

Classrooms as Healing Spaces

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ABSTRACT

Classrooms are at the nexus of societal trauma and systemic interlocking oppressions. Fluency with trauma-informed practices is well-recognized as imperative for teachers, however, the connections of trauma to interlocking oppressions is less acknowledged. This paper uses a Disability Critical Race Theory (DisCrit) framework to interrogate discursive entanglements of trauma with other identity markers and the ways in which these have historical and material implications that harm students. This paper explores the way that trauma as a construct is not free from becoming entangled with the systemic impacts of racism and ableism and interrogates some of the assumptions that underpin such use. This paper situates the teacher's role historically, illustrating how knowledge of the social construction of race, disability, and trauma affects classroom structures, teacher identity, and pedagogical decisions towards creating conditions for healing.

Keywords: Critical race theory, disability studies, disability critical race theory (DisCrit), healing, trauma

Schools are sites of paradox in that they contain immense societal hopes and deep memories of trauma. adrienne maree brown (2017) writes, “the crisis is everywhere, massive massive massive. And we are small” (Introduction). Schools are at the intersection of systemic failures and classrooms are pockets wherein the harm of societal structures often lay bare. However, brown’s message is that our relationship to complex systems can be powerful, despite our smallness. Likewise, classrooms as



healing spaces have been suggested as a pedagogic model and part of school-wide initiatives to address trauma that extends beyond the walls of the classroom (for a complete review of healing-centered pedagogies see Acosta, 2020). Bloom (1995) suggested a model wherein an analysis of school climate acknowledges the need for classrooms to become sanctuaries, confronting trauma as part of everyday practice. Blitz et al. (2016), building on Bloom's model and acknowledging the racial components of trauma, suggests a culturally-responsive trauma-informed sanctuary model that guides teaching, learning, and discipline. As Blitz et al. (2016) notes, the goal of trauma-informed schools should not only be to provide healing spaces but work to reduce replication of trauma. Reducing replication is a critical component of facilitating a healing space. To not take this more proactive stance is to surely expose students to re-traumatization. Blitz et al. (2016) focuses on the critical leadership needed to create healing, but further examination of the agency teachers have around this issue is needed.

As former teachers, the authors focus this article on teacher agency as a locus of analysis. While schools have the potential to provide healing space for our society, educators and researchers must also be honest about the sites of trauma that classrooms are for so many; and, as hooks (1994) writes, "face reality" as we (re)imagine what schools could look like (p. 207). There must be a reckoning of the history of schooling as part of land dispossession and as sites of trauma, producing intersecting oppressions. Acknowledging these realities, the authors argue, is not beyond the scope of teachers' professional identities. Only with this acknowledgement is a site of transformation and healing possible.

This paper first explores material implications of race and disability in causing and producing trauma by systemic inequities and harm. A Reddit post is analyzed to demonstrate how race, trauma, and disability entanglements are deployed discursively. The second section explores two structural understandings without which schools cannot be healing spaces: the gendering of the labor of teaching itself and an understanding of the historical basis for complicity in trauma by teachers. The final section offers necessary alternatives by which educators can create containers of healing by embracing DisCrit tenet 7 and an activist identity (Annamma et al., 2013).

Theoretical Framework

Historically, schools in America's capitalist society have functioned as an arm of settler colonialism, constructing fixed notions of intelligence and using Christianity, paternalism, racism, and ableism to sort, assimilate, and exclude students from society and property, furthered along by the eugenicists of the 19th century. Settler colonialism, much like feudalism, works off land ownership and requires dispossession of land from Black, Brown, and Indigenous bodies, as well as the control of all bodies (Simpson, 2017). If, as Blitz et al. (2016) argue, increasing capacity for classrooms to be sanctuaries wherein students are protected and able to heal is contingent upon culturally-responsive methods, frameworks that analyze the complexities at the intersections of oppressive systems are needed. As a result, this paper uses a DisCrit framework (Annamma et al., 2013) to show how certain

constructions of trauma re-entrench oppressive systems, as well as how trauma is linked to a web of other systemic oppressions, including racism, ableism, sex and gender discrimination, and gender-based violence. The social model of disability used in DisCrit helps make sense of processes of othering both constructed discursively and formalized by school policy, connecting brown's (2017) macro to the micro, and also reveals both the insidious nature of oppressive systems and the teacher agency that lies wherein. DisCrit helps to expand upon the racial component of trauma-informed practices provided by Blitz et al. (2016) to include disability lenses. Erevelles (2011) writes that disability is fundamental to the material discourses of intersectionality under transnational capitalism. DisCrit is based on the understanding that racism and ableism circulate interdependently and fuels an examination of how these co-constituted elements discursively harness other constructs, especially as they relate to material conditions (Annamma et al., 2013). As one of DisCrit's author's David Connor (2016) notes how the classroom and teacher agency within it is a useful locus of control for analysis; therefore, the authors of this paper contend that a DisCrit analysis of the intersections of the structural and discursive realm have the useful potential. Using DisCrit frameworks, therefore, not only identifies ways in which healing can be facilitated, but also lends itself to micro-interactional realms that are particularly agentic points of analysis for teachers.

