

**Secondary School Staff Perspectives on Psychological Trauma in Students
from Refugee Backgrounds.**

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DECLARATION

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Abstract

Ongoing conflict in parts of the Middle East, Asia, and Africa has resulted in the resettlement of several thousand people from refugee backgrounds in Australia, and the enrolment of many students from refugee backgrounds into Australian secondary schools. Many of these refugee students have experienced traumatic events, and may be undertaking their schooling whilst bearing the ongoing effects of psychological trauma. As a result, teaching and support staff in schools are under increasing pressure to cater for a growing diversity of students with complex needs. Using a qualitative methodology, this study explored the perspectives of ten teachers and support staff working in South Australian public secondary schools to shed light on how staff understand trauma, how trauma affects refugees in the secondary school setting, and what challenges are associated with supporting refugee students. Thematic Analysis was used to generate three themes: “Those Things are Really Going to Impact on You,” “I Can See the Trauma,” and “There’s No Support.” This study provides insight into how staff conceptualise the connection between traumatic events and psychological trauma, the ways in which psychological impacts of trauma are seen to behaviourally manifest in the secondary school setting, and the systemic barriers and facilitators to providing refugee students with adequate support. Findings have the potential to inform systemic changes that could be made in the South Australian public secondary education system to improve support for both refugee students and their teaching and support staff.

CHAPTER 1

Introduction

1.1 Background

Ongoing conflict in parts of the Middle East, Asia, and Africa resulted in the resettlement of 21,968 people with refugee backgrounds in Australia between 2016 and 2017 alone, approximately half of whom were children under the age of 18 (The Department of Immigration and Border Protection, 2017). The increasing number of refugee youth entering Australia has, by extension, led to an increase in the number of enrolments in secondary schools of students from refugee backgrounds. The traumatic events experienced by many of these students, coupled with continuing post-migration factors encountered in Australia, produce a series of challenges faced not only by students, but also their teaching and support staff (Block, Cross, Riggs, & Gibbs, 2014). This is particularly the case for students experiencing psychological trauma, given its deleterious effects on a range of areas, including memory and cognition, affect regulation, and the capacity to form healthy relationships, all of which make it an especially pertinent challenge during secondary schooling (Stewart, 2011).

Several studies have suggested Australian schools are failing to provide adequate support for students from refugee backgrounds to successfully transition into their new country (Matthews, 2008; Miller, Ziaian, & Esterman, 2018; Taylor & Sidhu, 2012). Others have highlighted that the support school staff can offer is limited by a lack of knowledge and skills for how to intervene with students at risk for mental illness, such as students from refugee backgrounds who may have psychological trauma, as well as how to effectively manage job stress (Koller & Bertel, 2006; Hill, 2011; Koenig, 2014). Indeed, despite awareness around the

need for improved support systems, a paucity of research has investigated the experiences of staff and students from refugee backgrounds in Australian secondary schools. As such, this study qualitatively explored the experiences of South Australian secondary school teachers and support staff working with students from refugee backgrounds to shed light on how staff understand trauma, how psychological trauma affects refugees in secondary schools, and what staff identify as their support needs.

1.2 Definitions

The term ‘refugee’ refers to people who meet the criteria under the *1951 Convention relating to the Status of Refugees*. The term ‘asylum seeker’ describes a person who has left their country in search of safety, and is trying to obtain refugee status. While asylum seekers sometimes participate in Australia’s education system, this study will focus on refugees, as asylum seekers face different challenges in Australian society, such as the uncertainty of obtaining refugee status and longer term residency (van Kooy & Bowman, 2017). Specifically, the study will focus on students from refugee backgrounds who are in secondary schools, and will refer to them as ‘refugee students.’ Recognising that the legal age of refugee children and young people is often inconsistent with their biological age due to a range of reasons, including unknown birth dates and changes to identity documentation, refugee students are assumed to be aged between twelve and twenty-one years (Stewart, 2011).

1.3 Trauma in Refugee Children and Adolescents

It is not uncommon for refugees to be exposed to multiple traumatic events both prior to and during migration, including torture, sexual assault, violence, famine, and death of loved ones (Hassan, Ventevogel, Jefee-Bahloul, Barkil-Oteo, & Kirmayer, 2016; Sapmaz et al., 2017).

Although researchers such as Rutter (2006) have emphasised the resilience and resourcefulness many refugee children and adolescents possess, exposure to traumatic events has been found to increase the risk of psychological distress and the development of psychological disorders in this population (Betancourt et al., 2012; El Baba & Colucci, 2017). While prevalence rates vary, studies from the United States (US) and United Kingdom (UK) suggest approximately 40% of refugee children and adolescents may have a psychiatric disorder, the most common of these being posttraumatic stress disorder (PTSD) (Betancourt et al., 2012; Hodes, 2000). Other trauma-related symptomatology includes anxiety, generalised fear, somatic complaints, behavioural problems, withdrawal, and difficulties with attention, sleep, and peer relationships (Bronstein & Montgomery, 2011; Ehntholt & Yule, 2006).

According to a systematic review by Bronstein and Montgomery (2011), prevalence rates of PTSD in refugees under the age of 25 in six Western countries (Denmark, Netherlands, Sweden, UK, US, and Canada) range between 19 and 54% ($N = 2,124$). These rates represent up to ten times the rate found in non-refugee adolescents in Australia (Phoenix Australia, 2013). Additionally, refugee children and adolescents are more likely to experience the ‘cumulative stress’ of compounding stressors, placing them at greater risk for PTSD and other disorders than children and adolescents who experience a single traumatic event (Bronstein & Montgomery, 2011; Phoenix Australia, 2013). Notably, not all those who experience a traumatic event will develop psychological trauma (Porter & Haslam, 2005). In relation to PTSD specifically, estimates suggest approximately one third of children and adolescents exposed to traumatic events in the general population will develop PTSD (Phoenix Australia, 2013), however rates for refugee children and adolescents are unclear, as exemplified by the wide discrepancy between prevalence rates identified by Bronstein and Montgomery.

The Diagnostic and Statistical Manual of Mental Disorders, fifth edition (DSM-5; American Psychiatric Association (APA), 2013) draws a distinction between experiencing traumatic events and developing psychological trauma, and requires that a person both experience a traumatic event and develop a series of specific symptoms for a diagnosis of PTSD to be applied. According to Criteria A, traumatic events are defined as exposure to actual or threatened death, serious injury, or sexual violence, through directly experiencing, witnessing, learning about (if occurring to a family member or close friend), or experiencing repeated exposure to aversive details of the event (APA, 2013). Diagnostic Criteria B, C, D, and E are organised based on four symptom clusters: re-experiencing symptoms (eg., flashbacks); avoidance symptoms (eg. avoiding trauma-related stimuli); negative alterations in cognitions and mood (eg. negative thoughts or feelings about oneself or the world); and hyperarousal symptoms (eg. aggression, hypervigilance, difficulty concentrating). Further diagnostic criteria include “clinically significant distress or impairment in social, occupational, or other important areas of functioning,” a symptom duration of more than one month, and confirmation that symptoms are not due to medication, substance use, or other illness (APA, 2013). The DSM includes two other trauma categories in addition to PTSD where the full criteria for PTSD are not met.

Two issues associated with understanding trauma-related disorders are the imprecise definitions of the term ‘trauma’ found in the academic literature, and the lack of suitable measurement tools for assessing mental health issues for refugee children and adolescents more generally (Gadeberg & Norredam, 2016). The term ‘trauma’ is frequently used to refer variably to both the experience of traumatic events, as well as the psychological outcomes associated with traumatic events (Briere & Scott, 2006). Indeed, much of the literature pertaining to refugee mental health does not provide a distinction between the two, consequently promoting the

assumption that the experience of traumatic events inevitably leads to psychological trauma. This conflation in terminology and assumption of universal psychological trauma has been argued to problematically pathologize the refugee experience and promote a deficit model which undermines the resilience of refugee students (Rutter, 2006; Uptin, Wright, & Harwood, 2016). Additionally, several researchers have critiqued the use of PTSD as a diagnostic label in people who have experienced war and conflict for medicalising human suffering and encouraging ignorance of the various factors which contribute to psychological trauma (Kienzler, 2008; Summerfield, 2000). It is suggested that stereotyping refugee students as ‘traumatised’ has the potential to do harm in the school setting by increasing students’ sense of victimisation and overlooking students’ coping abilities and resources (Cameron, Freedenberg, & Jackson, 2016).

