

The Trauma Teachers Bring to Teaching: First-Year Teacher Results from the Traumatic Life Events Checklist

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ABSTRACT

As schools and districts support teachers through their first year of teaching, do they fully understand the depth of primary trauma that first-year teachers may bring? This paper highlights a focused analysis of a larger study examining teacher secondary traumatic stress. This sub-study focuses on primary trauma of the participants, the traumas first-year teachers may bring from their lives as they enter the teaching field. Ninety-one first-year teachers completed the Life Events Checklist, a scale that screens for potentially traumatic events in a respondent's lifetime. Ninety-one percent reported experiencing one or more primary traumas, ranging from struggles with mental health to sexual assaults to witnessing school shootings. This critical finding uncovers an aspect of the experience that first-year teachers may bring to the classroom and offers implications for teacher preparation and the teaching field.

Keywords: potentially traumatic experiences (PTE), post-traumatic stress disorder (PTSD), trauma, first-year teachers, secondary traumatic stress

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The teaching profession faces unique challenges, with high stress levels and attrition rates particularly prominent among first-year teachers. Research suggests that 30% of teachers leave the field within their first three years, often citing stress as a major factor (NCES, 2022; Steiner & Woo, 2021). While societal expectations often portray teachers as superhuman figures capable of handling any situation, they are human beings who bring their own experiences, including potentially traumatic events (PTEs), into the classroom (Dinham & Scott, 2000).

This study focuses on an under-researched area, examining the prevalence of PTEs among first-year teachers and their potential impact on the teachers' well-being and effectiveness. It builds upon existing literature on the detrimental effects of trauma exposure, particularly within other helping professions (Felitti et al., 1998; Henderson et al., 2025; Leung et al., 2022). While professions like counseling and nursing incorporate training on handling stress and trauma into their curriculum (Aktan et al., 2023; Levers, 2012), teacher preparation programs typically do not address PTEs or their potential influence on teachers.

This paper presents a focused analysis within a larger study conducted from Fall 2021-Spring 2024. The larger study examines the impact of trauma-informed practices (TIP) on teacher secondary traumatic stress, TIP knowledge, and confidence in applying TIPs in the classroom (Castro Schepers, Grevstad, Young, & Brennan, 2025).

The larger study examined the implementation of TIP interventions through two formats: online asynchronous modules (OM) and monthly reflective consultations (RC). It was hypothesized that both interventions would increase teacher TIP knowledge, increase their confidence in the application of TIP knowledge within their classroom practices, and reduce teacher secondary traumatic stress. To fully understand the impact of the interventions and consider causality, teachers were randomly assigned to one of three experimental conditions: the control group, OM, or RC. The larger study found that all teachers in the study increased their TIP knowledge and confidence over time. However, the increase was statistically significantly higher for those in one of the two experimental conditions. Additionally, those who experienced an increase in TIP confidence saw a reduced level of secondary traumatic stress, which was also statistically significant (Castro Schepers, Grevstad, Young, & Brennan, 2025). To account for possible confounding variables, the larger study collected data on primary trauma from the participants, which forms the basis of this paper.

This sub-study delves into primary trauma by examining the Potentially Traumatic Events (PTEs) teachers reported in 2021 on the Trauma Life Events Checklist (TLEC). The TLEC is a checklist developed and accessed through the National Center for Post-Traumatic Stress Disorder and was intended to capture serious emotional and potentially traumatic events that respondents report.

Since the seminal Adverse Childhood Experiences (ACEs) study by Felitti et al. (1998), researchers have highlighted the widespread impact of early traumatic events in the United States and beyond. The ACEs study found that about 64% of adults had experienced at least one ACE before age 18, and nearly 1 in 6 had experienced four or more. The ACEs study showed that experiencing four or more childhood traumas greatly increases the risk of chronic health conditions and serious mental illness later

in life (Felitti et al., 1998). Current rates of ACEs are even higher than when the original study was conducted (Swedo et al., 2023).

