are separation/divorce, incarceration of parent/guardian or any other close relative, death of a parent/guardian, violence in the neighborhoods, violence in the home, or their own abuse.

RQ2: In what ways can school social workers be more involved in work with families to help them understand the student's response to adverse events s/he has experienced in the home, and how can school social workers connect the effect of trauma from adverse events in the home to behavior in the school?

RQ3: How can school social workers identify the resilience in families of students who have received disciplinary actions in the school setting, and in what ways do they think that resilience can be used in integrating practice with the student and his/her family?

RQ4: In what ways do school social workers perceive they are able to help Black students who have received disciplinary action regulate their emotions, and how they help parents regulate the emotions of their child in the home?

RQ5: Do school social workers think that school-based family counseling (SBFC) could be offered to parents/guardians whose child has received disciplinary action in the school setting in order to help the family members see how adverse effects in the home might result in trauma that impacts behavior in school, and if so, how do they think SBFC would look as part of trauma informed practice with Black students who have received disciplinary action in the school setting.

Nature of the Study

This qualitative action research study involved a presentation of the TST model of practice that utilizes a focus group approach to elicit information from social workers to determine the feasibility of using TST in practice with Black students who receive disciplinary actions for behavior that may be trauma related. Those social workers work in achievement schools, which are schools designated to support students with high psychosocial needs and low academic performance and typically have an enrollment of 60% Black students. After the presentation of the TST model, I posed questions to those school social workers regarding the need for family involvement with Black students who receive disciplinary actions that may correlate to ACEs and trauma. Given that engaging the family in a child's treatment is the first step in the TST clinical model, the themes in the responses to those questions provided my colleagues and me with insight into the feasibility of implementing with Black students who received disciplinary actions.

Significance

The themes that result from data collected in the focus group can provide school social workers with insight into whether they want to implement TST as a trauma informed approach to practice with Black students who are disciplined and their families.

TST is a framework that I offered for use in training all school social workers in ways to engage families in work with Black students disciplined in the school setting who may be trauma affected (Saxe, Ellis, & Brown, 2016). The handbook *Trauma Systems Theory for Children and Teens* (Saxe, Ellis, & Brown, 2016), provides a “roadmap” that school social workers can use in integrating individual treatment at the home, school, and community levels. The authors contend that the first step in using TST is engaging families in the individual treatment of trauma affected student whose behavior may a problem.

Policy Implications

If the TST model serves as an effective way to engage families in the therapeutic process, then the major policy might be a mandate for more specific training of school social workers and school personnel on how to engage families in the school environment. The TST clinical model is a trauma informed approach that places a priority on engaging families in in the therapeutic work with students who are trauma-affected (Saxe, Ellis, & Brown, 2016). A policy that would mandate funding for the implementation of TST with Black student who receive disciplinary action in the achievement zone schools would help school social workers receive training to best utilize this model of practice.

Practice Implications

One implication of the study for practice is an increased interest on the part of social workers in becoming trauma informed practitioners. If it is feasible to implement TST, then social workers will be able to use a significant trauma lens through which they

can comprehend what is happening with the students in the schools they serve. The responses to questions I posed in the focus group allowed social workers to better aide children and families in schools, especially Black students. In utilizing TST, it is possible that social workers will be able to transform service provision by focusing on engaging families in helping their children regulate emotions (Saxe, Ellis, & Brown, 2016).

Other individuals on school campuses often look to social workers for expertise in making decisions, so collaboration is vitally important and social workers must know how to communicate effectively about the principles of TST across and within schools. The findings in this study regarding how social workers might engage families in the therapeutic process of understanding ACEs, trauma, and behavior that results in disciplinary action for Black students may be useful to school social workers across the state and beyond. The findings will also help stakeholders in other school districts to have a different understanding of the effects of adverse childhood experiences on the behavior and emotionality of Black students.

Research Implications

Subsequent researchers could use action research to explore how parents and other stakeholders perceive the effects of ACEs and the support they may need for their children. Specifically, action research is needed to identify the association between the number of disciplinary actions Black students receive and the ACEs they have experienced. In particular, a quantitative study is needed to identify the number and type of ACEs that all elementary aged students have experienced, especially Black students who have received disciplinary actions. With regard to trauma-specific trainings and

certifications, the findings from this research study would help school social workers and other mental health staff know how to implement TST to better serve Black students whose unacceptable behavior in school may be related to ACEs and trauma.

Social Change Implications

The results of this action research project can have implications for positive social change in one large school district in the southeastern United States. First, using TST could be the first step in changing how Black students and their families engage in the educational process. Second, if the effects of trauma that negatively impact the behavior of Black students are addressed, then this might reduce the number of disciplinary actions they experience and decrease the suspension and expulsion rates for Black students, as well as engage parents and families in keeping Black students in school rather than excluding them. Third, if using TST could increase the engagement of families whose Black children have been disciplined, this could have long-term ramifications for bettering the community with adults whose behavior does not involve them with law enforcement and corrections. Last, the most important social change implication would be for increasing the opportunities for Black students to lead more proactive lives in their community and society.

Conceptual Framework

Grounded in a social-ecological perspective (Bronfenbrenner, 1979), the TST model for children and teens proposes that in order to address the needs of trauma-affected children, the emotional needs of children must be addressed within the context of their social environments, especially the home and school environments (The National

Child Traumatic Stress Network, 2016). This proposition means that the symptoms of the trauma-affected child must be considered relative to the strengths in the child's family and other environments, such as the church and school. Simultaneously, compassionate and caring support services are warranted to meet the needs of students.

Saxe et al. (2016) highlighted the notion of "survival in the moment." This is the reaction to new events, such as disciplinary actions, that trigger the thoughts and emotions associated with past trauma events. Perry (2016) identified that trauma-affected children are in continual state of fight, flight, or freeze. In this state, children's emotional connection to the past often results in their exhibiting impulsive, reactive, erratic, and oppositional behavior in the present. In the school setting, these behaviors are often mislabeled as attention deficit disorder (AD/HD) or oppositional disorder (Walkley & Cox, 2013).

Social workers in schools can utilize TST in several ways to provide trauma-informed care for trauma-affected students, especially those who are at most risk of experiencing more than two ACEs. First, the emotional needs of trauma-affected children should be addressed by utilizing the strengths of and resilience in the child's family (Saxe, Ellis, Fogler, & Navalta, 2011; Saxe, Ellis, & Brown, 2016; Walsh, 2006). Second, social workers can focus on helping trauma-affected students regulate their emotions in the present (Perry, 2006). Last, social workers remove barriers that prevent the creation of more compassionate and caring services for students that can support students who may be trauma affected specifically Black students.