Positionality

Both authors are neurodivergent and experienced forms of school trauma wherein their identity markers dictated healing opportunities. Author 1 is white and was the child of a single-parent teacher which afforded her privilege and protections as a student. She gained an insider view of the gender trauma upheld by the system as her mother's acquisition of employment as an unwed mother relied on hiding her marital status. Author 2 is first-generation Latina whose first language was Spanish. She witnessed herself and her siblings endure repeated trauma and referrals to special education as a response to being outsiders in a white rural community. Her parents repeatedly refused special education services, possessing the educational capital to understand the way disability labels may underwrite trauma for multiply-marginalized students. As special education teachers, the authors have observed discrepancies in how trauma was often interpreted *for* (not by) their students in relation to their other identity markers. These markers defined the material traumas their students were exposed to and led others to formulate assumptions about how trauma defined their potential as a student. As a result, the collective research endeavors of the authors seek to examine the diffractive ways trauma can be both disseminated and ignored by schools. Additionally, as former and current K-12 educators, the authors seek solutions to educational problems that tap into the agency and power of teachers, recognizing their influence in the school environment and the lives of students.

ENTANGLEMENTS OF TRAUMA, RACE, AND DISABILITY IN SCHOOLS VIA SPECIAL EDUCATION

Both disability studies and trauma studies have ignored critical intersections of other social forces (Morrison & Casper, 2012). Trauma, race, and disability are entangled phenomena. While each has a productive axis of analysis, they do not have stable discrete parts. Systemic racism and ableism produce intergenerational trauma, while to be racialized or labeled as disabled perpetuates these harms. The authors emphasize that while disability and special education are not one in the same, special education is the primary formalized mechanism by which disability status is granted in schools. Special education services are how students with disabilities obtain access to resources and often is the only way a disabled identity is recognized by a district. Disability as an identity beyond special education is largely invisible in schools. Therefore, for the purposes of this paper, special education as a system remains the primary locus of critique for how schools handle disability.

While special education is construed as “support,” it just as often functions as a mechanism for disinvestment and a disseminator of trauma. This may seem radical until examining realities defining the system and the racial inequities that belie the underpinning ideology. Annamma (2017) chronicles how a group of girls of color who were incarcerated accumulated disability labels that underwrote school trauma accelerated by moves of “creative destruction.” Creative destruction is a means by which school staff engage in discursive processes that traumatize racialized students, producing conditions that alienate and harm students, thereby contributing to the eligibility of a disability label and establishing the need for special education services (Annamma, 2017). Understanding creative destruction that operates in everyday discourse as part of a DisCrit analysis linking the structural to the discursive, the micro to the macro, is central to the analysis presented in this paper. Under the auspices of providing greater resources, these race and disability labels ultimately then become part of complex processes that obfuscate the trauma schooling produces, creating conditions for creative destruction to proliferate. In these instances, disability labels cause trauma as they endorse low expectations while accelerating disinvestment in educational outcomes, thus demonstrating the complexities and entanglements of trauma as a phenomenon that produces psychological harm via disability and race labeling (Annamma, 2017).

Labeling and Classification Processes

Special education is driven by a complex classification process that determines eligibility by disability labels. While the labeling system occurs under the auspices of providing support, many have documented the way the system traumatizes and retraumatizes, as well as may entrench disparities (Annamma, 2017; Artiles, 2019). Watts and Erevelles (2004) note that students most affected by discipline disparities and subject to expulsion are students of color with a disability label, demonstrating “an intimate relationship between race, class, gender, disability, and colonization” (p. 281). The ways that race and disability are used categorically to exclude students via special education labeling and related disciplinary practices has been well-documented, as has how this fluidity between two axis of difference works to absolve the system of responsibility through obfuscation (Artiles et al., 2016). This speaks to

the labeling system itself and its operation as a mechanism of creative destruction (Annamma, 2017).

Annamma et al. (2013) posit that legal and historical studies of disability and race reveal that both are used separately and together to deny rights, explaining how race and disability work to produce the special education system. However, given the ubiquity of trauma as a label in recent years, understanding the role of trauma, like disability and race, as both a material phenomenon and a potentially oppressive label is needed. As Morrison and Casper (2012) claim, disability and trauma are in an ever-evolving entanglement that cannot be ignored. One such area in which these relationships become starkly apparent is with the labels associated with emotional disability. The vague criteria across districts and states of disability labels such as “Emotional Behavioral Disorder,” “Emotional Behavioral Disturbance,” or “Emotional Disability” indicates the nebulous relationships between race, trauma, identity, the medical model as justification for special education categorization, and disability (Artiles, 2019). The variation with which these emotional disability labels are applied speaks to the socially constructed interdependent nature of disability and race (Annamma, 2013, 2017; Artiles, 2019, 2022), as well as trauma entanglements. A student who changes districts may experience this variation firsthand: they may be labeled with an emotional disability due to a traumatic event in one school, while remaining without a disability label in another school but being given access to trauma-responsive mental health services. Then, in another setting, be devoid of both disability classification and mental health services. Put another way, students may obtain the label due to trauma, implicated by race or gender, only to have the label work to discursively define their capacities and trajectory. Artiles et al. (2016) documents the complexities of how these labels and constructions work as “boundary objects” to both protect and create nodes of difference. The way that trauma as a phenomenon and a label is discursively intertwined with disability and race in localized contexts is underacknowledged but is essential to informing school structures that heal and protect.