Traumatization occurs when a person's experience of trauma overwhelms their ability to cope. This can lead to lasting negative effects on their mental, physical, social, emotional, or spiritual well-being (SAMHSA, 2014). Due to the subjective experience of trauma, different types and severities of traumas may continue to affect people over their lifespan. Unaddressed or unresolved trauma occurs most commonly when, rather than processing the traumatic event, the person tries to suppress and forget that the experience occurred (Van der Kolk, 2014). Traumas that remain unaddressed have the possibility of resurfacing in future social interactions (Van der Kolk, 2014). One population that we do not know much about in relation to PTEs is the PTEs experienced by teachers before they enter the field of teaching, which prompted this research.

This research focuses on a gap in knowledge—the PTEs experienced by teachers before entering the field. Building on existing literature, the study explores: What are the potentially traumatic events first-year teachers have reported experiencing? How do they vary by demographic groups? Which PTE clusters were most prevalent for first-year teachers?

These questions are answered by examining first-year teachers' responses to the Traumatic Life Events Checklist (TLEC). More specifically, this research explores a question on the checklist that asks, "What is the worst thing (according to the TLEC) that you have experienced?" The first-year teachers define that worst thing for themselves as, "the event that currently bothers you the most" (Weathers et al., 2013).

By examining the answer to this question, this study aims to deepen our understanding of the challenges faced by first-year teachers. This knowledge can then be used to inform the development of more comprehensive teacher preparation programs and support systems that acknowledge the potential impact of PTEs and equip teachers with tools to manage their well-being while building positive learning environments for their students.

CONCEPTUAL FRAMEWORK

This paper presents a conceptual framework to examine the influence of pre-existing, traumatic experiences (PTEs) of first-year teachers. While research acknowledges the prevalence and impact of secondary traumatic stress (STS) among helping professionals, including teachers working with traumatized students, a critical gap exists in understanding the role of teachers' *own* trauma histories. This framework addresses this gap, arguing that PTEs significantly influence teachers' well-being, performance, and susceptibility to STS, particularly during the challenging first year of teaching.

Extensive research highlights the impact of STS on various helping professions (Henderson et al., 2025; Leung et al., 2022). This literature establishes a clear link between personal trauma history and increased vulnerability to STS in healthcare professionals (Choi, 2011; Hensel et al., 2015; Hydon et al., 2015; Leung et al., 2022; Sprang et al., 2011; Yazıcı & Özdemir, 2022). While professions like counseling, nursing, and psychology incorporate training on stress and trauma management into

their curricula (Aktan et al., 2023; Levers, 2012), teacher preparation programs typically do not address PTEs or their potential impact on teacher well-being. This omission is significant, as teachers, like other helping professionals, are exposed to potentially traumatizing material through their work with students.

This paper argues that first-year teachers enter the classroom not only with their academic training but also with their unique lived experiences, including PTEs. These PTEs can significantly affect various aspects of their professional lives, including cognitive functioning (attention, memory, learning, and decision-making), interpersonal relationships (building and maintaining relationships with students, colleagues, and parents), overall well-being (physical and mental health), and job performance or effectiveness in the classroom (Brackett & Cipriano, 2020). This impact is particularly relevant given the high stress levels and attrition rates among first-year teachers (NCES, 2022; Steiner & Woo, 2021), with approximately 30% leaving the profession within their first three years.

This framework posits that teachers' PTEs increase their vulnerability to STS when working with students who have experienced trauma. This vulnerability is further exacerbated by the novice status of first-year teachers, who are generally more susceptible to STS than experienced educators (Bell et al., 2003; Devilly et al., 2009; Parker & Henfield, 2012). The potential consequences of STS in teachers include feelings of helplessness and overwhelm (Castro Schepers, 2023; Schepers, 2017). Teachers' experiences can have long-lasting negative impacts on children's social outcomes, work opportunities, and overall mental well-being.