Additionally, the lack of appropriate assessment tools for measuring psychological distress in refugees has made it difficult to establish the connection between experiencing traumatic events and developing psychological trauma (Davidson, Murray, & Schweitzer, 2010; Wind, van der Aa, de la Rie, & Knipscheer, 2017). As Hollifield et al. (2002) note, conclusions have been difficult to draw from existing literature due to inappropriately translated or culturally insensitive evaluation measures, and inconsistent trial samples. Additionally, literature pertaining to the prevalence of psychological trauma in refugee populations predominantly focuses on those who meet the criteria for PTSD (Bronstein & Montgomery, 2011; Fazel & Wheeler, 2005), potentially failing to include refugees who may be experiencing psychological distress and functional impairment that is not deemed ‘clinically significant’ (Gadeberg & Norredam, 2016). Indeed, the usefulness of ‘clinical significance’ as a criterium in diagnostic classes has been criticised for its lack of precision and subjectivity (Cooper, 2013; Widiger & Clark, 2000),

begging the question as to whether psychological trauma needs to be clinically diagnosable to yield functional impairments worthy of attention.

Overall, clarification regarding how the word ‘trauma’ is used and understood by persons who work with and provide psychological support to refugees is needed. To generate clarity within this thesis, ‘traumatic events’ will refer to events or experiences fulfilling the DSM-5 criteria of the same term, while ‘psychological trauma’ will refer to the psychological symptomatology associated with experiencing traumatic events.

1.4 Refugee Students in Australian Schools

One of the places where refugee students, including those who may have psychological trauma, will potentially receive psychological support in Australia is within the education system. Indeed, schools have been identified as the most common setting where adolescent refugees access mental health services in South Australia (Ziaian, de Anstiss, Antonious, Baghurst, & Sawyer, 2011). Yet, the nuances of psychological trauma for refugee students and the ways in which it is understood within the education system remain under-explored, particularly within Australian secondary schools. To the best of the researcher’s knowledge no previous research has explored the perspectives of secondary school staff with relation to psychological trauma; only a small number of qualitative studies have been found to explore attitudes towards trauma-informed care, or elementary school teachers’ perspectives on their role in caring for students with traumatic exposure (Alisic, 2012; Donisch, Bray, & Gewritz, 2016).

Studies exploring the experiences of refugee students in resettlement countries such as Australia have, however, identified a plethora of post-migration challenges which can exacerbate psychological trauma and subsequently impact upon refugee students’ schooling. These include

perceived discrimination, lower language acquisition, acculturation difficulties, lack of support from school staff, lack of parental support, financial struggles, disrupted prior schooling, unfamiliarity with the new schooling system, alienation from services, impaired development, and poor academic achievement (Aichberger et al., 2015; Betancourt et al., 2012; Ellis et al., 2010; Schweitzer, Brough, Vromans, & Asic-Kobe, 2011; Söndergaard & Theorell, 2004; Stewart, 2011). Furthermore, research has indicated refugee students in secondary schools may face increased risk of a range of negative outcomes than their peers in primary schools who have been more prominently researched (Due & Riggs, 2016; Due, Riggs, & Augoustinos, 2014), due to added complexities such as puberty, aggression, poverty, social exclusion, psychological development, and future education or employment (Stewart, 2011). As Stewart (2011) highlights, appropriate programs and services need to be available in secondary schools, particularly since research has shown that when schools fail to address the psychological and social needs of refugee students, rates of school drop-out increase, leading to further marginalisation.

With increasing diversity in Australian classrooms, teachers are expected to care and cater for students with vastly differing literacy skills, previous educational experience, and cultural and linguistic backgrounds (Block, Cross, Riggs, & Gibbs, 2014). Given the gravity of these challenges, studies have increasingly indicated that teachers and support staff are feeling underprepared for the challenges facing them in diverse classrooms, and particularly for working with students with additional needs such as those with trauma or refugee background (Miller, Ziaian, & Esterman, 2018). In particular, burnout, a syndrome characterised by emotional exhaustion, depersonalisation, and reduced personal accomplishment (Maslach, Jackson, & Leiter, 1996) has also been highlighted as a common problem among teachers (Koenig, 2014). It

is likely that the psychological trauma and other complex needs exhibited by refugee students in the school setting may be compounding these issues.

1.5 Setting the Scene: The South Australian Education System

Public education in South Australia is governed by the Department for Education and Child Development (DECD). DECD's English as an Additional Language or Dialect (EALD) Program supports culturally and linguistically diverse students through two programs: the New Arrivals Program (NAP), which provides intensive English language support, modified curriculum, activities in school and community, and bilingual classroom support; and the EALD General Support program, which supports students in mainstream settings to develop English language proficiency. As such, teachers working with refugee students either work in a NAP, or more commonly, in a mainstream classroom. Support staff include educational psychologists, social workers, bilingual school services officers (BSSOs), and community liaison officers (who are generally based externally from individual schools, and work across a range of schools), and counsellors, youth workers, and other staff (who typically work internally within one school).

1.6 Aims of the Present Study

Little research has explored the ways psychological trauma manifests for refugee students in Australian secondary schools, or considered the perspectives of teachers and support staff working with them. As such, this study had three key aims. First, it aimed to contribute to the literature examining psychological trauma in secondary school students from refugee backgrounds by exploring how teachers and other staff working with refugee students define, understand, and use the term 'trauma'. Second, it aimed to explore how teachers perceive psychological trauma to manifest in educational settings, and how it affects overall experience of

the education system for refugee students. Finally, it aimed to explore what challenges are associated with supporting refugee students, and what training and support is available to staff. This will in turn inform what types of support and training should be provided in future to benefit both staff and students.

CHAPTER 2

Method

2.1 Participants

Participants were people working in the secondary education system with refugee students, and were broadly split into two categories; teachers (teaching content, working in the classroom) or support staff (with a wellbeing focus, primarily working outside the classroom). These categories were pre-determined to encourage a diversity of viewpoints and for triangulation purposes. Inclusion criteria specified participants must be English speakers, over the age of 18, currently living in South Australia, and employed by DECD in the last two years, and must have experience working with refugee students in the last two years.

Participants were recruited using a convenience sampling method. Specifically, recruitment was undertaken using flyers (Appendix A) posted to the ‘Teachers of Adelaide’ Facebook group, and emailed directly to twenty-three schools using email addresses obtained via school websites. These schools were identified using the Australian Schools Directory website, and filtered based on being public secondary schools in Adelaide, located in the two northern and two southern most councils of metropolitan Adelaide where refugee communities are known to settle (The Department of Social Services, 2012). The response rate from schools was low at only 26%, which is consistent with similar studies (Due & Riggs, 2016). Two participants were recruited via the emailed flyers, and five participants were recruited via the Facebook advertisement. Thus, further recruitment was made through passive snowballing, which involved asking existing participants to invite potential participants to make contact with the researcher. The recruitment process resulted in ten participants, who were six teachers and four support staff.

Table 1

Participant Demographics

Participant	Gender	Role	Years working in schools	Years working with refugees
██████	F	Former Teacher, current Counsellor	5	4
████	M	Teacher	7	1
██████	F	Teacher	8	8
██████	F	Social Worker	30	30
██████	F	Teacher	17	8
████	F	Teacher	3	6
██████	F	NAP Teacher	5	5
██████	M	Teacher	4	1
██████	M	Youth Worker	14	14
██████	F	Educational Psychologist	40	20

Notes. Names used are pseudonyms. Number of years working in schools are rounded up to include present year.

Table 1 describes the various roles held by participants as well as number of years working in the education system, and working with students from refugee backgrounds, whether in schools or other institutions. Pseudonyms have replaced the names of participants, and ages and other demographic details have not been included to maintain anonymity. The age range of participants was 27 – 67 years ($M = 42$, $SD = 15$). Five participants were first or second generation migrants from European countries, one was of Asian descent and came from a refugee background, three identified as Australian, and one identified as New Zealander-Australian. It is noted the categories of teachers and support staff were found not to be exclusive.

Several participants had worked in a range of settings and drew from their experiences in different roles, thus there was some overlap between the categories. Nevertheless, for the purposes of this study, participants are categorised according to their current role.