These categories take otherwise diffusive and nebulous ideas and formalize them using certain underlying assumptions about disability. Contrary to more empowering minority models of disability (Shakespeare, 2007), special education labels instrumentalize an assimilation and medical model. It is not new to note that special education eligibility categories are based in medical model views of disability (Skrtic, 2005; Triano, 2000). Medical model frameworks do this largely by harnessing discourse that understands disability as an individual deficit to be remediated or extinguished (Gill, 1998). The medical model seeks ultimately to cure disability and to distribute notions of cure, in effect targeting disabled people rather than seeing disability as a naturally occurring form of difference (Clare, 2017). These notions set the stage for conceptions of healing that are the antithesis of anti-oppressive models of healing and do not fit with Blooms’s (1995) sanctuary model, or Blitz et al.’s (2016) culturally-responsive sanctuary model. Instead, the notion of the medical model formalizes deficits, associates cure with assimilation, and uses disability and special education as fundamentally oppressive categories that further marginalize struggling students. The next section connects the medical model framework to more

recent conceptualizations of trauma, explores a parallel process in the connections of trauma, and a biomedical framework that is also built on notions of deficit and cure.

The Medical Model: Connections to Cure and Biomedicine

As seen in the system of special education, notions of “helping” and “care” can reify Patel’s (2021) delivery systems of harm under an umbrella notion of cure. The medical model underpins much of special education’s definition of supports (Artiles, 2016) and lays the groundwork for biomedical interpretations of trauma that aspire towards cure of the individual in lieu of critique of structures of power. Notions of “cure” drive the delivery systems of student support in schools, underwritten by the medical model and reinforcing the idea that disability, instead of being a desirable or political identity (as seen in the minority model) is a type of deficit that requires remediation. In fact, as Skrtic (2005) writes, medicalized discourses effectively underwrite school failure via their objectification of students.

Biomedical models of trauma and medical models of disability are inextricably connected. Trauma can cause disability and the medical model of disability ignores more complex understandings of both trauma and disability that may have systemic causes, while also ignoring disability status as a potential form of human difference. Both are aspects of an overarching medicalized framework of difference, and both require an “expert” practitioner to cure the pathology, while dismissing critical views of social forces or question their own sources of power.

DisCrit is familiar with these tensions. Sakkar et al. (2022) notes the necessity of maintaining these tensions when theorizing disability:

“Theorizing disability as *either* an entirely medicalized problem of individuals’ bodies *or* an entirely social problem of barriers draws hard boundaries around disability itself; these boundaries make it difficult for inclusive education as a field to theorize exclusion in a way that can address social justice concerns in education for all marginalized groups” (p. 155).

Theorizing trauma as an individual issue supports addressing trauma instrumentally, even when recognized as a product of racism or ableism. This approach mirrors a medicalized model of disability and can be considered an offshoot of a larger medical model umbrella. Moves towards healing are natural responses to trauma, but a primarily biomedical or medical approach upholds a dominant system of racism and ableism and excludes a plurality of approaches associated with an anti-oppressive approach. Burch (2021) explains the connection between biomedicine and perpetuating these harms under the guise of healing:

“Western biomedicine is a dominating force but not a universal truth. As a healer, O-Zoush-Quah intimately knew that there are many types of medicine, including numerous, distinct Indigenous practices and knowledge systems used across time to the present day. Recognizing multiple medical systems within a broader context of settler domination undermines the projected objectivity and commonsense logic of Western biomedical diagnoses and institutionalization. Acknowledging multiple sovereign nations and systems of medicine resists what

American studies scholar Jessica Cowing calls *settler ableism*.” (Public talk, 2021).

As Burch (2021) notes above, biomedical diagnosis of trauma are tied to histories of institutionalization, much like special education and the medical model.

Petrone and Stanton (2021) call for a reconceptualization of trauma away from individualized notions of trauma and instead for one rooted in historical understandings. They argue that to construct certain behaviors as trauma links the identity of the student to the pathologization and therefore a biomedical framework. Situating a problem in an individual instead of a social structure undermines opportunities for solidarity (further discussed later in this paper) and promote questionable ideals around healing that uphold the status quo and reproduce the very harms that cause the trauma, or even disability. It should be noted that Petrone and Stanton (2021), and Castrellón et al. (2021) have elements that parallel arguments constructed here. However, the role of disability in both these analyses is largely underexamined. Instead of centering the healing of marginalized peoples as self-defined or connected to empowerment, models of healing that do not account for human difference and disability as a naturally occurring form of difference pathologize non-dominant cultures. Both individually located and biomedical notions of trauma and the medical model of disability can accelerate harm and be used as a force of violent erasure under the auspices of support.