This paper adopts the definition of a traumatic event as one involving actual or threatened death or serious injury, eliciting intense fear, horror, or helplessness (Contractor et al., 2020). PTEs are categorized into three clusters (Contractor et al., 2020):

- **Accidental/Injury Traumas:** Accidents, severe injuries to self or loved ones.
- **Victimization Traumas:** Rape, sexual assault, physical abuse.
- **Predominant Death Threat Traumas:** Life-threatening situations, witnessing violent deaths.

While different PTEs can evoke varying responses (Breslau et al., 1999; McLaughlin et al., 2013; Shakespeare-Finch & Armstrong, 2011), and the subjective experience of the event is crucial (Dohrenwend, 2010; McNally & Robinaugh, 2011; Rubin & Feeling, 2013), understanding the types and prevalence of PTEs in first-year teachers is essential for developing effective support systems.

Breslau et al., (1999, 2000), Shakespeare-Finch and Armstrong (2011), and McLaughlin et al., (2013) found higher levels of post-traumatic stress for sexual and other forms of violence relative to other potentially traumatic events. The severity of the event does not always correlate to symptom severity (Dohrenwend, 2010; McNally & Robinaugh, 2011). The "person's own judgment of the severity of the event" matters more than an outside observer's categorizing of the event's severity (Rubin & Feeling, 2013). Rubin and Feeling (2013) continue, "The cases for differences between categories of traumas, for differential effects occurring as a

function of the developmental stage at the trauma, and for the cumulative effects of traumas are substantial.” By understanding the number and types of PTEs in first-year teachers, stakeholders can better plan effective support in teacher preparation and induction.

METHODS

The data in this paper are drawn from a more extensive mixed-methods data set that examined the relationship between secondary traumatic stress (STS) and trauma-informed practices (TIP) and uses a sequential explanatory mixed-methods design (Creswell & Clark, 2017). All procedures were approved by the Metropolitan State University of Denver Institutional Review Board. The study combines a quantitative, experimental design (Creswell & Clark, 2017) with qualitative semi-structured interviews. The participants were randomly assigned to one of three groups, two of which were interventions, and one served as a control group, structured as a delayed treatment group.

During the study, data were collected to respond to the various research questions. The quantitative sources that were collected included the Teacher STS Scale, TIP Knowledge Assessment, The Traumatic Life Events Checklist (TLEC), and Machl’s Burnout Scale. These tools were disseminated over three years to understand how teachers experience STS and understand TIP knowledge. Researchers conducted qualitative interviews each year following the quantitative measures to further explain the findings.

Participants

The 91 randomly assigned participants in this study ranged from ages 21-54, with 85% of participants between the ages of 18 and 34. The majority self-identified as female (80%), white (73%), and working (37%) or middle class (47%). Approximately half taught in early childhood (9%) or elementary (44%), while the other half taught in middle (24%) or high schools (23%) (see Table 1). These trends are largely representative of national teacher trends in the United States (U.S. Department of Education, 2017–18).

Table 1: Teacher Demographics

	N	%		N	%
<i>Age</i>			<i>Gender</i>		
18-24	35	38.57	Female	73	80.2
24-34	42	46.2	Male	17	18.7
35-44	7	7.7	Non-binary	1	1.1
45-54	7	7.7			

<i>Race</i>			<i>Socioeconomic status</i>		
Asian or Pacific Islander	2	2.2	Working Class	34	37.4
Bi-racial	4	4.4	Middle Class	43	47.3
Black or African American	3	3.3	Upper Middle Class	14	15.4
Latino/a or Hispanic	15	16.5			
North African/Middle Eastern	1	1.1			
White	66	72.5			

<i>School Level</i>			<i>Title 1 School</i>		
Pre-K	8	8.8	No	42	46.2
Elementary	40	44	Yes	38	41.8
Middle School	22	24.2	Not Sure	11	12.1
High School	21	23.1			