When engaging the family in addressing the emotional needs of Black students who have received disciplinary actions, social workers can focus on the ACEs the student has experienced in the home or neighborhood. Based on this information, school social workers can draw conclusions about the extent to which the students may be trauma affected, and how this may impact his/her behavior in the school setting that results in disciplinary action. In using TST, the social workers may establish alliance with the family, eliminating barriers to family engagement in the process. Providing psychoeducation about trauma and its effects on children are the steps taken to engage parents in the therapeutic process with their child.

Values and Ethics

School social workers work with a code of ethics and values that guide their everyday practice. When working with children and families dealing with adverse experiences, these values are important to making a positive impact. The values of the NASW Code of Ethics (2018) related to this social work problem includes *service* and *competence*. In the area of school social work, competence means striving to increase knowledge regarding trauma and the impact on children. When speaking of the value of service, related to this project, school social workers' goals are to help children, families, and schools address the social problems that correlate to exposure to trauma.

The School Social Work Association of America (2018) empowers school social workers to enhance the academic success, social growth, and emotional growth of all students. Along with the NASW, this organizations goal is to promote ethics and values in the work they do as school social workers. Specifically, in the school district where the

study was conducted, school social workers aim to assist students and families in removing barriers that affect the students' social- emotional states as well as academic learning. This action research project will bring awareness to the needs and perspectives of social workers regarding the values of competence and service.

Literature Review

The purpose of this study was to explore how school workers in the achievement schools of the school district where I conducted this study might engage parents of Black students who receive disciplinary actions in the therapeutic process. This information is necessary in order to determine the feasibility of using the TST model of practice in schools designated to serve students with high psychosocial needs and low academic achievement where the highest rate of disciplinary action occurs with Black students. As the first step in the TST model is parent engagement, I provided a presentation of the TST model to school social workers in the achievement schools followed by questions on how they might engage families whose Black children receive discipline in schools and have experienced ACEs.

To gather materials for the literature review, I used Google Scholar to search for the following key phrases: *trauma and children*, *trauma systems therapy (TST) model*, *TST in schools*, and *child welfare and TST*. I limited the searches to all related abstracts and full-text journal articles published between 2010 and 2018. When full-text articles were unavailable in Google Scholar, I used the Walden University Library to access those articles.

Trauma and School-Age Children

Kaiser Permanente conducted a study on childhood exposure to traumatic stress, surveying 17,000 participants (Centers for Disease Control and Prevention [CDC], 2014). Almost two thirds of the participants said that they had experienced at least one traumatic stress experience or ACE in their childhood, and more than 20% reported that they experienced three or more childhood traumatic experiences (CDC, 2014). Confirming these findings, the results of another survey showed that 48% of children between 0 and 17 years of age had experienced at least 1 childhood traumatic event (Child and Adolescent Health Measurement Initiative, 2013). The United States Department of Health and Human Services (HHS, 2015) noted that of the 3.5 million protective service reports in 2013, 679,000 reports showed that children had suffered from neglect or abuse, which is an ACE.

Perfect, Turley, Carlson, Yohannan, and Gilles (2016) found that nearly two of every three school-age children have experienced at least one traumatic event by 17 years of age. Using responses of 66,000 school-aged youth who participated in the National Child Study of Children's Health, Porche, Costello, and Rosen-Reynoso (2016) found that 53% of youth had experienced adverse family events. In 2016, the National Survey on Children's Health questioned children between 0 and 17 years of age and their parents (United States Census Bureau, 2016). In this study, economic hardship and parental separation were the most common traumatic experiences for children (Sacks & Murphey, 2018).

Relative to this study, the findings showed that children of different races and ethnicities do not experience traumatic experiences equally. Porche, Costello, and Rosen-Reynoso (2016) found that Black children experience adverse childhood events (ACEs) twice as often as White children were. More recently, Sacks and Murphey (2018) noted that 61% of Black children have experienced at least one traumatic event compared to 40% of White non-Hispanic children (Sacks and Murphey, 2018). These results support the possibility that more Black children than White children may be trauma affected in ways that could affect how they function in a school setting.

Effects of Trauma on Children

The effects of traumatic experiences may result in toxic stress levels in the child. The results in several studies have shown that trauma and stress lead to a decrease in the function of a child's brain (McCrary, De Brito, & Viding, 2010; Wilson, Hansen, & Li, 2011), particularly executive functioning or the ability to sort stimuli, memory, and learning (McCrary, De Brito, & Viding, 2010; Wilson, Hansen, & Li, 2011). Furthermore, research has shown that neglect and abuse lead to a child's inability to determine which stimuli are threatening (National Scientific Council on the Developing Child, 2010; Shonkoff & Garner, 2012). Both Saxe et al. (2016) and Perry (2016) highlighted the notions of survival in the moment and fight, flight, or freeze, respectively, in reaction to new events that trigger the thoughts and emotions associated with past trauma events. These findings indicated how the behavior of a trauma-affected student might result in or result from disciplinary action in the school setting.

Trauma Systems Therapy Model

Saxe, Ellis, and Brown (2015) developed the TST specifically to improve emotional, social, and behavioral functioning among children and youth who have experienced trauma. TST is a model of care that addresses both the child's emotional needs and the social environment in which the child grows and develops (Bronfenbrenner, 1979). As such, TST is both a clinical and an organizational model that focuses on removing barriers between services, understanding the child's trauma symptoms in his or her developmental context, and building on family strengths.

The clinical model is important to understand because it focuses on treating trauma-affected children who have difficulty regulating emotions by engaging the parents/guardians in the therapeutic process. TST is a phase-based approach to treatment that consists of four primary intervention modules: (a) home- and community-based care, (b) services advocacy, (c) emotion regulation skills training, and (d) psychopharmacology. As an organizational model for agencies that treat children exposed to trauma, the focus is on a trauma informed system rather than on the child alone, and treatment takes place in a range of settings, including adoptive and birth family homes, foster/kinship care, community agencies, outpatient clinics, residential care facilities, hospitals, and schools.