In a society that perpetuates disproportionate systemic harm for marginalized groups, access to multiple diverse non-medicalized supports disentangled from Western notions of cure are an essential component of supporting anti-oppressive healing. An instrumentalist and medicalized view of disability that situates the issue in a deficit possessed by the individual ignores systemic factors that contribute to the lack of access to proper support that promote well-being. Understanding trauma and disability as such authorizes exclusion as a byproduct of the medical model, situating trauma as an individual problem to be solved by fixing individual student deficits rather than an issue to be intervened with systemically. When biomedicine has failed, then the medical model definition of disability becomes operationalized. If, as Kirkland (2020) claims, healing is first about protection from harm, instances of harm through creative destruction must be examined to uncover opportunities for protection. In order to protect, it is necessary to unearth moments when ableist ideologies are deployed that link students to biomedical and racialized views of trauma.

How it Happens: Discursive Construction of Trauma Discourses

Give the entrenchment of the medicalized frameworks in the school system and the elusive way in which notions of cure and support can be twisted to reify harms, it becomes essential for practitioners to be highly reflexive and to undertake a close level of analysis that connects the discursive microlevel actions to the macro level structures. As a result, the authors focus on a DisCrit analysis of discursive informal realms of social media discourse. DisCrit frameworks can help to identify transformative potentials wherein the “micro-interactional to always be explicitly

linked with the macro-sociopolitical” (Annamma & Morrison, 2018, p. 78). In a social media analysis about trauma and COVID 19, Goldin et al. (2021) found a weaponization of discourse around trauma-informed practice characterized by white saviorism, a discourse that reflects ideology that reinforces racist stereotypes without critiquing systemic forces. To fully understand the slippery mechanisms of these instances, one must interrogate ideological relationships to dis/ability that inform these cognitive leaps. DisCrit emphasizes the importance of discursive constructions that connect the macro to the micro (Annamma & Morrison, 2018). Therefore, this section explores DisCrit frameworks to analyze how a post on Reddit constructs trauma in a way that links students to individualized biomedical notions of trauma, medical model notions of disability, and sociological constructions rooted in racist ideology.

In the following analysis, discursive moves shift discourses conjoining racism and ableism onto discourses around trauma-informed instruction and care. The authors selected this Reddit post as a source of analysis because of its representativeness of a type of discourse that commonly circulates among teachers and works in conjunction with the special education labeling system as a type of creative destruction. As current and former educators, the authors have found comments of this nature to be ubiquitous. It is not uncommon or unreasonable for teachers to grasp for explanations for daily challenges in the classroom that the pandemic has exacerbated. However, the discourses of this post are not innocuous – contrary to arguments that situate this in pandemic exceptionalism, such discourse is not novel or of the moment, but historically rooted. The following comment uses racialized discourse, and then, like disability has been used for years, to reinforce the connection to trauma.

“Feral or trauma? What is making the kids act this way?” writes u/animegl3 on Reddit teachers:

“After almost 2 years of being virtual we are back in person and the problems are many. Some people are saying that students are traumatized which is what’s causing their behavior. Others are saying that they were left to run feral for that time. What are other teachers thoughts? I think that it is a little of both but I’m unsure.”

This Reddit post demonstrates how race becomes linked to trauma in everyday exchanges and then how trauma becomes treated as a static disability. No longer even an “illness” to be remedied through biomedical means, trauma becomes discursively fixed, marking students for disinvestment. The post does this in three steps: By first implying a narrative that shifts causes for student behavior into a binary, deeming it “feral” or “trauma.” This polarizing move reduces recognition of the complex intersections of systemic problems and situates the issue in the student. Then, there are two possible explanations offered. Non-compliant student behavior is likened to that of wild animals, and it is insinuated that this is due to this being reflective of their home environment. Then, “trauma” is offered as a competing reason for non-compliant behavior. The underlying assumption seems to be not that student behavior may be logical, purposeful, or due to the harm of the school district; instead, it is assumed the home is either primitive or traumatic.

To fully explore how the reproduction of trauma may become yoked to disability and race in this post, definitions must be foregrounded. According to the Oxford English Dictionary, “‘feral’ has three meanings: ‘existing in a wild or untamed state’; ‘having returned to an untamed state from domestication’; and ‘of, or suggestive of, a wild animal; savage.’” For u/animel3, feral is juxtaposed with trauma, assuming that the home lives of some students produce both wildness and harm. The assumption of trauma here does not signify further investment of resources. On the contrary, “traumatized,” as used here, is a type of creative destruction and authorizes systemic disinvestment. The word not only marks certain behaviors or ways of being as undesirable and non-normative, but also by implies that that source of the trauma is “out there” beyond the school walls, as if the school is not itself a complex system of harm. Trauma, as an explanation for non-compliant behavior, replaces the paved cultural notions medical-model ideas of disability and functions similarly to oppress. Instead of being possible labels of an “emotional or behavioral disorder,” “trauma,” albeit connoting more ephemerality, is offered as a label to explain away difference. Trauma, in this sense, becomes synonymous with disability in its othering capacity to earmark disowning accountability of the school district to meet the needs of the students.