Data Source

A subset of data from the Traumatic Life Events Checklist (TLEC) was used to inform this paper (Weathers et al., 2013). The TLEC assesses exposure to 16 events known to potentially result in PTSD or distress. These include: natural disaster (for example, flood, hurricane, tornado, earthquake); fire or explosion; transportation accident (for example, car accident, boat accident, train wreck, plane crash); serious accident at work, home, or during recreational activity; exposure to toxic substance (for example, dangerous chemicals, radiation); physical assault (for example, being attacked, hit, slapped, kicked, beaten up); assault with a weapon (for example, being shot, stabbed, threatened with a knife, gun, bomb); sexual assault (rape, attempted rape, made to perform any type of sexual act through force or threat of harm); other unwanted or uncomfortable sexual experience; combat or exposure to a war-zone (in the military or as a civilian); captivity (for example, being kidnapped, abducted, held hostage, prisoner of war); life-threatening illness or injury; severe human suffering; sudden violent death (for example, homicide, suicide); sudden accidental death; serious injury, harm, or death you caused to someone else; and any other very stressful event or experience to address any other extraordinarily stressful event not captured in the first 16 items. This last question is followed by a request for more details about the worst event in someone's life. Table 2 below provides further explanation of how

the categories are divided into subscales and provides examples of each.

Table 2: Trauma Life Events Checklist Subscale Category, Explanations, and Examples.

Category	Brief Explanation	Example
General Trauma Events	These include events such as accidents, natural disasters, or being exposed to death or serious injury.	Motor vehicle accidents, fires, earthquakes, floods, witnessing a serious accident.
Interpersonal Violence	This category includes events where the trauma is caused by or related to interpersonal violence.	Physical assault, sexual assault, domestic violence, robbery.
Combat/War Trauma	This subscale captures experiences related to military combat or war zones.	Exposure to combat, being in a war zone, witnessing or being involved in acts of war or terrorism.
Childhood Abuse and Neglect	This includes experiences of physical, emotional, or sexual abuse, as well as neglect during childhood	Physical abuse, emotional abuse, sexual abuse, neglect.
Sudden Loss	This subscale assesses experiences of the sudden loss of a loved one or significant other.	Death of a loved one (e.g., by suicide, homicide, or accident), sudden or unexpected loss.
Other Traumatic Events	This subscale captures events that don't fit neatly into the other categories but are still traumatic in nature.	Witnessing or experiencing violent crime, being diagnosed with a life-threatening illness, being a victim of terrorism.

The scale asks respondents to indicate whether something happened to them, if they witnessed it, if they learned about it happening to someone close to them, or if they were exposed to the trauma as part of their job. Participants are instructed to consider their entire life as they complete the TLEC. Next, the scale asks respondents to “Briefly describe the worst event.” It defines the “worst event” as “If you have experienced more than one of the events in Part 1, think about the event you consider the worst event, which for this questionnaire means the event that currently bothers you the most. If you have experienced only one of the events in Part 1, use that one as the worst event” (Weathers et. al., 2013).

The scale was originally validated in 2004 by Gray and colleagues, who found that the TLEC is a reliable measure of direct trauma exposure. Only one item failed to achieve a kappa of .40, while all other item kappas were above .50 ($p < .001$ for all kappa coefficients; Gray et al., 2004). Seven of the LEC items had kappa coefficients above .60. The mean kappa for all items was .61, and the test-retest correlation was $r = .82$, $p < .001$. A few items did not meet conventional standards for adequate reliability. The lower reliability coefficients for some items were attributable to the low frequency of these events. For instance, some items yielded low kappa statistics despite greater than 95% agreement over the 1-week interval (e.g., "exposure to toxic substances" was endorsed by only three participants, and "severe human suffering" was endorsed by only seven participants) (p. 334).

The scale does not include a ranking of traumatic events from worst to least severe. Researchers typically do not rank traumatic events this way, as the impact of trauma is highly subjective and varies greatly among individuals (Felitti et al., 2014).

This paper provides an overview of data on participants' experiences with traumas as expressed on the TLEC. We then present an analysis of the short, written responses in which first-year teachers describe the worst events in their lives, clustering the events according to Contractor et al.'s (2020) PTE clustering.