2.2 Procedure

The University of Adelaide School of Psychology Human Research Ethics Subcommittee approved this project on the 3rd of April, 2018 (approval number ████████). A total of ten informal, semi-structured interviews were conducted at times convenient for participants. Nine interviews were conducted face-to-face at locations negotiated with participants, and one interview was conducted over the phone. The researcher conducted all interviews, which took place over a 4-month period from April to July, 2018. Interviews ranged from 49 to 86 minutes ($M = 69.5$). All participants who expressed interest in the study between April and June and met eligibility criteria were interviewed. Consent was given freely by all participants at the time of the interview, either in writing or verbally if interviewed over the phone (see Appendix B for Participant Information Sheet, and Appendix C for Consent Form).

Interview questions were broad and open-ended, allowing participants freedom in their responses. Questions were formulated based on the paucity of research addressing how school staff understand ‘trauma’ and how psychological trauma affects refugee students in the secondary school setting (see Appendix D for Interview Guide). An iterative approach was used to further develop interview questions so that interesting or unexpected topics which surfaced in one interview were asked about in the next interview. Follow-up questions were asked during interviews to further explore or clarify responses relevant to the study.

Demographic information, including age, gender, identification with a cultural background, role, number of years working in secondary schools, and number of years working with refugees, was gathered for each participant at the end of each interview. At the completion of each interview, participants were asked whether they would like to review their interview transcript and respond with any amendments, changes or deletions after transcription was complete. An Audit Trail was maintained throughout the research process to record potential themes, thoughts on reframing questions, correspondence, and other notes which would inform future interviews and analysis (Tracy, 2010). The Audit Trail also provided an opportunity for the researcher to engage in reflexive practice, whereby one examines their own personal biases or subjectivity within the data collection and analysis processes (Tracy, 2010).

Interviews were transcribed verbatim by the researcher and transcripts were emailed to six participants who had indicated a desire to review their interview transcript. This process, known as member reflections (Tracy, 2010) satisfies part of the credibility criteria for excellence in qualitative research, and fulfils ethical obligations to participants. Two participants reviewed and returned their transcripts with no major changes, one participant edited responses for clarity, and three did not reply. Pseudonyms replaced the names of participants to protect their identities in the final thesis or future reports, and all details specific to a participant were removed from the transcripts to ensure the identities of participants, students, schools, and other staff or places of work were not identifiable.

Transcripts were analysed by the researcher at the completion of all interviews. Themes were periodically discussed and reworked with the supervisor until a final thematic structure was mutually decided upon. This process of continuous comparison and reworking is necessary to

ensure rigour in Thematic Analysis (TA; Braun & Clarke, 2013). Data were analysed and evaluated using a critical realist ontology, allowing the researcher to examine what participants were saying on face-value while also considering the context behind what was being said (Braun & Clarke, 2013). For example, it was acknowledged that participants were working and responding within the DECD structure, and this would have an impact on participant responses. The epistemological position taken was epistemic contextualism, so the researcher was not concerned with a universal 'truth' in a realist sense, but rather what was 'true' in the participants' subjective worlds (Braun & Clarke, 2013). For example, the researcher recognised that each participant would discuss issues in the context of their own role within DECD.

TA was chosen for the study as it is a theoretically-flexible analytic method, ideal for searching for patterns of meaning across qualitative interview data (Braun and Clarke, 2006). Once transcription was complete, the six steps of TA, as summarised by Braun and Clarke (2006), were undertaken: 1) reading and familiarisation of the data; 2) coding of the data; 3) searching for themes; 4) reviewing themes; 5) defining and naming themes; and 6) finalising the analysis relating back to the research aims and the larger body of literature.

As stated above, the categories of teachers and support staff were not distinct, and additionally there was some within-group variation. Notably, two support staff worked across a range of schools (Aspasia and Meredith), compared with others who worked internally within schools. Also, two teachers worked in classrooms comprised only of refugee students (Jeanne and Deborah), compared with others who worked in mainstream classrooms. As such, although triangulation was intended between data from teachers and support staff, early coding revealed

no substantial differences between the data. Thus, the data were coded together and where differences exist between teachers and support staff, these are explicitly pointed out.

It is noted the researcher is born of a migrant parent and grandparents and has some exposure to refugees who have fled war within her Cypriot community. The researcher also works on a casual basis across South Australian secondary schools delivering study-skills seminars to students. Furthermore, she has studied both psychology and anthropology, and as such has been influenced both by psychiatric models of mental illness, as well as constructionist and contextualist theoretical frameworks. It is recognised by the researcher the combination of an individual's personal and academic experiences engenders a specific relationship to the data, therefore frequent consultation with the supervisor was deliberately made to provide another perspective.

CHAPTER 3

Results

TA was used to generate three themes from the data: “Those Things are Going to Really Impact on You,” “I Can See the Trauma,” and “There’s No Support.” Where data has been removed from an extract, this is indicated by square-bracketed ellipses (e.g. “tipping chairs [...] and throwing their books”). Additional contextual data is provided in square brackets. The term ‘participants’ is used to describe teachers and support staff collectively. When referring specifically to teachers or support staff, it is stated as such.

3.1 “Those Things are Going to Really Impact on You”: Staff Understandings of Psychological Trauma and its Mediating Factors

This theme captures the ways in which participants understood and used the word ‘trauma,’ how they determined whether or not a student was experiencing psychological trauma as a result of a traumatic event, and how mediating factors could lead to different presentations of psychological trauma and outcomes in the school setting.

Both teachers and support staff defined ‘trauma’ as a significant event in a student’s life that evoked an intense emotional reaction, and subsequently impacted upon several areas of psychological functioning. Events and experiences included in this definition were called ‘traumatic events,’ and broadly conceptualised as abnormal circumstances that threatened feelings of safety and stability, and induced distress and fear. Traumatic events were described as capable of impacting upon students’ “ability to socially and emotionally engage” (Georgia), “cognitive engagement” (Georgia), and “the way they think about things, how they perceive things, how they view the world” (Tanya). According to participants, traumatic event exposure

could become a “block and a barrier to living a normal life” (Aspasia) and lead to a myriad of psychological symptomatology, including impairments to memory, emotional dysregulation, difficulty concentrating, fearfulness, lack of trust, and hypervigilance. Support staff additionally noted students sometimes experienced nightmares associated with traumatic events. Participants explained that observable behaviours could be used as indicators that a student had experienced traumatic events, and subsequently developed psychological trauma. Observable behaviours are discussed in Theme 2.

Oh gosh... an actual definition. I would define it as a major upheaval or experience in their life that has caused a huge emotional impact. Yeah. It’s hard because it has to be general.

([REDACTED] lines 31-33)

Interestingly, participants conceptualised traumatic events as existing on a spectrum of severity, so that some events were associated with a greater likelihood of eliciting psychological trauma than others. Participants highlighted events which directly threatened the safety and survival of the student or their loved ones were most likely to elicit psychological trauma, and that the most severe events were unlikely to be “a once off trauma” (Georgia) but an “ongoing type situation” ([REDACTED] Support staff understood this ongoing situation as cumulative trauma, and indicated it was common among refugee students, and elicited the most deleterious psychological symptomatology.

For those who actually experience the worst of it, either their parents were raped, were robbed through the journey, or they witnessed the killing of other people through that particular journey. Some kids describe, you know, that same body floating in a little small

lake, blood. They have to cross it, that is the only choice. The bomb blast through the journey. People might step on it and they're just blown out. And these are the kind of traumatising that these families and kids are going through. And yeah it's, it's a long term.

([REDACTED] lines 52-59)

Participants additionally noted a traumatic event did not necessarily have “to be a really horrible experience” ([REDACTED] it could be “something really little that happened, but to them it was traumatic” ([REDACTED] Importantly, participants implied that the subjective experience of an event as distressing was an essential criterion for whether a refugee student would develop psychological trauma.

Furthermore, it was suggested that developing psychological trauma was not an inevitable result of experiencing subjectively traumatic events, but was mediated by other factors so that under certain circumstances students could “live through what could be a traumatic experience but come out not traumatised” ([REDACTED] According to participants, the more distressing the event, the more likely it would lead to psychological trauma, but where this distress could be minimised, the psychological impact of traumatic event exposure could be mitigated. For example, participants discussed circumstances under which the “idea of movement and leaving” ([REDACTED] would or would not be likely to evoke psychological trauma. Participants indicated students were more likely to develop psychological trauma if movement was forced, students were old enough to understand what was happening, students were escaping warzones, or there was a high degree of uncertainty surrounding resettlement.