As a force of what Annamma (2017) would call “creative destruction,” this post reaches for labels that accelerate othering and detachment. This juxtaposition echoes the historical constructions of race and ability wherein race and disability labels functioned more to divert resources than to support students with multiply-marginalized identities. Trauma replaces what typically would be held by a marker of disability and the post signifies racist and ableist ideologies, evoking a sense of inevitability of low potential for students who endure systemic traumas. The authors recognize the impact of their own positionalities in interpreting this post as emblematic of systemic issues. However, remarks like this the authors find to be pervasive in many school settings, such as teacher’s lounges, that researchers often struggle to access but are undoubtedly indicative of school culture. The high traffic of this post corroborates its significance: this post received 487 upvotes and 299 comments. The top commenter, u/d0lltearsheet00, writes:

“I think the pandemic has just magnified all the existing social ills. As usual, the kids who have someone at home to answer to, and who cares about their welfare are likely all right—maybe not star students but they’re going along. The ones who already had traumatic home lives or little parent involvement or supervision are coming to school and acting as they always have—exacerbated by the fact that they spent a year at home.”

u/d0lltearsheet00 links the notion of trauma to historically racialized discourses about social ills, parenting, and homelife. u/d0lltearsheet00 works off the assumption that the home is a place of harm for students; that the time the student spends in the home diminishes their capacity for school. Furthermore, u/d0lltearsheet00 asserts that some parents care about their child’s well-being, while others (with “little involvement”) do not. u/d0lltearsheet00 then links these “societal ills” located in the home as producing trauma for the student, thus making them misbehave in school. These

comments induce historically situated notions of “broken homes,” most commonly targeting Black families, such as those popularized by the Moynihan report (Staub, 2018), infamously known for producing justification for further marginalizing Black students. This report used psychological measures and sociological falsehoods about single parent families to construct explanations for impulsivity. Leading to tropes like the “Welfare Queen,” the discourse constructs Black students as a product of their “broken” homes (Staub, 2018). By employing the term “welfare” (albeit differently), u/d0lltearsheet00 demonstrates creative destruction in action by rhetorically activating historical schemas that entwine trauma to the entrenchment of ableism and racism.

The authors’ positionalities inform this analysis in ways that make them attuned to instances of creative destruction, and the power of discursive acts that consolidate and accelerate othering of students who combat societal stigma. Annamma (2017) describes creative destruction as both incremental and momentous moves of school personnel resulting in systemic disinvestment. As school personnel refuse to engage their time, energy, or resources, they foreclose possibilities for education of multiply-marginalized students and initiate a cycle that criminalizes and disables students and begins the process of disinvestment (Annamma, 2017). As Annamma et al. (2013) points out, race and disability are inherently unstable categories that are socially constructed and require recirculation to continue to oppress and evade accountability. Somewhat paradoxically, attempts to address trauma are not always a remedy to racism and ableism but may perpetuate and obfuscate them, with the Reddit post above being an example of how not only creative destruction is a type of trauma, but that trauma discourse can become a mechanism of creative destruction. Race and disability not only place one at a higher risk for exposure to systemic traumas, but “trauma” and “traumatized” can then be used as a construct for a discursive form of creative destruction that works at both ends.

STRUCTURAL BARRIERS TO COLLECTIVE HEALING

Disability and the Logic of Containment

Castrellón et al. (2021) suggest “positioning schools as sites of collective healing” (p. 9). Therefore, it is essential to disrupt individualizing notions of trauma and have the courage to define healing as a collective endeavor (Castrellón et al., 2021; Petrone & Stanton, 2021). However, increased containment and surveillance of multiply-marginalized students mediate relationships and foreclose natural possibilities for solidarity, despite it being well-recognized that peer supports are an essential part of trauma-informed instruction (Avery et al., 2020; Cosantino, 2021). When students are assigned to a self-contained classroom or other more restrictive setting, a medical understanding of disability and trauma drives the logic of the containment. These logics of containment justify and normalize discursive practices of hyper-surveillance (Ruiz, 2020). Structural understandings of trauma responses must address ideological barriers to creating healing environments of care for students. Eales and Peers (2020) note that societal options for care typically include taking care of oneself, purchasing care, or, “getting what you deserve” (p. 9), and that

people whose lives become about the body are shut away unless they have potential to serve capitalism. Therefore, healing classrooms must center interdependency and cease structural elements that hide vulnerability, care work, and disability.