Data Analysis

To fully understand the trends being explored as related to primary trauma, basic demographic information is compiled. These demographics include race, gender, age, and socioeconomic status as population variables and include school type (Title I or non) and grade level (elementary, middle, or high schools), as environmental or situational person-specific variables. Means and standard deviations for the number of primary trauma events experienced by participants are calculated separately for each demographic group to allow for comparisons across groups.

Quantitative data indicate a high level of primary and secondary trauma experienced by teachers in the study. Given this initial finding, the researchers seek to understand which primary traumas first-year teachers highlight as their "worst events," as such events have a high likelihood of being Potentially Traumatic Events (PTEs). Since individuals determine for themselves what constitutes the worst event, it is important to remember that they are identifying "the event that currently bothers [them] the most." This event remains top of mind regardless of how long ago it occurred or how severe it might seem to others.

The written qualitative comments about the worst event are analyzed separately from the quantitative scores. Researchers conduct an emic thematic analysis of the written responses, resulting in 15 distinct codes: health of others, rape, sexual assault, physical abuse of self or family members, witness to murder (other than shooting), drug abuse by others, suicide of others, death, immigration, school shooting witness, shooting of self or people close, mental health of self or family, and other (e.g., bullying of a student, natural disaster, student reporting abuse, big fight in a bar, and other trauma). These codes are then matched against clustered Potentially Traumatic Events (PTEs) categories: Accidental/Injury Traumas, Victimization Traumas, and Predominant Death Threat Traumas (Contractor et al., 2020).

FINDINGS

Only eight study participants (9%) did not report experiencing any primary trauma events, while nine (10%) reported experiencing six or more such events as they began the study in 2021 (see Figure 1). 31% reported experiencing a natural disaster, 61.5% reported experiencing a transportation accident, 30% experienced a physical assault, 37% experienced a sexual assault, and 55% reported experiencing another unwanted or uncomfortable sexual experience (see Figure 1).

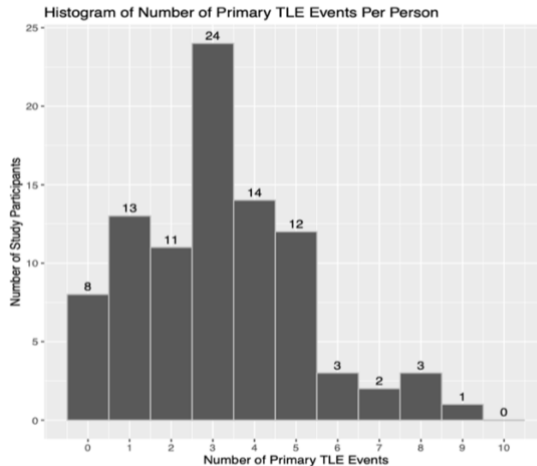


Figure 1: Plot of Primary Traumatic Life Events (TLE)

Only three (3%) of the 91 study participants did not report experiencing any secondary trauma events (see Figure 2). Ten (11%) reported experiencing twenty or more secondary trauma events (see Figure 2).

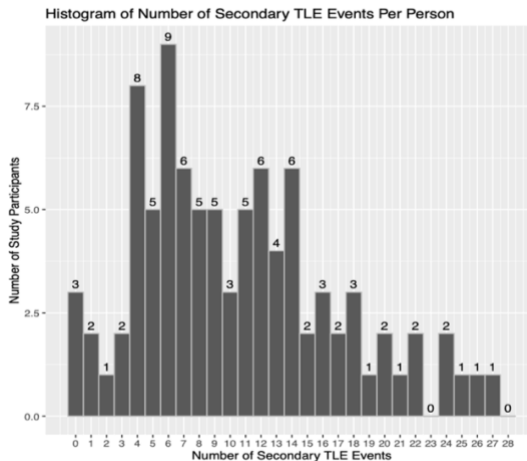


Figure 2: Plot of Secondary Traumatic Life Events (TLE)

Within demographics, women reported experiencing slightly more primary trauma events than men did. Older study participants reported experiencing more primary trauma events than younger participants did. Members of the Asian or Pacific Islander and Black or African American groups reported experiencing more primary trauma events than those in other racial groups did. Members of the working-class group reported experiencing more primary trauma events than those in other socioeconomic status groups. Members of the middle school group reported experiencing slightly fewer primary trauma events than those in other school-level groups did. See Table 3 for a complete list of means and standard deviations by demographic group.