Residential settings. Residential programs have the capability to improve the social, emotional, and independent living skills of youth. Brown, McCauley, Navalta, and Saxe (2013) found that TST is currently being implemented in 26 programs within 17 agencies across 10 states. Those programs include community-based outpatient

programs, child welfare/mental health collaborations, foster care/mental health collaborations, school-based mental health programs, shelters for unaccompanied alien minors, residential programs, pediatric hospital-based programs, and substance abuse/mental health collaborations (Hodgdon, Kinniburgh, Gabowitz, Blaustein, & Spinazzola, 2013; Saxe, Ellis, Fogler, & Navalta, 2012). TST has been shown to be effective in several clinical trials (Bright et al. 2010; Ellis et al., 2011; Saxe et al. 2005; Saxe et al. 2012) and successfully disseminated in a variety of settings (Hansen & Saxe 2009). Conceptually, the dual emphasis on the emotional/behavioral functioning of the youth and the impact of the social environment makes TST uniquely appropriate to residential settings.

In particular, the services provided by residential programs to treat trauma among migrant youth who are housed in a variety of settings follow the TST model. Recent research has indicated that a substantial percentage of unaccompanied migrant youth have high levels of trauma exposure (United Nations High Commissioner for Refugees 2014). In the United States, more than 90% of these youth in custody are of Hispanic or African descent (U.S. Department of Health and Human Services 2014). In a study on the effectiveness of the TST model with migrant youth, Hidalgo, Maravic, Milet, and Beck (2016) found that the implementation of TST improved communication between the youth and staff, resulted in effective development of treatment plans, and overall resiliency of youth through relationship building (see also Zelechowski et al., 2013).

Child welfare. Child welfare systems currently use trauma systems therapy-foster care (TST-FC) to inform their practices and guide clinicians when working with

children experiencing trauma (Brown, McCauley, Navalta, & Saxe, 2013; Murphy, Moore, Redd, & Malm, 2017; Redd, Malm, Moore, Murphy, & Beltz, 2017; Saxe, Ellis, & Brown., 2016). The child welfare system is the system that likely serves independently the most trauma-affected children. The involvement of children and youth in this system has led to higher rates of mental health problems compared to children in the general population (Kearney, Wechsler, Kaur, & Lemos-Miller, 2010; Kolko, 2010; McLaughlin et al., 2013).

The TST organizational model focuses on training and resources for parents in an attempt to provide trauma-informed care in the welfare setting. This model includes an optional clinical model that focuses on emotional and behavior regulation. Bartlett and Rushovic (2018) contend that in order for the child welfare system to become more informed about trauma, effective trauma screening and assessment protocols need to be incorporated, and caseworker need more knowledge about the effects of trauma to better assess trauma affected children, as well as the skills to address those effects. Service providers with special expertise in trauma treatment will be helpful in the child welfare systems (Cohen et al., 2017).

The administrators of Kaw Valley Center (KVC) in Kansas adopted TST and integrated it throughout their child welfare care continuum by incorporating all members of a child's care team. The goal was to provide an integrated system of care that includes trauma interventions throughout all points of contact between children, family, and other systems. To accomplish this, KVC collaborated with Dr. Saxe and his New York University colleague, Dr. Brown, to develop the materials necessary for training non-

clinical staff and implementing an innovative, enhanced, and expanded version of TST. KVC administrators developed and provided a wide range of training approaches including Web-based and e-learning modules specific to role performance. They also created fidelity measures for non-clinical service systems (Moore et al., 2016).

In 2010, Child Trends initiated a 5-year implementation and outcome evaluation of KVC's adaptation and expansion of TST. The goal of the evaluation was to understand how TST was integrated across a private child welfare organization and to assess whether this integration promoted positive outcomes, including well-being, placement stability, and permanency for the nearly 1,500 children 6 years of age and older who entered out-of-home care between 2011 and 2014. Evaluators used administrative data to examine child outcomes, training, and fidelity data to examine children's TST exposure or "dosage." Incorporating trauma-informed care throughout KVC's system took several years, and it was modified in some ways over time.

The evaluators found that KVC implementation was associated with increased staff knowledge of TST and among service providers in the broader social services system and community. With greater monitoring that lead to fidelity and system integrity, TST led to greater improvements in child well-being and placement stability. While the results of the evaluation indicated that TST could be effective in a large privatized child welfare setting, TST had not yet been implemented or evaluated in a public child welfare setting. Findings in studies conducted by The Annie E. Casey Foundation illustrated that it could be effective in the public domain, and TST-FC is being adapted to the public welfare system.

TST Clinical Model and School Social Work

In the school setting, the effects of exposure to trauma influence children's social and academic functioning. Goodman, Miller, and West-Olatunji (2012) found that students with a traumatic experience were three times more likely to have an individualized education program (IEP) and to have lower test scores on standardized assessment. Several authors/experts have referenced Shonk and Cicchetti (2001) in noting that discrepancies in academic accomplishments are prevalent among students with maltreatment histories (National Scientific Council on the Developing Child, NSCDC, 2010; Shonkoff & Gardner, 2012). In addition to academic underachievement, children who have experienced trauma show a range of internalizing and externalizing behaviors (Price, Higa-McMillan, Kim, & Frueh, 2013).

Walkley and Cox (2013) identified the need for school social workers to become involved in trauma informed care. This is consistent with the mandate that school social workers remove barriers to students learning, even though most initiatives to create trauma informed care in schools and communities have involved administrators and teachers (Stevens, 2012; Washington State Superintendent of Public Instruction Office, 2011; Wolpow, Johnson, Hertel, & Kincaid, 2016). However, given that Black students in HCPS receive disciplinary action twice as often as White non-Hispanic and who experience 20% more ACEs than White students nationally, school social workers should consider the possible effects of ACEs on the behavior of Black students in the school setting that results in disciplinary action.

In this study, I proposed to colleagues that school social workers adopt the TST clinical model of practice in providing service to Black students who have received disciplinary action in schools and who may be trauma affected. Prior to my presentation, I explored with school social workers assigned to specific schools how they might engage parents of Black students who have been disciplined in the therapeutic process and who may be trauma affected. In presenting the TST model, I questioned my colleagues regarding their thoughts on engaging families in understanding that ACEs and trauma related behavior of Black students that can result in disciplinary actions. I also questioned them on how they can utilize the strengths of and resilience in the child's family to engage them in helping their child regulate his/her emotions (Saxe, Ellis, Fogler, & Navalta, 2011; Saxe et al., 2015; Walsh, 2006). This information is needed to understand the feasibility of implementing TST with Black students who receive disciplinary actions in the SDHC.