This shift would call into question the fundamental logic behind the value of self-contained classrooms. From early ages, this ideology is embedded in the structure and schedule of the school day. Students with higher support needs are often assigned to a more isolated self-contained classroom. These classes are often tucked down a secluded hallway, lest students openly witness non-normative behaviors, teachers conducting care work that attends to the needs of the body, or the necessity of interdependence and vulnerability as a feature of life. Instead, this work is shut away so as not to disrupt the myths of mind-body dualism, fixed intelligence, and self-sufficiency. Interdependence and shared labor are overwhelmingly the default of all beings, so before adding additional interventions, one might ask, what survival of the fittest structures interfere with natural collaboration, solidarity, and healing for body-minds in this space? To make classrooms healing spaces, the factors that prevent evolution of natural supports and interdependence between classrooms must be removed.

Reconceptualizing Teacher Identity: Moving Towards Healing as Activism

As demonstrated in the previous sections, creative destruction is insidious and while unquestionably a product of structural forces, requires individual actors to reconstitute and deploy it at critical moments. Research supports that teachers are influential in working towards healing, but underexamined (Thomas et al., 2019). The focus of this section is on teachers and anchored in an assumption that teachers are agentive and influential actors in creating healing classrooms. Additionally, drawing upon their positionality as current and former educators, the authors assert that educator agency is often undervalued in its liberatory possibilities. As a result, this section assumes teachers are powerful and agentive. Ginwright (2018) suggests teachers take on a “healing centered engagement” that must be political in nature, pointing to the inability of teachers to remain neutral and be able to truly foster healing classrooms.

Given the current majority of teachers are white women, it is imperative to note how DisCrit cautions that social progress tends to revolve around interest convergence of the white middle class (Annamma et al., 2013). Virginia Grise (2017) describes pitfalls of how this interest convergence manifests when approaching healing. Capitalist discourse may orient towards healing *instead* of fighting the root cause of harms. “The only way to defend ourselves against it is to destroy it. The only way to destroy it is to build something better” (p. 83). Grise (2017) says this is a daily embodied practice of which one must assess, study, fight, listen, and care for each other. This points to the fact that teachers must be able to embrace an *activist* stance to provide healing spaces, otherwise they will inadvertently uphold the status quo.

However, teachers cannot embrace activism and provide support for trauma without having the proper reserves. Teachers are often told to practice self-care but must do so without adequate support. One way to contend with these tensions and not relinquish the self-care project is to situate self-care clearly within the realm of

DisCrit activism (tenet 7) (Annamma et al., 2013), attending to self-care narratives of multiply-marginalized women of color and naming the way whiteness recirculates to oppress. Torres (2021) situates self-care as a political act. Evoking Audre Lorde and Sonya Renee Taylor, she writes, “it is about being healthy enough to fight for equity and inclusion, to support future generations of scholars of color, and to push for scholarship that works with and for marginalized communities” (p. 630). For Torres (2021) and those who came before her, self-care is not only about band-aid solutions that allow one to replicate another day of the same harms, but creating the conditions with which one has the energy to embody and conduct activism more fully. Activism takes energy, purpose, understanding, and solidarity. The profession of teaching and its historical connection to the role of white women in “civilizing” those who are outside of Western cultural ideals demonstrates how labor was attached to racializing and gendering bodies, and how this assisted in the capitalist white settler project. Ignoring this reality forecloses opportunities for interracial solidarity and activism, thereby preventing creation of healing spaces.

There must be an acknowledgment of the ways that the cultural and historical roots of teaching incentivize complicity in harming multiply-marginalized students and teachers who hold these identities. In a capitalist society, labor and property is gendered, which restricts the bodies and work of its members. Nimala Erevelles (2014) explores how disability studies and intersectionality can inform analysis of historical oppression, and how queer body-minds can illuminate realities of intersecting oppressions. Indigenous queer normativity was an obstacle to the capitalist white settler project, which required dispossession and control of bodies (Simpson, 2017). Thus, unsurprisingly, the eradication of queer normativity and the gendering of Indigenous bodies corresponds with the feminization of teaching – what Hyde (2007) calls the gendering of gift labor. The roots of public-school teaching started as unpaid missionary work in the 19th century United States (Goldstein, 2014), when women in the United States were broadly treated as property (as evidenced by the ability for a father to “gift” his daughter in marriage, a tradition still present today) (Hyde, 2007). Hyde (2007) writes that an “old definition” of property, as defined in the *Century Dictionary and Cyclopedia* is a “right of action” (p. 122). Put another way, property is human will, and property owners are those who exercise that will via possession or bequeathing (Hyde, 2007). Even as unpaid missionary work, it was initially seen as revolutionary for women to (be even unpaid) agents in a market economy, performing labor outside the home (Goldstein, 2014). Ability to bequeath knowledge was an exercise of will implying that women may possess some “property,” contesting settler ideas about the place of women. However, the proposition that free labor that could accelerate operations of assimilation and control of Indigenous, Black, Brown, and poor bodies in greater capacity was eventually seen as an asset towards building capitalist wealth, by which teaching then became enshrined as one of the only forms of work suitable for a white woman at the time (Goldstein, 2014). It is in this understanding of how gendered bodies of teachers become extensions of the white male settler state, with the price of their freedom being operationalizing the capitalist project, that teachers must be aware. With this tension, white teachers become historical agents of both disruption and complicity for the settler state. To build containers for healing, it is essential that teachers (and

especially white teachers) reflect on whose will they historically serve. Teachers must self-reflect and evaluate personal connections between the momentum of this will to understand how they may be invested in maintaining trauma through creative destruction.