Table 3: Means (and standard deviations) of Number of Primary Traumatic Life Event by Demographic

	M	SD		M	SD
<i>Sex</i>			<i>SES</i>		
Female	3.4	2.1	Working Class	3.7	1.8
Male	2.2	1.3	Middle Class	3.0	2.3
Non-Binary	5.0		Upper Middle Class	2.4	1.3
<i>Age</i>			<i>School Level</i>		
18-24	2.7	2.1	Pre-K	3.9	2.2
25-34	3.3	2.1	Elementary	3.2	2.0
35-44	3.6	1.0	Middle School	2.6	2.0
45-54	4.4	1.4	High School	3.4	1.9
<i>Race</i>					
White	2.9	2.1			
Asian or Pacific Islander	5.5	3.5			
Bi-racial	3.8	1.7			
Black or African American	5.0	3.0			
Latino/a or Hispanic	3.4	1.0			
North African/Middle Eastern	3.0				

These descriptive findings demonstrate how common reported trauma experiences are, but they do not reveal which reported trauma experiences were felt most intensely by respondents. The TLEC also asks people to describe the worst event that happened to them. Eighty-one percent (74 out of 91) of first-year teachers in our study provided examples when asked to “Briefly describe the worst event”; not all respondents contributed to this category. The number of potentially traumatic events (PTEs) exceeds 74, because some written comments included several traumas and were coded for more than one type of trauma. In our study, sexual assault or abuse

(13%) and health of others (13%) were the most reported worst events, with the death of a loved one (12%) and physical abuse of self or family members (11%) following close behind (see Table 4).

Table 4: Emic Themes and Cluster Patterns of Primary Trauma

Number (and %)	Emic Theme Pattern	Cluster Pattern
12 (13%)	health of others	Accidental/ Injury Traumas
4 (4%)	health of self	Accidental/ Injury Traumas
2 (2%)	rape	Victimization Traumas
12 (13%)	sexual assault and abuse	Victimization Traumas
10 (11%)	physical abuse of self or family members	Victimization Traumas
2 (2%)	witness to murder other than shooting	Predominant Death Threat Traumas
5 (6%)	drug abuse of others	Predominant Death Threat Traumas
6 (7%)	suicide of others	Predominant Death Threat Traumas
1 (1%)	attempted suicide of others	Predominant Death Threat Traumas
11 (12%)	death	Predominant Death Threat Traumas
3 (3%)	immigration	Predominant Death Threat Traumas
2 (2%)	school shooting witness	Predominant Death Threat Traumas
3 (3%)	shooting of self or people close	Predominant Death Threat Traumas
4 (4%)	emotional abuse of self	Predominant Death Threat Traumas
3 (3%)	mental health of self or family	Predominant Death Threat Traumas
9 (10%)	Other (bullying of a student, natural disaster, student reporting abuse, big fight in a bar, and other trauma).	All

The researchers parsed the themes into Contractor et al.'s clusters of Accidental/Injury Traumas, Victimization Traumas, and Predominant Death Threat Traumas (Contractor et al., 2020). Accidental/Injury Traumas accounted for only two of our emic themes, Victimization Traumas accounted for three, and Predominant Death Threat Traumas accounted for ten of our emic themes. The category "Other" accounted for 1 theme. (see Table 5).

Table 5: Cluster Patterns of Primary Traumas

Predominant Death Threat Traumas (count 44, 49%)	Victimization Traumas (count 24, 27%)	Accidental/Injury Traumas (count 16, 18%)	Other (count 9, 10%)
suicide of others	rape	health of others	other
attempted suicide of others	sexual assault	health of self	
death	physical abuse of self of family members		
witness to murder			
drug abuse of others			
immigration (crossing the border, deportation threat)			
school shooting witness			
shooting of self or people close			
emotional abuse of self			
mental health of self or family			

Accidental/ Injury Traumas

This category accounted for 18% of the comments. Examples include:

"My mom suffers from an autoimmune disease and had mrsa when I was young. We were afraid of losing her because of her weakened immune system."