Summary

Section 1 has provided the context for the study. It included pertinent and relevant information on trauma among children, how trauma systems therapy has been used to address trauma among children in both non-educational and educational settings, and the importance of school social work in addressing the needs of trauma-affected children. Despite the need for school social work to engage families on how adverse experiences lead to trauma and varying discipline outcomes for Black students, there is a major gap in the literature regarding TST in the practices of school social work. This is evident especially in the practices of school social workers who provide services to Black

students in the achievement zone schools of one large school district in southeastern United States who are at risk of being trauma affected.

Section 2: Research Design and Data Collection

The purpose of this study was to explore how school workers in the achievement schools of one large school district in the southeastern United States might engage parents of Black students who receive disciplinary actions in the therapeutic process. As the first step in using the TST, this information is necessary in order to determine the feasibility of social workers using this model of practice to address the needs of trauma affected students, especially in schools designated to serve students with high psychosocial needs and low academic achievement where the highest rate of disciplinary action is taken with Black students. I offered a presentation of the TST model to social workers in achievement schools, followed by questions regarding how they might engage parents/families in therapeutic process intended to address the effects of trauma on children in schools. Given that the first step in implementing this model is to engage families in helping trauma-affected children regulate their emotions, five questions were posed to the social workers in the focus group regarding their thoughts on how they can engage families in understanding that ACEs and trauma-related behavior may result in the disciplinary action taken with their Black children.

In most states, social workers must be certified to practice in schools, which requires extensive on-the-job training unique to working in the school setting. After providing the overview of the TST model of practice, I asked a small group of school social workers who provide services to students in the achievement zone schools about

how they might engage families of Black students who receive discipline and who may have encountered trauma. This section provides a discussion of the research design and methodology that I used to assess the feasibility of using the family engagement component of TST in work with Black students who receive disciplinary actions in the school setting.

Research Design

The purpose of this study was to explore how school social workers might practice with parents of Black students who receive disciplinary actions in order to determine the feasibility of using the information as the *engaging parents* component of TST. To determine the feasibility of social workers using this model of practice in those schools, I first presented the TST model of practice to a focus group of social workers assigned to practice in those schools, specifically illustrating the use of the model in helping families understand the connection between ACEs, trauma-related behavior, and discipline in the school setting. After presenting the overview of TST and emphasizing that engaging parents in the therapeutic process is the first step in using TST, I asked social workers to share their thoughts on how they might engage families whose Black children have been disciplined in understanding how ACEs and trauma-related behavior might result in discipline in the school setting. Consistent with my research questions noted in Section 1, the following five focus group questions were provided to participants.

1. *In what ways do you think that adverse events in the home might result in trauma effects among Black students who receive disciplinary action, and*

which events do you perceive have the greatest traumatic effect? Examples of adverse events that have been shown to impact Black children are separation/divorce, incarceration of parent/guardian or any other close relative, death of a parent/guardian, violence in the neighborhoods, violence in the home, or their own abuse.

- 2. In what ways can you as a school social worker be more involved in work with families to help them understand the student's response to adverse events s/he has experienced in the home, and how can you as a school social worker connect the effects of trauma from adverse events in the home to behavior in the school?*
- 3. How do you think school social workers can identify the resilience in families of students who have received disciplinary actions in the school setting, and in what ways do you think social workers believe that resilience can be used in integrating practice with the student and his/her family?*
- 4. In what ways do you believe that school social workers perceive they are able to help Black students who have received disciplinary action regulate their emotions, and how do you think that they help parents regulate the emotions of their child in the home?*
- 5. Do you think school social workers believe that school-based family counseling (SBFC) could be offered to parents/guardians whose Black child has received disciplinary action in the school setting in order to help*

the family members see how ACEs in the home might result in trauma that impacts behavior in school, and if so, how do you think our services would look as part of trauma informed practice with Black students who have received disciplinary action in the school setting.

In this action research, I assessed the feasibility of using the TST clinical model based on the extent to which school social workers believed they could engage parents of Black students who receive disciplinary action in the therapeutic process. The model was presented to school social workers who provide services in achievement zone schools that serve students with high needs and low academic achievement. In order to do this, I used a qualitative approach that involved a focus group of school social workers to assess their perspectives on how social workers can engage parents/families in work with trauma-affected Black children whose behavior results in disciplinary action. I used those perspectives to determine the feasibility of implementing the TST model of practice with Black students who receive disciplinary action and whose behavior may be trauma related.

The rationale for this particular study was that the school social workers in achievement zone schools provide services to a high number of Black students, and as such, they provide services to Black students who receive disciplinary action. The participants in this action research included 7 school social workers who serve Black students in Grades 2 through 5 in achievement zone schools, which are ones determined by federal guidelines to be schools with enrollments of at least 60% Black students.

These schools serve 8,034 students in the district, with 5,990 Black students in Grades 2 through five.

Methodology

With approval from the school social work supervisor, the IRB mechanism in the school district, and then the Walden University Institutional Review Board (IRB) (approval # 02-22-19-0590369), I selected a non-probability, purposive sample of 7 school social workers who serve Black students in the achievement zone schools of the school district. The selection was based on a “first come” and voluntary basis with the hope of including social workers who represent work with students in Grades 2 through five.

After listening to a presentation on the TST model of practice, the focus group of social workers was asked to share their perspectives on how they can engage parents/families of Black students who receive disciplinary action in understanding the connections between ACEs, trauma-related behavior in the school setting, and disciplinary action. Once data was collected, trends in the information participants provide was categorized to determine the feasibility of school social workers using the TST model in practice with Black students who receive disciplinary actions in achievement zone schools. The data was presented to all social workers who practice in the achievement zone schools in order to make a decision about implementing this model with Black students who receive disciplinary action.

Participants

I invited 20 school social workers in the district's achievement zone schools to participate in the study. An introductory email was sent to the supervisor of school social work services requesting permission to contact school social workers whose contact information is identified in the district's publicly available faculty and staff database. With approval from the supervisor, I sent another letter the IRB of the school district to obtain permission to conduct the study. With permission granted in the school district and receipt of a letter of support for the study, I received approval from the Walden University IRB.

Once permission was granted to conduct the feasibility study, I sent an email message to each of the 20 school social workers explaining the study and requesting their interest in participating in the study (see in Appendix A). The first seven social workers who agreed to participate in the study were contacted by phone to inform them of the date, time, and place they were to share information in a focus group. Had there been more than the 6-8 participants needed for a single focus group, I would have considered using two focus groups to collect additional data.