I've taught others but I don't think that they've had traumatic experiences. I think a lot of the other students either came to Australia when they were too young to realise or too young to remember the events, or yeah they were generally, I'm not going to say economic refugees, but they were more escaping less wartime areas I think. I'm fairly certain I've had a few other students who are yeah, refugees with no sort of traumatic events, at least not manifesting in my classroom.

([REDACTED] lines 188-194)

Most notably, the support of parents throughout the refugee journey was considered to be a crucial determinant of how much distress a student would experience during the move, such that “seeing that fear and nervousness in their parents” ([REDACTED] was associated with a higher likelihood of developing psychological trauma.

They could have their one bag over their shoulders but mum is very nurturing and supportive because she's also been supported, so the child is getting the support that they need, the nurture that they need. So when there's that safety in the relationship, I think the trauma is less than a child who is totally bare.

([REDACTED] lines 163-167)

A range of mediating factors throughout pre-migration, migration, and post-migration were also used to explain the diversity of outcomes demonstrated by students in the school context. Students with very little previous educational experience or English proficiency were seen to experience lower self-confidence, and sometimes depression, which in turn exacerbated their psychological trauma symptomatology. This was often identified as the case for students

who had spent a substantial portion of time in refugee camps. Challenges at home, such as domestic violence or care duties were also noted as predictors of poorer educational outcomes and internalising behaviours, such as being withdrawn. For these students it was speculated that “school might not necessarily be a priority” (██████). Additionally, if parents were dealing with symptoms of their own psychological trauma, were strict with their children, did not speak openly about the traumatic events experienced by the family, and were overall struggling to adapt to Australian life, students were considered more likely to develop more severe internalising symptoms.

I'd say that some are coping better than others with fleeing their country. I guess it depends if they are refugees because of violence or because of political issue, like some choose to leave before all the violence happen, some move directly from their country to Australia while others have been in refugee centres and camps. And I think it's also how much the parents have experienced. We have children where the parents haven't experienced too much, so when they are in Australia and they feel safe, they are ok. But then there is all the children who actually have to cope with parents' trauma as well. And I think that's where the difference will be. Also how much English they know, how much they can communicate, how well they integrated, how well they're accepted.

(██████ lines 40-50)

On the other hand, it was suggested that parental support coupled with good English skills, and familiarity with schooling enabled students to set “aspirational” (██████) goals and engage more with their schooling. According to teachers, students who had parents that knew “the importance of education” (██████) or who were “really grateful that they're here and they're

safe and they've got all these opportunities" (██████) tended to have a positive disposition towards school, and put more effort into their studies. While some teachers drew comparisons between students from particular countries of origin in relation to their degree and presentation of psychological trauma – and subsequent school engagement – teachers also noted that ultimately individual students differed in the ways in which traumatic events may or may not lead to psychological trauma, and in the relative effect of any mediating variables.

3.2 “I Can See the Trauma”: Observed Behavioural Manifestations of Psychological Trauma in the School Setting

Participants reported knowing when students were impacted by psychological trauma by observing their behaviour, and described a diversity of both “subtle” (██████) and “overt” (██████) indicators that a student may have “come from a trauma background” (██████). Drawing on examples centred on refugee students they had taught or supported, a contrast was made between students who tended to display internalising behaviours, such as withdrawal, or externalising behaviours, such as aggression. However, participants indicated these categories were not discrete, and highlighted some students did not fit into either category. This theme captures observed behavioural manifestations of psychological trauma in refugee students. Overall, psychological trauma was seen to manifest in a diversity of behaviours which were largely underpinned by chronic hypervigilance.

They can joke around, they can ask to go to the toilet all the time. You know, they're the real easy ones, they're the ones that put excuses in the way and fly under the radar. Or they're really really quiet and sit there and copy their friends work. They just don't do anything, they pretend they're working. Or there's the really heightened ones that are

really confrontational 'cause they're going to make damn sure they're not going to do anything and you're not going to see what's wrong with them because they're just going to remain tough. And they're really time consuming, they're really smart, got all the behaviours, the swagger, they look like, you know, you can't touch me, I'm smarter than you. But really underneath they're really vulnerable.

(██████ lines 112-121)

Almost all participants described refugee students as exhibiting behaviours which suggested that they were hypervigilant. Hypervigilance was understood to be a “heightened” (██████ state of awareness stemming from chronic fearfulness and a constant feeling of “having to protect themselves” (Meredith). Teachers noted hypervigilance was observable in the way students would “scan the room every time they moved into a new environment” (██████ or be seen to be “looking around all the time” (██████ Several teachers also identified sitting “with their backs toward the wall” (██████ as an indicator of hypervigilance, speculating it might be because students wanted to be aware of their surroundings at all times. Hypervigilance was identified as the most prominent psychological impact of trauma, apparently evident even in students “that look happy all the time” (██████ and was associated with other psychological impacts including emotional dysregulation, poor concentration, and lack of trust.

They're just always aware of their surroundings. You figure, at times I just think they're calmly sitting there working, but as soon as somebody, that door is open, everybody's looking. And I know that's kind of, in primary school that's what they do all the time too, their focus is gone really fast as soon as someone walks in. I've tried to move the tables and chairs so that they're sitting in groups, but they really like that U shape better because

nobody's behind them. And I think it's just about being aware of things that are going on.

([REDACTED] lines 407-414)

Both teachers and support staff noted that being constantly hypervigilant meant students were prone to reacting to stimuli in the school environment that were perceived as threatening, or were reminders of previously experienced traumatic events. Responses triggered by such stimuli typically resulted in externalising behaviours, such as aggression or erraticism, or internalising behaviours, such as being “withdrawn and quiet” ([REDACTED] Participants indicated they understood these behaviours as demonstrations of the fight, flight or freeze response. Interestingly, some participants reported externalising responses were most common, while others reported the opposite:

They just always seem to have a sense of needing to fight for where they are, there's a sense of fight or flight quite frequently. There's rarely a freeze. Rarely a 'I need to shut down and sit in the corner and cry.' It was a, 'I need to fight my way through the situation.'

([REDACTED] lines 211-217)

Probably seen fight once. They really just cower. They don't, the most of them just don't physically fight, but flight yeah, maybe the fact that they go, they can internalise a lot and go within themselves, that's probably flight.

([REDACTED] lines 469-474)

Participants indicated that emotional regulation was thus a challenge for many refugee students. Physical fighting, destructive behaviour, and aggressive verbal retaliation, including excessive swearing, were noted as behaviours often observed in refugee students. Participants noted that for many students “it will just take someone to look at them in the wrong way or brush past them in the corridor and they will explode and react” (██████████)

There was one student who was being a bit silly and threw a pen to his friend, and it accidentally hit the head of another kid. And that kid pretty much leaped from his chair and then, you know, came across the classroom and beat the hell out of the kids that threw the pen. And it was just flat out reaction of instant threat and having to fight physically for, because of this issue.

(██████████ lines 221-226)

Both teachers and support staff further explained that students might still be exhibiting behaviours that were necessary or appropriate for their survival during pre-migration and migration, as they were not yet accustomed to feeling safe. As such, participants hypothesised students might be exhibiting confrontational and aggressive behaviour in order to maintain a sense of control within their environment. For example, defiant behaviour, such as “talking back to the teacher or not following instructions” (██████████) was proposed to be symptomatic of previous traumatic exposure which had left a refugee student feeling powerless and vulnerable. Likewise, defensiveness and verbal retaliation were inferred to be symptomatic of a traumatic experience which had left students with a lack of trust for authority. It was purported that underpinning all types of aggressive behaviour was hypervigilance, and a constant readiness to protect oneself.

And if you say something, not that you tell them off, but if you say something they don't like it goes with 'you don't like me.' Everything is so personal [...]. Or they have an argument and I say 'that's all good, tomorrow's a new day,' and it's like 'well you say that but you are going to tell on me.' Lack of trust and fear [...]. And I had kids going, I said 'alright I understand you're angry and it's ok to be angry, it's ok to have feelings, it's the way you deal with it that's not ok. We need to work something out.' And they look at us and say 'well in our country if we don't fight we get shot.'