This person evokes an event from some time ago, but the most salient events

are not always the most severe or the most recent (Breslau et al., 1999). This event clearly affected the first-year teacher and remains top of mind when thinking about traumas they have experienced.

Victimization Traumas

This category included rape, sexual assault, and physical abuse of a family member. It accounted for 27% of the comments. Examples include:

I said I did not want to engage in a sexual activity but felt guilty into it by the other person. Afterward, I felt guilty and disgusted with myself and blamed myself. I identified myself as a bad person because of this experience but have since learned how to be more assertive.

I was in an abusive relationship[.] It was both physically and emotionally abusive and one of the hardest things I have ever been through.

The words in these accounts show the emotional intensity that still lingers with these respondents. “Felt guilty,” “blamed myself,” myself as a bad person,” hardest things,” these are intense words to describe situations and clearly demonstrate events that continue to affect respondents.

Predominant Death Threat Traumas

This category accounted for 49% of the comments and included witness to murder other than shooting, drug abuse of others, suicide or attempted of others, death, immigration, school shooting witness, and other categories relating to death.

Examples include: “During sophomore year of high school, a fellow student brought a gun into our high school. He planned to shoot our librarian as revenge. However, [...] [killed] a classmate and [committed] suicide in the library.”

“My sister abusing drugs and the effect this had on her and our family. This was a downward spiral that impacted everyone in the family.”

Predominant death threat traumas almost defy understanding and yet occurred for many first-year teachers in our study. The killing of a fellow student and drug abuse that affects the entire family ecosystem are salient examples of predominant death threat traumas.

These findings indicate a high level of trauma reported by respondents, indicating experiences with various potentially traumatic events as their worst events. Findings indicate that when asked to reflect on the worst event, predominant death threat traumas were most frequently evoked by participants.

DISCUSSION

This study sheds light on the pervasive nature of trauma among first-year teachers, revealing a striking prevalence of both primary and secondary trauma events. The data highlight the significant impact of these experiences, with only a small fraction

of participants reporting no primary trauma events.

Demographic trends suggest nuanced patterns of trauma exposure, influenced by factors such as gender, age, race, socioeconomic status, and educational background. These findings are critical for understanding the differential impact of trauma across various demographic groups. The analysis of respondents' narratives regarding their worst experiences provides insights into the nature of the trauma endured. The prevalence of victimization traumas, such as sexual assault and physical abuse, underscores the personal toll of interpersonal and sexual violence. Similarly, the prevalence of predominant death threat traumas highlights the significant impact of events involving mortality, whether directly or indirectly experienced.

Our thematic analysis further clarifies the diverse range of potentially traumatic experiences recounted by participants, underscoring the complex interplay of individual and situational factors shaping these traumas.

Limitations

These findings should be considered within some limitations. Most importantly, the TLEC scale does not directly ask about racism and other systemic oppressions as forms of trauma, so racial, insidious, historic, and intergenerational traumas were not captured unless participants shared in their “worst event” example. This study involved a relatively small number of participants, which limits its generalizability. The survey questions did not ask about ways that respondents might have healed from or moved through their potentially traumatic events. These questions would have helped the researchers develop hypotheses about the effects of these PTEs on teaching. Without knowing if repair work has been done, the researchers are unable to speak to this.

Implications

The significance of this study lies in its detailed examination of the trauma experiences of first-year teachers, a group often overlooked in trauma research. By highlighting the high levels of trauma exposure and the varied nature of these experiences, this study emphasizes the importance of providing comprehensive and tailored trauma-informed support for teachers. Addressing these issues is crucial for the well-being of teachers and the overall effectiveness of them in educational environments. By understanding and addressing the trauma that teachers bring into their professional lives, we can better support their mental health and enhance their capacity to foster positive educational outcomes for their students.