Hyde (2007) claims the gendering of gift work, such as teaching is a cultural phenomenon. After reading Hyde (2007), one might call gift labor a queer labor, prior to the colonial era. Hyde (2007) argues that the emotional and spiritual commitment required in some professions relies on gift labor inseparable from the job itself; that it is in this gendering of the profession and the bodies and spaces they can act within that oppression occurs. One can conclude that the foundations for healing the labor of teaching might lie in return to queer gift work. Returning to conceptualizing teaching as queer gift work is a fundamentally transgressive and resistant stance and does not come without risks. Refusal of the colonizer can in fact be generative once it refuses decisions of membership and othering (Simpson, 2017). Perhaps it is in centering this idea of generative refusal and a transgressive identity that teachers may overcome the risks of resistance.

Much like the Wizard of Oz, where Dorothy asks, “Are you a good witch or a bad witch?” societal narratives continue to spin fixed notions of “good teachers” and “bad teachers.” These gendered and dogmatic tropes keep teachers in the throes of paternalistic capitalist power, oscillating between praise and punishment of the white paternalistic gaze, instead of working towards healing and liberation. For classrooms to become healing spaces, teachers must be able to publicly embrace an identity that contains a fluidity that desires past the paternalistic myths of “good teachers” and “bad teachers.” This is not to suggest that critique has no role in teaching, but to posit that healing fixed notions includes a recovery of agency of teachers as well as students. It is only through these liberated and decolonized stories that schools can build healing cultures where teachers resistantly refuse to participate in retraumatizing discourses of creative destruction. Bentley (2020) writes about Greene’s “myth of the good teacher,” a “woman of absolutes,” who controls all. She explains how the pandemic realities disrupted this myth and suggests a new knowledge and quality of relationality, one not based on hegemonic control, seemed to emerge:

“So, what was left? It was a different kind of story, a different absolute. It was a story about children, a story that I always hoped I believed but was not sure had fully taken residence in my sacred space of assurances. Yet, in the darkest time, there it was. The children would know. I knew that they would know. I knew that they would shape our community and show us the way to each other. This is the story that I always hoped I believed in, the teacher I hoped I was. And with the winds howling around us, bottles of antibacterial spray in our hands, it was there and it was true.” (2020, p. 3)

In recognizing the omniscient teacher is a myth, teachers can exercise agency to move past pedestals of martyrdom and meritocracy and then be able to move towards collective healing.

ACTIVIST PEDAGOGIES

Thinking about teacher agency in the healing of trauma requires a focus not only on teacher identity and subjectivity, but pedagogical approaches. Castrellón et al. (2021) claim that trauma-informed pedagogy arises out of medicalized discourse and lacks significant critique of the socially, historically, and culturally situated nature of whose behavior is constructed as a trauma response and how these discourses operate to justify inequities or to obfuscate collective responses. However, trauma-informed instruction is an essential component of being responsive to diverse student needs and hinges on the recognition of the systemic and ubiquitous impact of trauma on development, growth, and academic achievement (Avery et al., 2020). To be clear, the purpose of this paper is not to dismiss the contributions of trauma-informed literature, but to couple it with contextual and interdisciplinary understandings that inform application of practice and professional discernment. Building on the claims of Castrellón et al. (2019), collective pedagogical solutions for trauma as socially constructed must include recognition and centering of disability. All forms of trauma-informed instruction must understand both the social construction of disability and race and how trauma can be enfolded into this entanglement.

Annamma (2017) suggests a “Pedagogy of Resistance” that centers the needs of multiply-marginalized students. Petrone and Stanton (2021) offer a “sociohistorical trauma-reducing framework” rooted in relational, participatory, and humanizing methodologies. While speaking of research methods, some aspects of their frameworks are also applicable to teaching and complement Annamma’s (2017) ideas addressing different aspects of a DisCrit trauma-reducing approach. In this next section, Petrone and Stanton’s (2021) framework is offered in conjunction with Annamma’s Pedagogy of Resistance (2017), and Castellone’s (2021) Healing-Centered Approach. This section explores practices that support a healing and activist-oriented trauma-reducing framework for teaching and synthesizes salient aspects of a DisCrit-informed holistic approach to trauma for educators. The suggestions are arranged by Annamma’s (2017) Pedagogies of Resistance to foreground the DisCrit analysis.

Solidarity

The peer support framework is an essential part of trauma-informed instruction (Avery et al., 2020; Cosantino, 2021) as healing becomes defined as a collective endeavor (Castrellón et al., 2021; Petrone & Stanton, 2021). This requires solidarity. Solidarity requires understanding how disability is constructed and how that process implicates all of us. bell hooks (1986) wrote

“solidarity is not the same as support. To experience solidarity, one must have a community of interests, shared beliefs and goals around which to unite, to build sisterhood. Support can be occasional. It can be given and just as easily withdrawn. Solidarity requires sustained, ongoing commitment” (p. 138).