When the participants met in the focus group, I followed the protocol related to obtaining their informed consent (see Bradbury, Sudman, & Wansink, 2004). I then presented an overview of the TST model of practice, emphasizing that the first step in using the model was to engage families in the therapeutic process by helping their child/children regulate emotions and behavior. After the overview of the model was presented to the participants, I collected data via the focus group.

I used a focus group approach because it seemed to be one way to obtain information about how school social workers who serve primarily Black students might take the first step in the TST model of practice. As a form of qualitative research, focus groups have been used in social work research for years, though they were first used in sociology and psychiatry (Freitas, Oliveira, Jenkins, & Popjoy, 1998). Over the years, researchers have used focus groups as a means of collecting massive amounts of qualitative data that often explain or inform quantitative research.

Instrumentation

The questions in the interview were posed directly to the focus group participants. The questions were open-ended, allowing me to guide participants regarding their responses and thoughts on how they can engage parents/families in addressing the needs of their trauma affected Black children who receive disciplinary action. The open-ended guided questionnaire reflected the interview questions (see Appendix), and I audio recorded the participants' responses to the questions.

Data Analysis

With the permission of the participants, I audio recorded and transcribed their responses. I then compiled these responses into themes, and once themes were identified, made notes in the margins of the text in the form of ideas, as well as short phrases that showed up in the text. The accumulated responses to each question were coded and displayed by categories. I then sifted, highlighted, and sorted the data to make comparisons for a final analysis. I used triangulation to compare the viewpoints of participants in their responses to focus group questions (see Denzin, 1978; Patton, 1999).

In turn, this procedure contributed to understanding the extent to which there is agreement, or reliability, in their responses. The extent to which there is agreement in responses allowed for understanding the extent to which the aggregated response to each question was valid.

Ethical Procedure

I asked participants to confirm their voluntary participation in the feasibility study and their status as an elementary school social worker before I began asking questions. All participants were asked to sign an informed consent form before questioning began. In the initial email, I had directed potential participants to a statement of informed consent, which described the purpose of the study as well as any risks and benefits of participation.

Summary

This section addressed the design and methodology of the study, as well as the data analysis and ethical procedures I used to conduct the study. The design section highlighted the use of the focus groups to collect data. The methodology subsection described participants and the instrument used to collect data from the participants who were school social workers who provide services in the school district. The instrument included five questions that asks how the participants might engage parents of discipline Black children in understanding the connection between ACEs and behavior of children in schools. With the design and data collection section in mind, I present the findings in Section 3.

Section 3: Presentation of Findings

The purpose of this study was to explore how school social workers in the achievement schools of one urban district in the southeastern United States might engage parents of Black students who receive disciplinary actions in the therapeutic process. This information is necessary in order to determine the feasibility of using the TST model of practice in schools designated to serve students with high psychosocial needs and low academic achievement where the highest rate of disciplinary action is taken with Black students. Thus, after presenting the TST model of practice to a focus group comprising social workers who serve students in the achievement schools where the rate of disciplinary actions is high among Black students, I posed the following questions:

1. In what ways do school social workers think that adverse events in the home might result in trauma effects among Black students who receive disciplinary action and which events do they perceive have the greatest traumatic effect? Examples of adverse events that have been shown to affect Black children are separation/divorce, incarceration of parent/guardian or any other close relative, death of a parent/guardian, violence in the neighborhoods, violence in the home, or their own abuse.

2. In what ways can school social workers be more involved in work with families to help them understand the student's response to adverse events s/he has experienced in the home, and how can school social workers connect the effect of trauma from adverse events in the home to behavior in the school?

3. How can school social workers identify the resilience in families of students who have received disciplinary actions in the school setting, and in what ways do they

think that resilience can be used in integrating practice with the student and his/her family?

4. In what ways do school social workers perceive they are able to help Black students who have received disciplinary action regulate their emotions, and how they help parents regulate the emotions of their child in the home?

5. Do school social workers think that school-based family counseling (SBFC) could be offered to parents/guardians whose child has received disciplinary action in the school setting in order to help the family members see how adverse effects in the home might result in trauma that impacts behavior in school, and if so, how do they think SBFC would look as part of trauma informed practice with Black students who have received disciplinary action in the school setting.

During the focus group discussion, study participants responded directly to the questions that focused on TST, ACEs, and working with Black students who have received disciplinary actions. The participants also discussed how social workers might engage parents and families in work with their Black children whose behavior in school may be trauma related and a result of the ACEs they have experienced in the home environment. The research findings presented in this section are based on analysis of data elicited from participants in the focus group. In this section, I first discuss the data analysis techniques I used. Second, I present the findings of the study.

Data Analysis Techniques

Qualitative research includes a constant interchange between data collection and data analysis (Strauss & Corbin, 1994). I completed recruitment for the focus group 1

week after the initial email, invitation was sent to potential participants. After recruitment, I conducted the 1-hour focus group and began analysis the following day in order to identify patterns.

The steps I took in analyzing the data followed the steps in Creswell's (2009) procedure. Those steps included: (a) organizing and prepare the data for analysis, which involved reviewing the audio tape from interview and transferring the text word-for-word into a word document transcript; (b) reading through the data to reflect on the information and ideas the participants conveyed in order to obtain on the overall meaning and a general sense of what the participants conveyed; and (c) analyzing in detail the information using Microsoft Excel as a means of coding categories. This process allowed for organizing the text into segments of text data and sentences into categories and then labeling those categories with terms based on the actual language from the participants.

I used this same process to generate codes for the descriptions, which then led to generalizing a small number of categories or themes. Once that was completed, I took the following remaining steps: (a) themes that emerged were analyzed; (b) themes/research questions were integrated into narrative passages; and (c) narrative passages were used to interpret the meaning of the data. I validated the process by using the script for the focus group and acting as the only facilitator. Further validation was given through data triangulation.

I used triangulation to compare the participants' different viewpoints. The feedback of participants for each focus group question was compared to determine areas of agreement as well as areas of divergence. For Questions 1 through three, there were

several areas of agreement. All seven participants expressed that some parents of Black students in the district were not physically and emotionally present, were young, and needed education on trauma and the effects of adverse experiences that occur in the lives of Black students. For Question 3, which focused on identifying resilience in families, all seven participants expressed that the major strength of students who have disciplinary issues is that they are rarely absent.