This study highlights the prevalence of first-year teachers who have experienced traumatic life events and PTEs. The worst events described by participants range from Accidental/Injury Traumas to Victimization Traumas to Predominant Death Threat Traumas (PDTT), with a preponderance of respondents identifying a PDTT as their worst event. PDTTs may increase the likelihood of experiencing other PTE types (Contractor et al., 2020). This finding underscores the significant amount of trauma that first-year teachers may bring with them into the classroom, directly influencing how they engage with students and navigate their roles as educators.

PTEs are often related to negative emotional dysregulation, and positive emotional regulation is crucial for teachers' professional lives to remain effective (Hoferichter & Jentsch, 2024). Overall, our findings highlight the urgent need for comprehensive trauma-informed interventions and support systems within educational and professional settings for teachers, who may be at heightened risk of exposure to trauma even before entering the profession. By fostering greater awareness and understanding of potentially traumatic events (PTEs), our study aims to inform plans for targeted interventions that promote healing and resilience for both future and in-service teachers.

The impact of PTEs on the longevity of first-year teachers' careers, their disciplinary practices concerning students (especially students of color), and the potential interventions to alleviate the effects of PTEs prior to or during teacher preparation warrant further exploration. Teachers are not superhumans; they come to teaching with their own histories, often related to one or more potentially traumatic events. This study contributes to the growing body of literature shedding light on the identities of teachers and the potentially traumatic events they might bring into the classroom even before teaching.

Acknowledging the prevalence of personal trauma among first-year teachers can inform teacher preparation and induction programs. This does not mean schools and districts, or teacher preparation programs, should directly ask teachers if they have experienced trauma. It can be harmful to do so. Numerous studies aimed at understanding trauma in schools have highlighted the need to support not only student behaviors but also to consider how to proactively support teachers through a trauma-informed lens (Davis et. al., 2020; Luthar & Mendes, 2020). This study can prompt higher education institutions that work with preservice educators to adopt methods that support teachers' knowledge of themselves and their students, situated within the teachers' personal contexts and greater school contexts (Gay, 2010; Gay, 2013). Programming that supports teacher emotional regulation is essential (Kunzler et. al., 2023). Trauma-informed practices provide teachers with strong emotional regulation strategies, which are crucial for maintaining their well-being and effectiveness in the classroom (Conti et. al., 2023).

It is also important to examine the organizational factors that play an essential role in individual resilience and regulation strategies. Frameworks such as Social and Emotional Learning (SEL) and other trauma-informed practices (TIP) programming can place equal focus on the needs of the educator, not just those of students who have experienced trauma (Kunzler et. al., 2023). TIP examples of individual resilience and regulation strategies are important, as are examinations of the organizational factors that play an essential role for teacher well-being in schools (Kunzler et. al., 2023). While we do not advocate that educators become therapists or social workers, we encourage an understanding of their past experiences with trauma and how their lived personal experiences may impact their professional role. Additionally, newer TIP frameworks center their work within institutional structures that can cause harm and trauma to students and their families, proposing ways to avoid pathologizing students and working to prevent retraumatizing them with this gained knowledge (e.g. Alvarez, 2020). By implementing these comprehensive support systems, we can better equip teachers to handle the challenges they face,

ultimately leading to more resilient and effective educators who can foster positive educational outcomes for their students.

This framework underscores the need for research investigating the prevalence and impact of PTEs on teachers, particularly during their first year. Understanding this connection can inform teacher support in many ways. Teacher preparation programs can incorporate training on trauma awareness, self-care, and strategies for managing STS. Induction and mentoring programs can provide targeted support for first-year teachers, recognizing the potential influence of PTEs. School-Based Support Systems can create trauma-informed school environments that support both students and teachers. By acknowledging and addressing the impact of PTEs on teachers, this framework aims to improve teacher well-being, enhance classroom effectiveness, and ultimately create more supportive and nurturing learning environments for all students.

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