Approaches to solidarity are not just unidirectional, as teachers providing solidarity to students, but with teachers removing barriers and allowing solidarity to occur. This threatens certain notions of power and requires elimination of the hyper surveillance

that Annamma (2017) describes and includes a refusal to police sexuality of multiply-marginalized students as described in the text. Additionally, the girls who worked with Annamma dreamt about being able to express their solidarity via peer support (2017). Solidarity for teachers may look more like allowing natural solidarities among students to proliferate, rather than a performative labor requiring martyrdom. Creating containers that support solidarity may be as simple as a non-intervention, a strengths-based approach that refuses and withdraws from practices of hyper-surveillance and other disciplinary practices that isolate multiply marginalized students.

Pedagogy

Annamma (2017) writes, “if dis/ability were imagined as a political identity with material inequities and resistance tied to it, instead of a biological failure, the pedagogical response would be vastly more productive” (p. 152). While “traumatized” is not equivocal in that it is not typically a desirable political identity, re-evaluating and complicating the pedagogical response not only to disability, but to behaviors labeled as “trauma” are fruitful. DisCrit tenet 4 (2013) notes that authentic relationships are nourished and sustained through listening. A common recommendation is talking circles, but, as Castrellón et al. (2021) note, teachers and families must also be part of these circles; they must make themselves vulnerable in the process. Additionally, Annamma (2017) notes how her multiply-marginalized students craved a kinesthetic and embodied component. This may lead to questions about to what extent our curricular responses to trauma define healing somatic in a particular normative way. Do they tacitly uphold able body-minds, or do they allow for various types of bodies and minds to self-regulate in the ways most natural to them? These questions, which DisCrit understands, can help inform pedagogical implementation with a more intersectional justice-oriented approach.

Contemporary notions of ability often extend beyond traditional academic skills-based assessments, such as math problem-solving and literary analysis, increasingly targeting alternative domains such as emotional intelligence, persistence, and cooperation. Often billed under the auspices of a more equitable and holistic approach to student achievement, grit, growth mindset, and emotional intelligence seemingly invest in the whole student without faulting them for their prior experiences formed by systemic inequities. However, these “soft-skills” less traditionally tied to academic performance are subject to the same tendency to re-entrench oppressions in a mixture of racism and ableism. Staub (2021) writes

“similarly to IQ, EQ was a measure that was situated in racialized notions. Not so similarly, it was thought that it could be ‘taught’ based on principles of self-control...the very concept of impulse control had once been a profoundly racialized one” (pp.136-137).

Given this proclivity for holistic notions to reconstruct a white able-bodied ideal with dispositions tied to this cultural construct, likewise trauma-informed instruction must not conflate healing and growth with aspirations of a white able-bodied male ideal.

Annamma (2017) notes that the girls in her study wanted the arts and that a DisCrit curriculum must have significance to the subjectivities and values of multiply-marginalized students. This is particularly salient in thinking about addressing learning loss, in that remediating skills tend to have an alienating effect on students who already struggle to see themselves reflected in school curriculum. A healing curriculum would address the ways in which trauma, race, gender, and disability are historically intertwined, while also giving students the ability to narrate their own experience, diverge, and disagree. Multiply-marginalized students often construct identities that are free from hegemony and need curriculum that allows them to explore these identities with agency. As Banks et al. (2022) note, “as students reconstruct personal and collective truths about their intersecting identities, they are able to construct affirming racial and disability identities that deconstruct notions of white and able-bodied superiority” (p. 188). In sum, it is imperative that healing from trauma also allows multiply-marginalized students to center identities that are free from hegemony, and that students are able to narrate their own experiences.

CONCLUSION

Trauma-informed approaches are essential to building healthy schools. However, educators must continue to stretch the constructions and use of how they come to understand trauma and its connections to race and disability, as well as numerous other identity markers. Educators must work at both ends of trauma to both resist reproducing it and to interrogate any fixity within which notions of trauma may further marginalize students. Further accounts and localized analysis of how trauma is constructed in tandem with race and gender can help inform creation of classrooms that offer conditions for healing and protection. Classrooms as healing spaces require healing through embodied and accountable interdependency which must center the most vulnerable. These are inherently practices that are activist and resistant in stance. la paperson (2017) that the colonizing machine is made up of decolonizing dreamers whereby the machinery is not static, but continually reassembling amidst and within itself. Teacher identity and agency is one such axis of reassembling towards healing classrooms. There is a radical recovery of agency those who dream past the machine that can only be born out of the struggle inside it. However, these moves towards healing must be grounded in historical honesty and accountability that centers multiply-marginalized students. Critical race theory and disability studies lenses offer tools to take more holistic and comprehensive approaches to trauma and to identify historically situated approaches that resist essentializing.

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