([REDACTED] lines 299-309)

In addition to aggression, hypervigilance was also seen to manifest in internalising behaviours. Participants indicated that an overarching fear of and lack of trust in others caused students to engage in internalising behaviours so as to maintain distance between themselves and others. Wanting to "blend in with the rest of the group" ([REDACTED] and being apprehensive towards one-on-one help were seen to be indicators of psychological trauma.

It really affects them. They don't leave the classroom until a few minutes after the bell has gone, so the hallway is cleared. And then when they come back, usually as soon as the bell goes, they stand with their backs against the lockers so everyone can walk past them. With their eyes down. So we kind of tell them they don't have to come straight away, they can wait until the hall clears. But they don't listen. They kind of hear that bell, they need to come. They just stand there. Yeah. And they all stick together at lunch too and they are in a place at school that's away from everybody else, all the other mainstream kids.

([REDACTED] lines 248-255)

As noted above, hypervigilance was seen to impair concentration and cognitive engagement in some refugee students, and this was recognisable through what teachers called a “block” (██████) or “barrier” (██████) that appeared to visibly prevent students from engaging with their work. Engaging with cognitive challenges was also reportedly avoided, and teachers indicated students preferred to “stay in a comfort zone, doing repetitive rote learning [...] as opposed to thinking abstractly” (██████). To avoid engaging with challenging work, students would purportedly react in various ways. Teachers noted some would sit quietly and stare at their empty page, while others would distract themselves by chatting to other students or making excuses to leave the classroom. However, if pushed, some students would become increasingly agitated until exploding into a flurry of aggressive behaviour, for example “swearing and tipping chairs [...] and throwing their books” (██████). Once they had reached this point, teachers reported all communication was lost; “there is not eye contact, they don’t hear you, they are in a zone” (Jeanne). It was speculated that the block might occur as a side-effect of hypervigilance.

They’re escalated so they’re always quite vigilant, and they want to know what’s going on, and they’re always going from one subject to another, and they can’t quite focus, and they are always putting barriers in the way when it gets too hard. And I think that’s one of the things that is a real tell-tale sign for me is that, you know, you’re giving them something to do, and you know that it’s well within their range and they can do it, but they don’t have the focus and the concentration, and then ‘it’s shit’ and ‘it’s crap’ and ‘I’m not doing it’. And so they give up really easily and throw away, and put all this behaviour in place [...] it’s like they’re super vigilant, always being wary of who’s doing what and what’s going on, and it’s almost like they don’t want to focus on anything

because they don't want to miss out on something 'cause it might happen and that will impact them again. I don't know, that's how I see it.

(██████ lines 98-109)

Visible indicators that a student was having a "bad day" (██████) or was becoming agitated and might erupt included "twitching" (██████) "tensing up" (██████) "talking quickly" (██████) increasing volume of speech, and engaging in destructive behaviour, for instance, being on task and then suddenly "scribbling on their work or destroying things" (Jeanne). However, some erratic behaviour was also described whereby no obvious signs preceded the eruption. This change was understood to be triggered by stimuli in the environment, including sounds, for example the deep voice of a male teacher, a smell, or a certain discussion topic:

And as soon as I said that, he was like 'Yes! That man! That man, yes! I hate him!' It was like [snaps fingers] there was a trigger, and then that's when he went on about a 2-3 minute rant... and you know his tone and demeanour changed along with that. He seemed like a pretty happy kid, and he would, when he talked about 'oh yeah, yeah I was shot' you know he was quite happy-go-lucky and he was quite interesting to talk to because he saw life here as very very fortunate and a lot easier than what he had to go through, so he was very happy to be here. But as soon as that was said, he went from being a happy nice kid, to, you know, his tone had changed.

(██████ lines 160-168)

Importantly, both teachers and support staff highlighted that sometimes these behavioural indicators may point to other issues independent of psychological trauma, including language

barriers, disrupted prior schooling, cultural differences, depression, anxiety, or even just issues related to puberty, and this often made it difficult to know if students did indeed have psychological trauma. Most notably, psychological trauma was seen to often coalesce or be confused with intellectual disability, or other disorders, such as Autism Spectrum Disorder. Teachers indicated determining the difference was important, as a diagnosis of intellectual disability would allow them to accrue funding and resources to better support students. However, qualified support staff were reluctant to provide these diagnoses, indicating it was frequently too difficult to confidently generate a diagnosis given the complex range of potential contributing factors.

3.3 “There’s No Support”: Staff Appeals for Systemic Change

Participants demonstrated a great deal of care for the students they worked with and a desire to provide them and their families with the best possible support. Two beliefs conveyed by all participants were that school was not only a place for learning content, but also a place to be psychologically supported, and that student-staff relationships were a crucial foundation for both teaching content and providing psychological support (often conceptualised by participants in terms of wellbeing, safety, and belonging). However, realising these beliefs in the secondary school setting was deemed difficult, and many systemic issues were considered barriers to providing appropriate support. This theme captures what teachers and support staff consider to be best practice for supporting refugee students, challenges related to teaching and supporting refugee students, and suggestions for improvement.

Both teachers and internal support staff described a tendency to extend beyond their role requirements, frequently working outside school hours to provide additional support and

maintain contact with students' families. Teachers often reported considering themselves not only teachers, but mentors and counsellors. In particular, teachers working outside of mainstream classrooms understood their role as fundamentally extending beyond the confines of their job-descriptions, as illustrated by [REDACTED] who commented "I think teaching anybody with a refugee background, our job is not just teaching." Building relationships was also said to be a prerequisite to effective teaching for many students, as the lack of trust initially demonstrated by many refugee students was seen to be a barrier to engagement.

I like to try and be that sort of person who can notice those sorts of things I guess, you know, I got into teaching because I wanted to help people. And as teachers it's not just down at the front and talk. It's, you know, you need to make a relationship with students that you teach, you need to be aware of those signs that they may need extra support or counselling or reference to psychological help, or even if it's just a shoulder to cry on. Those things are just important to me.

([REDACTED] lines 230-236)

Interestingly, when discussing other teachers, both teachers and support staff constructed a dichotomy between 'invested teachers,' and 'uninvested teachers,' who apparently felt little to no obligation to support students beyond their teaching requirements, and intentionally avoided building relationships. Whilst never blatantly admonished, uninvested teachers were seen as engaging in undesirable teaching practice, and making students "more likely to re-traumatise" [REDACTED] for example, by misinterpreting a triggered response as deliberately rebellious behaviour and inappropriately punishing the student. However, teachers did acknowledge the reasons behind the choice not to "invest" [REDACTED] Every teacher, and those support staff working

internally within schools, directly reported feeling emotionally exhausted, stressed, burnt out, or frequently taking their work home with them. Some staff reported the realisation that they were unable to help students left them “jaded” (██████) and led them to seek therapy, engage in unhealthy coping mechanisms – such as excessive alcohol use – or even end up in hospital from stress-related illness. Hence, participants proposed that teachers choosing not to build relationships might be doing so out of protection for their own mental health. Having said this, support staff urged teachers to consider the crucial role they can play in the lives of students, and celebrated the efforts of invested teachers.

I think like for me I went out of my way to find out the information that I do know. Other teachers wouldn't. I wanted to know what was in that file so I could best support what we were doing in the classroom. Other teachers just would be like, or wouldn't think to maybe, to go and access that to kind of be – I'm a very curious person, not nosy, curious, so I like to have all the information in front of me so I know how to best deal with the situation. But not everyone is like that I suppose, and they just kind of want to be like ‘ok, I'm just going to whatever and it's fine’ 'cause maybe they think it will impact how they interact with that person, that student in the classroom and maybe that would be a negative thing then.

(██████ lines 145-154)

Despite being “emotionally exhausted” (██████) and dealing with unhealthy bouts of “enormous stress” (██████) many participants reported a passion for their work and held fast to their beliefs about the importance of relationship-building and providing psychological support

to students. Rather than altering their beliefs, they indicated four primary systemic changes needed to be made to facilitate best practice.