When discussing Question 4, which addressed the ways in which social workers, believe they can help Black students regulate their emotions, there was divergence in participant responses, with two of seven participants expressing that collaboration with teachers was important. By comparison, there was agreement among four participants that teaching students how to identify their feelings and how to express their feelings, as well as how to set healthy boundaries, would be helpful.

The responses to Question 5 that asked participants about the possibility of implementing school-based family counseling (SBFC) resulted in the most divergence. All seven participants expressed that SBFC can be beneficial. However, the group questioned what this would look like and whether or not school social workers should be the responsible party in providing this service. This response reflected concern about workload in the event that SBFC were to be implemented.

I examined the consistency of data by triangulating the viewpoints of participants. In summary, for Questions 1 through four, the responses of participants were similar, which indicated that the responses have some validity. However, for Question 5, the

responses of participants were varied, which indicated that there is little validity in knowing whether the implementation of SCFC would be an option.

This study provided information on the role of school social workers and parents in working together with Black students who receive disciplinary actions for behaviors that can be related to ACEs. As a result, the focus group provided minimal information on ACEs among other student populations. Another limitation in this study is that the findings are based on the experience of seven school social workers in one region. The purpose of this study was to explore how school workers might practice with parents of Black students who receive disciplinary actions in order to determine the feasibility of using the information as the *engaging parents* component of TST.

Findings

In this section, I discuss the characteristics of participants and their thoughts on how school social workers in achievement schools might better engage parents of Black students who have been received disciplinary action in the therapeutic process is discussed. A total of seven participants engaged in the focus group discussion. The participants met the criteria for achievement elementary school social workers in pre-k through 5th grade settings. All were self-identified urban elementary school social workers with a mean 33 years of age and who held a MSW degree, a requirement to be hired as a school social worker in this district. All of the school social workers in this study reported that most of their knowledge about TST was limited to knowledge of trauma informed practices obtained through trainings and workshops and college courses.

Focus Group Question 1

In the first question I asked: In what ways do school social workers think that adverse events in the home might result in trauma effects among Black students who receive disciplinary action and which events do they perceive have the greatest traumatic effect?

The adverse events that social workers think have the greatest impact on trauma and negative behaviors of Black students who receive disciplinary action are neglect, incarceration, and separation from parents. Many respondents believed that the adverse experiences of Black students result in their inability to trust adults. Specifically, “inconsistency with adults in their lives” and/or “lack of closure from an absent parent” make it difficult for affected Black children to trust adults at school, which often leads to no communication and increased negative behaviors. Participants thought that ACEs were strongly associated with behaviors seen in the classroom. Furthermore, participants discussed the effects of those events on students’ mental health, including post-traumatic stress disorder (PTSD), anxiety, or mood disorders. Participants contended that the behaviors that are often exhibited in schools and lead to disciplinary actions are the result of mental health concerns stemming from exposure to ACEs.

Focus Group Question 2

In the second question I asked: In what ways can school social workers be more involved in work with families to help them understand the student’s response to adverse events s/he has experienced in the home, and how can school social workers connect the effect of trauma from adverse events in the home to behavior in the school?

All participants reported providing education on mental health as the most important way for school social workers to help families understand Black students' response in schools to ACEs that occur in the home. Participants expressed concerns regarding parents' apprehensions to having a conversation regarding adverse experiences and the effect on Black students due to the stigma regarding of mental health concerns. Five participants thought that it is the responsibility of the school social worker to remove barriers that affect the disciplinary actions toward Black students. On the other hand, only two participants thought that it would take a multidisciplinary team approach to help parents understand the Black students' response to ACEs experienced in the home. Other factors that participants identified when discussing ways in which school social workers can help families understand the response of Black students to adverse experiences included generational adverse experiences, such as "sometimes parents think it's okay, younger parents raising children," and "community issues." All participants engaged in discussion focused on how these factors negatively affect the understanding parents have regarding the ACEs of their Black children/students.

When discussing how school social workers and family members can connect trauma effects to the adverse behaviors of Black students in the school, three participants believed that using parents who have experienced ACEs would be helpful in talking to other parents. All participants expressed concerns regarding parent's apprehensions about having a conversation regarding the effects of adverse experiences due to the stigma often associated with mental health issues. Due to this, three participants thought that

these conversations must take place in a social setting or be led by parents who have dealt with a child negatively impacted by ACEs.

Focus Group Question 3

In the third question I asked: How can school social workers identify the resilience in families of students who have received disciplinary actions in the school setting, and in what ways do they think that resilience can be used in integrating practice with the student and his/her family?

During the focus group, school social workers thought that considering the school attendance for Black students who have received disciplinary actions is a strong step toward identifying resiliency. All the the participants believed that these are the students who are typically in school daily, and as such, utilizing their good attendance in a way to show resiliency as a way to make a connection with the family or trying to make a system of support for those students. Overall, the participants agreed that using school data to identify student strengths could aid in identifying resiliency in Black students who have received disciplinary actions.

Focus Group Question 4

In the fourth question I asked: In what ways do school social workers perceive they are able to help Black students who have received disciplinary action regulate their emotions, and how they help parents regulate the emotions of their child in the home?

Participants emphasized the need to build relationships with students and parents so that they feel welcome and involved. Caring, connecting, and collaborating with parents for students were points also emphasized by social workers. Strategies

participants found helpful to address regulating emotions include being a safe person for the student, implementing calming strategies, using thought-stopping strategies to change faulty thinking, and teaching students about boundaries. Four participants believed that a structured approach with parents in discussing parenting skills, implementing consistent interventions in the home and at school, and becoming partners with the parent is another step that school social workers could take in helping Black students who have received disciplinary actions regulate their emotions. Three participants suggested that helping the teacher to build a positive culture within the classroom setting would also be beneficial.

Focus Group Question 5

In the fifth question I asked: Do school social workers think that school-based family counseling (SBFC) could be offered to parents/guardians whose child has received disciplinary action in the school setting in order to help the family members see how adverse effects in the home might result in trauma that impacts behavior in school, and if so, how do they think SBFC would look as part of trauma informed practice with Black students who have received disciplinary action in the school setting?