First, participants discussed the importance of involving families in student wellbeing, and requested more opportunities and support in connecting with parents. Empowerment to assist a student and generate a “wrap around effect” (██████████) was considered ideal practice, whereby all supports available to the student would be working in synergy to develop the best possible outcome for the student. As such, internal staff flagged they would like to be kept well-informed when other staff or services had worked with a student. They also noted that in many cases they were provided with very little information about their students. When information was obtained from a students’ psychological records, some teachers claimed they were “stone-walled by the department” (██████████) when trying to access the supports services recommended. Conversely, external support staff indicated they hoped internal staff were accessing these reports, but assumed internal staff might be too busy to do so.

Second, participants indicated there was “too much focus on kids needing to write, and not on everything else” (██████████). It was stated that priorities at a systemic level should be shifted to focus more on psychological support and life-skills rather than SACE completion and literacy and numeracy scores. Participants expressed that ideally teachers should first foster a safe and supportive environment, build confidence in English language skills, and then teach content. Teachers teaching outside the mainstream additionally argued that without adequate support during the transition to mainstream classrooms, refugee students would regress in their confidence, and this would exacerbate their psychological trauma symptomatology. It was

recommended that more attention be focused on psychological support, followed by confidence in language.

I would love the government not to push me to teach the Australian curriculum and force them to do all the testing we have to because they are not ready. I meant they are a different bunch of kids and I think they need to be treated like that until they're ready to be integrated into the community, you can't just go bang here you are. They need time. And yeah they need to learn the language. They need to feel safe. How it works, I don't know.

([REDACTED] lines 830-836)

Third, teachers indicated they felt under-equipped to manage the challenges presented by their refugee students, and particularly those with psychological trauma, often making comments such as “I’m not a mental health professional” ([REDACTED] “I’m just a teacher, I’m not a psychologist or counsellor” ([REDACTED] or “I’m not a psychologist so it’s really hard” ([REDACTED] Overall, participants indicated training regarding psychological trauma was scarce, and frequently accessible only to leadership, wellbeing staff, or certain subject teachers (e.g. those teaching English to EALD students). Additionally, participants reported where training was available it typically focused solely on child-abuse or domestic violence, and provided no ongoing support. As such, participants reportedly resorted to seeking resources online. In particular, teachers and support staff working internally within schools indicated a strong desire for accessible, quality training, and reported frustration and distress, for both themselves and their students who were potentially disadvantaged by their lack of expertise.

I was quite angry thinking after why didn't we have that? Why didn't we have the training? Why didn't we have the information? There are a lot of times where I may have judged a child's situation not understanding their background, where I might have been better informed, and to be honest it felt like ignorant, and I could have developed a better sense of empathy with different situations to be able to better cater to a student's wellbeing. Special Provisions in SACE – a lot of those traumas we now consider with the way that they're assessed – getting extra time on exams, having rest breaks, we could have put those things in place as a Stage 2 teacher that I wasn't aware of and couldn't do anything about, and maybe the kids might have got a better result. And a lot of kids at [school] in particular – maybe three to four actual physical fights a week somewhere in the yard or in the corridor – could have those things been handled differently? Yeah? When you're considering children and trauma and what their triggers might be, things could have been avoided so that there was less impact on the school life, more safety and belonging as well. So yeah, enormous, it would have been a totally different ball game.

([REDACTED] lines 54-79)

Finally, participants reported a need for “more resourcing and more people” ([REDACTED]) Working within the secondary school model of education, teachers indicated they were afforded minimal one-on-one time with students to develop relationships and offer psychological or learning support. Participants all indicated a crucial need for more support staff for refugee students, especially those with psychological trauma, including school services officers (SSOs), BSSOs, and interpreters. Counsellors from the Survivors of Torture and Trauma Assistance and Rehabilitation Services (STTARS) were also seen to be beneficial. Teachers also requested more teaching resources for students with minimal English, both for their sake and for the students.

Overall, participants emphasised that support invested into staff would filter down into support for students; “to be able to deal with and support effectively those students who need it and their families [...] schools need to look at how they need to support their workers” (██████████)

CHAPTER 4

Discussion

4.1 Overview

This study used qualitative methods to explore the experiences of teachers and support staff working with refugee students in public South Australian secondary schools. Specifically, it explored the ways in which staff understand and use the word ‘trauma,’ how psychological trauma behaviourally manifests in the school setting, and what challenges are associated with teaching and supporting refugee students, as well as how these can be overcome. Three main themes were generated: “Those Things are Really Going to Impact On You,” “I Can See the Trauma,” and “There’s No Support.”

Findings indicate teachers and support staff have an understanding of ‘trauma’ and ‘traumatic events’ that aligns with DSM-5 criteria for PTSD, as described in the introduction. Generally, traumatic events were seen to have the potential to elicit psychological trauma, but only if students subjectively perceived the experience of these traumatic events as distressing. As such, the student’s subjective experience of an event was seen as an important factor for determining whether traumatic events would lead to psychological trauma – although participants also exercised their own subjectivity when considering what should constitute a traumatic event by placing events on a spectrum of severity. Participants suggested events that threaten the safety and survival of students or their loved ones would be most likely to elicit psychological trauma, and support staff specifically suggested cumulative trauma would be particularly likely to elicit the most severe symptomatology. Notably, these suggestions are each

supported by previous findings (Allwood, Bell-Dolan, & Husaid, 2003; Morgos, Worden, & Gupta, 2007; Mels, Deluyn, Broekaert, & Rosseel, 2010; Scheeringa et al. 2006).

Furthermore, other factors were seen to mediate the onset of psychological trauma or lead to more internalising symptoms, or depression. Most notably, these factors included parental stress and domestic issues, which have indeed been found to exacerbate both psychological trauma and depression in child and adolescent refugees (Reed, Fazel, Jones, Panter-Brick, & Stein, 2012; Sujoldzic et al., 2006). Overall, when comparing students, participants avoided stereotyping, and indicated that all refugee students were different. Importantly, these findings collectively suggest that participants do not assume universal trauma and pathologize the refugee experience, or approach all refugee students with a deficit model, as is common according to Cameron, Frydenberg, and Jackson (2016). Rather, participants perceive the importance of other factors, in particular the family's role, in mediating psychological trauma, and thus consider it good practice to build relationships with and support students' families.

Findings from the present study also suggest teachers and support staff were able to observe the behavioural manifestations of psychological trauma in the school setting. In particular, participants identified aggression, defiance, erraticism, withdrawal, and poor concentration and memory, which have previously been identified in refugee children and adolescents (Bronstein & Montgomery, 2011; Entholt & Yule, 2006). Notably, behaviours described map strongly to the symptoms outlined in the DSM-5 criteria for PTSD, particularly the symptom clusters associated with Criteria D and E, which address “negative alterations in cognitions and mood” and “marked alterations in arousal and reactivity” respectively (APA, 2013). Symptoms relating to feelings or thoughts, or dissociative experiences such as flashbacks,

however, were rarely discussed by teachers. The omission of these descriptions may be explained by the limitations of the setting in which teachers work, as teachers relied primarily upon behaviours that could be observed in the classroom to identify psychological trauma. Support staff, however, did mention some instances of students with nightmares, which may suggest that the one-on-one support provided by support staff can facilitate a deeper understanding of the symptomatology affecting refugee students with psychological trauma.

Most importantly, participants highlighted hypervigilance was common to almost all refugee students – even those who generally appeared happy and nonconfrontational – and inferred that both internalising and externalising behaviours could be explained by a chronic state of fearfulness and hyper-awareness of one’s surroundings. Furthermore, both teachers and support staff frequently described the psychological consequences of hypervigilance in terms of the way they impacted upon refugee students’ engagement with their schooling. As such, the three components of school engagement (behavioural, emotional, and cognitive) outlined by Fredericks, Blumenfeld, and Paris (2004) are useful for analysing results. Participants suggested elements of behavioural engagement, including effort, persistence, and attention were stunted by a difficulty with concentration, while active involvement and contribution to class discussion or activities was limited by lack of trust in the teacher. Emotional engagement was identified as particularly impacted upon by students’ complex home lives which often made them detached from their learning. Equally, cognitive engagement was seen to be impaired, particularly in the way students tended to avoid challenging work, and struggled with simple memorisation. A tripartite model of school engagement recently proposed for use in South Australia by Goldspink, and Foster (2013) may be useful for exploring how psychological trauma impacts upon refugee students in secondary schools in future.

Finally, consistent with previous research (Koenig, 2014) participants indicated they had experienced considerable stress and burnout due to the amount of time and care they invested into their refugee students, as well as the subsequent sense of helplessness associated with being unable to provide their students with the support they deemed necessary due to systemic constraints. This finding mirrors previous research exploring challenges faced by teachers of students with similarly complex special needs (Hoffman, Palladion, & Barnett, 2007). Furthermore, participants identified staff who engage in ‘best practice’ as most likely to experience burnout, supporting previously findings concerning school leadership staff (Brock & Grady, 2002).

Of particular concern is the way staff coped with the challenges they encountered. Several participants discussed seeking information about trauma, teaching resources, or professional help for their mental health, which are similar to strategies previously found to be used by teachers of students with psychological trauma (Hill, 2010). However, one participant discussed resorting to alcohol abuse to cope with the burnout associated with caring for a particularly difficult student over a year-long period, and another discussed going to hospital and taking six months of leave for a stress-related illness. Notably, internal support staff reported worse stress than external support staff, perhaps due to the type of training each receive or the possibility that external staff learn to emotionally detach from their work and engage in self-care as necessary. While findings from this study support previous research about stress and burnout among school staff (Koenig, 2014), it is inferred that the added challenges placed on teachers and support staff working with refugee students with psychological trauma do indeed exacerbate this stress.

4.2 Strengths

The present study sought to explore the ways in which teachers and support staff understand and use the word ‘trauma,’ which has not been previously studied in Australia to the researcher’s knowledge. As such, a qualitative methodology was appropriate to obtain unrestricted responses from participants and to generate a more nuanced understanding of the challenges facing both students and staff in secondary schools.

Additionally, the study explored the perspectives of both teachers and support staff to generate a richer understanding of how psychological trauma presents in refugee students, both within and outside of the classroom. While teachers were able to give detailed descriptions of how psychological trauma appeared to influence school engagement in the classroom, support staff were able to provide greater perspective on the broader family context of students, and offer more detailed descriptions of students’.

Overall, the study also adhered to the accepted standards for rigorous qualitative research, and addressed a current and relevant issue in Australia’s diversifying society, as exhibited by the enthusiasm of participants to share their experiences in the hopes of improving school support systems (Braun & Clarke, 2013; Tracy, 2010).

4.3 Limitations and Future Research

While care was taken to recruit both teachers and support staff, not all types of support staff were represented, and there was only one participant for each type of support staff role. Furthermore, as previously noted, the categories of support staff and teachers were not discrete. Some unexpected diversity in the teacher sample between mainstream teachers and those teaching refugees exclusively was evident, and challenges related to stress and burnout were

especially reported by internal support staff, but not external support staff. Future research could specifically recruit several staff of a particular role to delve further into the challenges faced by different types of staff, and the ways in which they understand and observe psychological trauma.

Additionally, some bias was identified in the sample. Participants were recruited from schools in geographical locations with lower socio-economic status, which may have influenced the types of behaviours identified in students and the types of support available to staff and students. Additionally, given participants were recruited using convenience and snowball sampling – and required to initiate contact with the researcher – it is likely the study included participants with particularly strong opinions about the ways that refugee students should be supported, or who were particularly stressed or burnt out from their experiences teaching and supporting refugee students. Future research should attempt to recruit participants from a wider range of schools, and include the perspectives of so-called ‘uninvested’ teachers to form a more complete picture of the challenges faced by staff on a whole, and the perceived relevance of psychological trauma in the school setting.

Importantly, while hypervigilance was identified as a common symptom underpinning a range of behaviours, participants also highlighted it was difficult to determine if students’ behaviour was indicative of psychological trauma, or if it might reflect depression, anxiety, intellectual disability, English proficiency levels, disrupted prior schooling, or even puberty. As such, it was not possible to identify whether students had psychological trauma, be it ‘clinically significant’ or not. Regardless, accurately measuring psychological trauma in refugee students using the currently available tools is still problematic. Nevertheless, future research could seek to

compare students with and without ‘clinically significant’ symptomatology to see if any relevant differences emerge. Furthermore, in several instances participants reported they were uncertain if students were indeed refugees, had been exposed to traumatic events, or dealing with any domestic challenges. Future research could triangulate data obtained from staff, parents, and students to gain a more holistic picture of how psychological trauma influences students and how other factors mediate this.

Interestingly, participants suggested some patterns in symptomatology might be associated with students from certain countries of origin, but were reluctant to stereotype, explaining there were always students who made the exception. It is possible social desirability bias may have prevented participants from confidently pointing out cultural differences. As such, further research could focus specifically on cultural factors to explore differences in symptomatology and engagement between students from different countries of origin. Additionally, participants indicated that refugee students experience different traumatic events to non-refugee students, and inferred this might lead to different psychological outcomes. Further research could therefore explore the differences between refugee students who may have experiences of war, and non-refugee students who might experience domestic violence or neglect.

4.4 Implications

This study contributes to the virtually non-existent literature regarding the way the word ‘trauma’ is used by teachers and support staff working with refugees in the secondary school setting. It indicates participants use the term ‘trauma’ to refer to traumatic events which cause psychological trauma, and more frequently, the psychological outcomes of traumatic events. The

study further indicates teachers and support staff have an understanding that traumatic events do not inevitably lead to psychological trauma, and that mediating factors can influence whether or not refugee students will develop psychological trauma. This implies that participants do not treat refugee students as a homogenous group, but rather consider other factors before determining whether or not a student has psychological trauma.

This study also highlights the perceived importance of hypervigilance as a psychological outcome of traumatic events which underpins both externalising and internalising behaviours. While previous literature has acknowledged hypervigilance as a symptom of psychological trauma, little research has highlighted hypervigilance as a potential key underpinning factor for other behaviours (Silove, 1998). Importantly, hypervigilance was also perceived to be present in students who generally display few to no other externalising or internalising symptoms, and suggested to have a negative impact on their ability to focus and retain information. Thus, while it is unclear whether or not the students discussed had 'clinically significant' psychological trauma, according to participants students were still affected by functional impairment. As such, this is a novel finding indicating participants perceive hypervigilance as one of the most prominent psychological outcomes of traumatic event exposure, affecting even students who otherwise appear to be unaffected by psychological trauma.

The finding that teachers and support staff perceive hypervigilance to be a prominent indicator of psychological trauma may have implications for the way staff identify psychological trauma and set up systems to ensure students are psychologically supported in the school setting. For example, teachers might mitigate the probability of students being agitated by unexpected stimuli by keeping the classroom as predictable as possible. More broadly, as the study included

participants exclusively working within the South Australian public education system, findings have practical implications for DECD schools. Overarchingly, consistent with the Australian literature (Miller, Ziaian, & Esterman, 2018) participants highlighted that more support is needed for both refugee students and their teachers and support staff. Based on the present findings, DECD could provide training which specifically prepares staff for the challenges presented by refugee students with psychological trauma, increase focus on English language support and increase the availability of BSSOs, interpreters, and teaching resources, and improve processes which connect families, external services, and staff to provide tailored support for individual students.

4.5 Conclusions

Findings indicate that participants understand ‘trauma’ as the subjective experience of traumatic events which impact upon psychological functioning, and perceive the importance of mediating factors in the development of psychological trauma. Notably, chronic hypervigilance was highlighted as a key psychological outcome underpinning a range of internalising and externalising behaviours which cause functional impairment and reduce engagement with schooling. Importantly, participants reported considerably high stress levels and appealed for systemic changes, including more training, that will increase support for both refugee students and staff. The study has implications for the way refugee students with psychological trauma are identified and supported in secondary schools, and encourages further research into the nuanced ways in which psychological trauma presents for different students, and is perceived by staff.

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Appendix A



SCHOOL of
PSYCHOLOGY

Have you taught or supported a student from a refugee background?

I would like to hear from you.

As part of my Honours in Psychology, I am conducting a study to explore **staff perspectives on trauma in refugee students** and **support for staff working with refugee students**. Participation is voluntary and will involve approximately one hour of your time for a confidential interview.

I would like to speak with you if you have taught or provided support to students with refugee backgrounds in Australia in the last two years. Your participation could assist staff and refugee students to receive better support in future.

For more information or to participate, please email Melpomene Tantalos at



PARTICIPANT INFORMATION SHEET

PROJECT TITLE: Secondary school staff perspectives on trauma in students from refugee backgrounds.