All participants share that SBFC is needed in schools to assist Black students who received disciplinary actions. Many of the participants thought that having SBFC would aid in parents following through with services that are recommended. Some of the participants believed that this could be successful if parents were included at the outset of intervention, and if the counseling took place at after school. However, two participants raised concerns regarding the students ability to transition back into the classroom setting after receiving therapy on campus if intervention occurred during the school day. Other

factors that participants thought should be considered included time available for school social workers to provide this services, including more support from school-based staff, insurance and payment for therapy, and transitions after counseling sessions.

Summary

Section 3 presented the findings for the study. The findings presented provided insight into how school social workers might engage parents of Black students who receive discipline in the districts' achievement schools in a therapeutic and intervention process specifically related to the TST model of practice. That insight is relevant to the recommendations I offer in Section 4 to enhance professional school social work practice intended to address the needs of trauma-affected children.

Section 4: Application to Professional Practice and Implications for Social Change

The purpose of this study was to explore how school workers in the achievement schools of one school district might engage parents of Black students who receive disciplinary actions in the therapeutic process. This information was necessary to determine the feasibility of using the TST model of practice in the achievement schools designated to serve students with high psychosocial needs and low academic achievement where the highest rate of disciplinary action is taken with Black students. I presented an overview of the TST model of practice to a focus group of social workers who serve students in Grades 2 through 5 in the achievement schools. I emphasized in the presentation that the first step in using TST is to engage the family in the therapeutic process in order to help their trauma-affected children regulate emotions.

In response to questions posed to school social workers who participated in the focus group, findings can be summarized in the following way. First, the ACEs of Black students who receive disciplinary action most often are neglect, incarceration of parents, and separation from parents, which social workers believes result in a lack of trust in the school setting. Second, the effects of ACEs are associated with mental health problems, but this topic might be difficult to address in families of Black children who receive disciplinary action. Third, families may believe that the behavior of their children is typical relative to family members' experiences with ACEs and school behavior, though identifying a parent or family member who can comprehend the meaning of ACE might be helpful in collaborating with parents/family members who are unaware of the impact that ACEs have had on their own behavior. Fourth, school-based family counseling is

needed to engage the family in the therapeutic process necessary to address the needs of Black students who receive discipline that may be a result of trauma-related behavior. In addition to these expected findings, participants noted that resilience of the families of Black children who receive discipline was seen in children's consistent attendance.

This study aimed to explore how school workers in the achievement schools might engage parents of Black students who receive disciplinary actions in the therapeutic process, and the results allowed for assessing the feasibility of school social workers implementing TST by engaging families of Black students with high disciplinary records in the therapeutic process. Given the findings, the implementation of parent and family engagement, a component of TST, is feasible when working with families of Black students who have ACEs that may contribute to their disciplinary outcomes in school. TST previously has been found to be effective in clinical settings. The emotional regulation, behavioral regulation, and functioning of children can be enhanced by the implementation of parent and family engagement, a component of TST. Furthermore, school social workers were open and willing participants in the provision of TST.

In addition, I explored more specific knowledge about how ACEs manifest in the classroom, understanding of school's concerns and needs in the management of self-regulation for Black students, and the need for processes and contextual influences of parent engagement occurring in achievement school settings. Most evident in the findings was that achievement school social workers demonstrated knowledge of the etiology of ACEs and about the need for parent education for ACEs and trauma. They were also knowledgeable about strategies used to help Black children self-regulate in schools.

Among the various interventions, parental engagement was mentioned as the most important point for collaboration. Finally, while school social workers valued the use of TST and parent engagement, they also found that significant barriers were present. School social workers reported issues with time constraints, limited resources (i.e., multidisciplinary members' involvement and referral sources for mental health services), and most surprisingly, lack of support and receptiveness from school staff to focus on TST with students. This section will provide recommended solutions and application for professional ethics and social work practice.

Application for Professional Ethics in Social Work Practice

The National Association of Social Workers (NASW) code of ethics is the primary ethical guidance for social workers, including school social workers. When school social workers consider the social work practice problem of trauma-informed care for students in school, the values of competence and service are addressed through their knowledge and practice. In the area of school social work, competence means striving to increase knowledge regarding trauma and the impact on children. When speaking of the value of service as it relates to this project, school social workers' goals are to help children, families, and schools address the social problems that can result from exposure to trauma.

School social workers encourage the contribution of parents in choices that affect their children and attempt to empower parents with the skills and knowledge to act in the best interests of their child. School social workers also support the developing independence of students as they mature and use a collaborative decision-making process

that is consistent with students' development, age, and mental health. Understanding the values of NASW, school social workers strive to balance ethical rights and well-being of students, and the rights of parents to receive information regarding activities in which their children are involved. To ensure practice is evidenced-based, school social workers utilize available evidence-based strategies and programs, analyze available data to guide their practice, and regularly evaluate their practice and the needs of students to improve services.

Recommendations for Social Work Practice

The findings of this study led me to make the following recommendations. First, in order to address research findings two and three, policy is needed in the achievement schools of the school district that mandates social workers have access to education and training about the differences between trauma-affected students and those with mental health diagnoses as identified in the DSM-5. In addition, a policy that mandates funding for the implementation of TST with Black student who receive disciplinary action and their families would help school social workers to receive training and resources to best utilize this model of practice.

Evidence that school social workers in those schools have knowledge of ACEs and value collaboration with parents indicates that the future scope of school social work can be broadened to be more trauma focused. While school social workers have historically practiced in a student-centered manner and provided individual and group services, the current school climate calls for a shift from this model of practice to one that is trauma focused. The new model of practice would include collaboration with parents

and families in the using interventions that address the needs of Black students who receive disciplinary action for what might be trauma-related behavior.

Practice that involves engaging both parents/families and social workers in understanding the effects of ACEs and modeling effective strategies for parents may result in maximizing school capacity to address disruptive behaviors and trauma-related disorders with Black students while also increasing family engagement. This can be done using parents who have experienced and understand ACEs to engage other families who may not have that knowledge. Furthermore, also engaging those families that seem to be resilient relative to attendance will allow for the implementation of more proactive measures. . An expected outcome would be a wider range of Black students who can benefit from effective self-regulating strategies, rather than only those being seen directly by the school social worker for behavior concerns. Furthermore, the findings and recommendations from this study were presented to the school social workers in this particular school district. It will also be made available as an academic paper accessible for reading and information purposes.

Additionally, this type of collaborative practice may serve to maximize and promote the school social worker role in engaging families of students who are experiencing ACEs. Practice recommendations also include providing parents with at home support and collaboration regarding ACEs, TST, and other needs of the student. This type of practice can lead to the school social worker building relationships with families and helping families to understand first-hand the concerns of their students at home and within the classroom setting.

In terms of future research needed to support the possible use of TST, a single-subject pretest-posttest design seems needed for social workers to understand how to engage parents in helping a child regulate trauma related emotions and behaviors. This would involve one social worker in an achievement school identifying a Black student who has been disciplined numerous times and who has experienced ACEs in the home but who also has excellent attendance. The social worker could then use TST strategies to engage parents/family members in the therapeutic process.

Implication for Social Change

The results of this action research project have implications for positive social change. First, using the parent and family engagement component of TST could be the first step in changing how Black students and their families engage in the educational process on a micro level. Likewise, it could be the first step in modifying school social work service in the achievement schools.

Second, by identifying the relationship between the ACEs and discipline of Black students, school social workers can begin to make it a priority to establish safe therapeutic school environments. This can lead to a decrease the suspension and expulsion rates for Black students, as well as engage parents and families in keeping Black students in school rather than excluding them. A possibility could be changing the course of disciplinary actions taken with Black students for behaviors that may be the result of trauma affects. Creating a presentation that entails disciplinary data, ACEs, and parent engagement can be presented at the state and national levels. Third, if using the parent and family engagement component of TST could increase the engagement of

families whose Black children have been disciplined, then this could have long-term ramifications for bettering communities with adults whose behavior does not involve them with law enforcement and corrections. Last, the most important social change implication would be increasing the opportunities for Black students to lead more productive lives in their community and society.

Summary

In this study, I showed that school social workers in achievement school settings are equipped to understand and address trauma. Further, I showed that although they were met with certain barriers, collaboration opportunities exist for both parents and school social workers to address the needs of Black students. In an era of standardization and accountability and as the prevalence of ACEs continues to increase for Black children with the behavior concerns in school, low-income urban schools must equip themselves with and support staff who can provide appropriate services for students who would otherwise not have access to them. Providing appropriate services to at-risk students includes having a well-informed and proficient staff, an infrastructure that allows for parent engagement, and the incorporation of SBFC.

Urban schools would benefit from promoting and utilizing school social workers as resources to support parents not only in the area of ACEs but with other disruptive behaviors and trauma related concerns. Urban schools would benefit from assessing their systems for parent engagement and continue to support the process. This support can be particularly sought through providing clarity about roles and functions of all stakeholders and maximizing forums where parent engagement can thrive. Both school social workers

and parents are participants in multidisciplinary teams, an opportunity where both training around ACEs, and collaboration efforts can be discussed and planned. Focusing on team functions can alleviate a lot of time constraints and heavy workload experienced by both the parent and school social workers, and in turn foster interdependence between the two as well as other school staff.

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Appendix: Focus Group Narrative

Self Introduction

Hello. My name is Lateshia Milton. I will lead the group in answering five questions. I'd like to begin by thanking each of you for taking time to participate today. We will be here for about an hour and a half so you can each share your thoughts about how social workers might engage families in understanding the connections between adverse childhood experiences, trauma related behavior, and discipline of Black students in schools. This session will be audiotaped, but the identities of all participants and their contributions should be held in highest confidence.

The recording allows me to revisit our discussion for the purposes of determining the feasibility of our using the TST model of practice in the achievement zone schools with Black students who receive disciplinary action.

Rules

To allow our conversation to flow more freely, I'd like to go over some ground rules.

1. Only one person speaks at a time. This is doubly important as our goal is to make an written transcript of our conversation today. It is difficult to capture everyone's experience and perspective on our audio recording if there are multiple voices at once
2. Please avoid side conversations.
3. Everyone doesn't have to answer every single question, but I'd like to hear from each of you today as the discussion progresses.
4. *This is a confidential discussion in that I will not report your names or who said what to your colleagues or supervisors. Names of participants will not even be included in the final report about this meeting.* It also means, except for the report that will be written, what is said in this room stays in this room.
5. We stress confidentiality because we want an open discussion. We want all of you to feel free to comment on each other's remarks without fear your comments will be repeated later and possibly taken out of context.
6. There are no "wrong answers," just different opinions. Say what is true for you, even if you're the only one who feels that way. Don't let the group sway you. But if you do change your mind, let me know.
7. Are there any questions?

Introduction of Participants

Before we start, I'd like to know a little about each of you, so could each of you please tell me about yourself, including: (a) your name; (b) your role is with the school district of Hillsborough county; (c) the school you are currently serving; (d) years of service with the district; (e) any pre service training you have received as a school social worker; (f) education and/or training on adverse childhood experiences and trauma; (g) training you have received in supporting students experiencing ACEs?; and (h) knowledge of Trauma Systems Therapy?

Overview of the TST Clinical Model of Practice

Focus Group Questions

Focus Group Question 1: In what ways do you think that adverse childhood events (ACEs) in the home might result in trauma effects among Black students who receive disciplinary action, and which events do you perceive have the greatest traumatic effect? (The adverse events that have been shown to impact Black children most are separation/divorce, incarceration of parent/guardian or any other close relative, death of a parent/guardian, violence in the neighborhoods, violence in the home, or their own abuse, respectively). Are there other ACEs

Focus Group Question 2: In what ways do you think that school social workers can be more involved in work with families to help them understand the Black student's response to adverse events s/he has experienced in the home, and how do you think school social workers and family members can connect the effect of trauma from adverse events in the home to behavior in the school?

Focus Group Question 3: In what ways do you think school social workers can identify the resilience in families of Black students who have received disciplinary actions in the school setting, and in what ways do you think that the resilience identified can be used in integrating practice with the student and his/her family?

Focus Group Question 4: In what ways do you think school social workers perceive they are able to help Black students who have received disciplinary action regulate their emotions therapeutically, and how do you think they can help parents to regulate the emotions of their child in the home?

Focus Group Question 5: Do you think school social workers believe that school-based family counseling (SBFC) could be offered to parents/guardians whose child has received disciplinary action in the school setting, and if so, how do you think SBFC would look as part of trauma informed school social work practice with Black students who have received disciplinary action in the school setting and their families.

Closing

Thank you for coming today and answering the question about engaging families in the therapeutic process with Black students who receive disciplinary actions. Your comments have provided social workers with different ways to possibly use TST as a means of modifying how we work with Black students who receive disciplinary action. Again, I thank you for your time.