HUMAN RESEARCH ETHICS COMMITTEE APPROVAL NUMBER: [REDACTED]

PRINCIPAL INVESTIGATOR: Dr Clemence Due

STUDENT RESEARCHER: Melpomene (Mellie) Tantalos

STUDENT'S DEGREE: Bachelor of Psychological Science (Honours)

Dear Participant,

You are invited to participate in the research project described below.

What is the project about?

This research project will explore how psychological trauma in students from refugee backgrounds manifests in the secondary school setting. Specifically, it will explore how trauma affects student engagement, performance, and sense of belonging, according to South Australian teachers and support staff. Additionally, it will explore the types of support or training currently available to staff when working with students from refugee backgrounds, and resources staff feel should be available.

The overarching aims for the project are to better understand how trauma affects refugee students, and to inform training programs and allocation of resources for secondary schools with refugee students. Training programs and other resources are hoped to enhance the experience of high school for refugee students, and also help staff feel competent in assisting refugee students with traumatic backgrounds.

Who is undertaking the project?

This project is being conducted by Dr Clemence Due and Mellie Tantalos. This research will form the basis for the degree of Bachelor of Psychological Science (Honours) at the University of Adelaide under the supervision of Dr Due.

Why am I being invited to participate?

You are being invited as you are a subject teacher or support staff member at a secondary school in South Australia who has worked with students from refugee backgrounds in the last two years.

What am I being invited to do?

You are being invited to participate in an interview with Mellie to share your experiences teaching or supporting refugee students. Specifically, you will be asked about how traumatic experiences and/or psychological trauma seem to affect student engagement, performance, and sense of belonging at school; what programs are in place to support teachers and other staff working with refugees; and what resources are needed to enhance support.

Your interview will take place at a location and time most convenient to you. Location can include any quiet public place, such as an office at your school, public library, or a room at the University of Adelaide. Your interview will be audio-recorded, and the recording will be transcribed word-for-word by Mellie. This transcription will then be sent back to you for any further comments.

How much time will my involvement in the project take?

The duration of your interview will be approximately 30-60 minutes.

Are there any risks associated with participating in this project?

There are no foreseeable risks associated with your participation in this project.

What are the potential benefits of the research project?

It is hoped the perspectives shared will increase understandings of how trauma in students from refugee backgrounds manifests in an educational setting, how staff are currently responding to associated challenges, and what further assistance is needed to equip teachers to respond to these challenges. The findings of this study will be reproduced in a short report which will potentially inform training programs for staff to increase confidence in managing students from refugee backgrounds, or influence the allocation of funding to schools for other resources. Staff will be invited to use this report for advocacy purposes.

Can I withdraw from the project?

Participation in this project is completely voluntary. If you agree to participate, you can withdraw from the study at any time up until the completion of your interview.

What will happen to my information?

The researchers will de-identify your interview transcript by assigning a pseudonym. Your pseudonym will be used when referring to anything you have said in the interview within the thesis, published journal article, or report. While all efforts will be made to remove any information that might identify you, as the sample size is small, complete anonymity cannot be guaranteed. However, the upmost care will be taken to ensure that no personally identifying details are revealed.

Your interview recordings and transcript will only be accessible to Dr Due and Mellie. Recordings and transcripts will be stored on a password protected computer at all times. At the conclusion of the study, interview transcripts will be kept securely in Dr Due's office in The School of Psychology for a period of five years, in accordance with the Australian Code for the Responsible Conduct of Research.

The information you provide will be analysed and discussed within an Honours thesis. Excerpts from your interview may also be used to exemplify themes that were common across all interviews. The results of this study will additionally be summarised in a report, and may also be published in a journal article. You will not be identified in any of these documents. You are invited to request a copy of any of these documents. You will also be given access to your own interview transcript only, and encouraged to make any further comments before analysis.

Your information will only be used as described in this participant information sheet and it will only be disclosed according to the consent provided, except as required by law.

[REDACTED]

What if I have a complaint or any concerns?

The study has been approved by the Human Research ethics Sub Committee at the University of Adelaide [REDACTED]. If you have questions or problems associated with the practical aspects of your participation in the project, or wish to raise a concern or complaint about the project, then you should consult the Principal Investigator. Contact the School of Psychology Human Research Ethics Sub-Committee’s Secretariat on phone +61 8 8313 4936 or by email to hrec@adelaide.edu.au if you wish to speak with an independent person regarding concerns or a complaint, the University’s policy on research involving human participants, or your rights as a participant. Any complaint or concern will be treated in confidence and fully investigated. You will be informed of the outcome.

If I want to participate, what do I do?

Please email Mellie, or call Dr Due’s office, to express your interest in being interviewed (see above for contact details). Please feel free to pass this information on to interested colleagues.

Yours sincerely,

Dr Clemence Due and Mellie Tantalos

Appendix C

Human Research Ethics Committee (HREC)



CONSENT FORM

1. I have read the attached Information Sheet and agree to take part in the following research project:

Title:	Secondary school staff perspectives on trauma in students from refugee backgrounds
Ethics Approval Number:	██████████

2. I have had the project, so far as it affects me, and the potential risks and burdens fully explained to my satisfaction by the research worker. I have had the opportunity to ask any questions I may have about the project and my participation. My consent is given freely.
3. Although I understand the purpose of the research project, it has also been explained that my involvement may not be of any benefit to me.
4. I agree to participate in the activities outlined in the participant information sheet.
5. I agree to be audio recorded.
6. I understand that I am free to withdraw from the project at any time until completion of the interview.
7. I have been informed that the information gained in the project may be published in a journal article, thesis, and report.
8. I have been informed that while I will not be named in the published materials, it may not be possible to guarantee my anonymity given the nature of the study and/or small number of participants involved.
9. My information will only be used for the purpose of this research project and it will only be disclosed according to the consent provided, except where disclosure is required by law.
10. I am aware that I should keep a copy of this Consent Form, when completed, and the attached Information Sheet.

Participant to complete:

Name: _____ Signature: _____ Date: _____

Researcher/Witness to complete:

I have described the nature of the research to _____
(print name of participant)

and in my opinion she/he understood the explanation.

Signature: _____ Position: _____ Date: _____

Appendix D

Interview Guide

RESEARCH TITLE: Secondary school staff perspectives on psychological trauma in students from refugee backgrounds.

Aims:

1. How do secondary school staff define trauma?
2. How does trauma in affect engagement, belonging, academic outcomes, and mental health for refugee students in the secondary school setting?
3. What are the challenges associated with working with refugee students?

Interview process:

Greetings

Consent

- Sign form
- OR Read form, then turn on recording, then get recorded consent

Reiterate project

- Explore staff perspectives on trauma in refugee students
- Speaking to both teachers and support staff
- Learning how trauma is understood
- Learning what kind of support staff need

Background

- Can you tell me about your experiences as a (staff member) and with refugee background students?
- Adjusted to: Tell me a little bit about yourself and your teaching background

Demographics:

- Age
- Gender
- Identification with cultural background
- Role within school
- Number of years teaching/supporting
- Number of years working with refugees
- Training related to trauma or cultural sensitivity

Defining trauma

- Based on your experience with refugee students, how would you define trauma?
- OR can you tell me a bit about your understandings of trauma?
- Added: Do you think all refugees have [what they described]? Why/why not?

Characteristics of students

- Tell me about the refugee students you've worked with
- What does trauma "look like" for refugee students? What impact does it have on...
 - Mental health
 - Engagement
 - Belonging
 - Comparison to other students
 - Differences between refugees
 - Academic outcomes
 - Other?

Support for staff

- What support or training have you been had?
- What kind of support is available?

What's working and what isn't

* Signpost that we are going to talk about both positive and negative attributes of current systems

- What is your school doing well?
- What could be done better?
- What have you observed in other schools or institutions that works well?
- Tips from previous workplaces?
- Resources available?

Challenges faced by staff

* Only bring this up if not mentioned

- Burnout?
- Confidently equipped to manage these students?
- Secondary trauma?

Resources

- What do you think should be available to staff?
- What kind of resources would be useful to staff working with refugee students?
- Is there anything that would help you as a staff member? Anything that would help the students?

Closing

- Return to demographic questions if not already answered
- Ask the following:
 - Do you want a copy of your transcript?
 - Do you want to see the themes?
 - Do you want to provide your email address so we can send a digital copy of the thesis?
- Thank you, please pass the info to your colleagues.

Notes: