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## TRAUMA-SENSITIVE PEDAGOGY & PRACTICE NEWSLETTER 2 (OF 2)

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**Abstract:** This publication is the second of two newsletters published in this issue of Art/Research International. This newsletter is followed by a commentary and references for both newsletters.

Funding from *Research Impact Canada*, *VP Research & Innovation University of Alberta* and the *Kule Institute for Advanced Study* mobilized evidence-informed knowledge from “Image, Body, and Voice: Supporting Girls’ Sense of Wellbeing,” a participatory poetic inquiry with grade-6 girls in an inner-city school in Alberta, through professional community engagement. At an afternoon workshop, held during spring break with in-service teachers, leaders, and parents/guardians, activities central to the research were shared for the goal of generating mutual benefit skills and knowledge. It offered experiential opportunities, including the creation of mini body maps, and a combination of strategies to support mental wellness, including culturally aware methods for diverse populations, intended for social inclusion and freedom from discrimination and violence.

Newsletter 2, as research creation artifact, sought to support teachers, leaders, and families during the onset of COVID-19, when K-12 education moved to on-line delivery and health regulations required social distancing. The content shared beyond “Image, Body, & Voice” sought to support school staff and families through information about

compassion fatigue, soul weariness, the power of play, the centrality of the body in healing, emotional regulation and traumatic events. This newsletter is one of two research documents provided as follow up to the attendees of both funded events.

**Keywords:** social emotional needs; mental health; trauma; play; imagination; vagus nerve; emotional regulation; body maps; self awareness; arts-based methods

S P R I N G 2 0 2 0

# the TSPP Newsletter

Supporting Emotional and Mental Health Needs



## Leaning into Traditional Wisdom

“Gifts from the earth or from each other establish a particular relationship, an obligation of sorts to give, to receive, and to reciprocate. . . . This is the fundamental nature of gifts: they move, and their value increases with their passage. . . . The more something is shared, the greater its value becomes.” ~Robin Wall Kimmerer,

*Braiding Sweetgrass, 2013*

“A person who is beginning to sense the suffering of life is, at the same time, beginning to awaken to deeper realities, truer realities. For suffering smashes to pieces the complacency of our normal fictions about reality, and forces us to come alive in a special sense—to see carefully, to feel deeply, to touch ourselves and our worlds in ways we have heretofore avoided.” ~Ken Wilber

“To be free of suffering . . .

We must recognize that the suffering of one person or one nation is the suffering of humanity. That the happiness of one person or nation is the happiness of humanity.”

~His Holiness the 14th Dali Lama

## Community & Public Engagement

Gratitude to Dr. Elizabeth Shen, Principal, Lynnwood School, for hosting a “Trauma-Sensitive Pedagogy & Practice” workshop on February 18, 2020 for in-service teachers, administrators, and parents. Social-emotional and mental health understanding and skills central to the research project, “Image, Body, & Voice: Supporting Girls’ Sense of Wellbeing,” along with insights learned from the participants were shared. Naming supports, listing resources (inner and outer), body-mapping, tracking sensation, developing body awareness, engaging in focused, deliberate breathing, and learning the value of SLOW and PAUSE were some of the tools shared. Info included here stems from this Alberta Advisory Committee for Educational Studies (AACES) funded research (2017-2019).

## Somatic Inventory of Compassion Fatigue/Burnout

### Possible Symptoms:

- Easily overwhelmed
- Difficulty focusing
- Excessive blaming
- Lack of self care
- Compulsive behaviour
- Apathy toward life
- Lack of flexibility

- Lack of energy/drive
- General negativity
- Denial about problem
- Somatic complaints
- Lack of future vision
- Not able to finish tasks
- Exhausted; depressed; preoccupied/distracted

### How to heal:

- Kindness toward self
- Mindfulness practices
- Admit issue to self
- Clarify boundaries
- Express needs to oneself
- Engage physical body
- Sleep; enact self-care...





**“It can be very satisfying to discover that one can indeed walk through sadness and out of it.”**

~Robyn Davidson, *Tracks*, 1995

### Soul weariness can come from caring . . .

“There is a soul weariness that comes with caring. From daily doing business with the handiwork of fear. Sometimes it lives at the edges of one’s life, brushing against hope and barely making its presence known. At other times, it comes crashing in, overtaking one with its vivid images of another’s terror with its profound demands for attention; nightmares, strange fears, and generalized hopelessness.” ~Beth Hudnall Stamm, PhD, *Somatic Psychotherapy Toolbox*, 2018

“Repeated activation of the relaxation response can reverse sustained problems in the body and mend the internal wear and tear brought on by stress.”

~Herbert Benson, MD, *Timeless Healing*, 1996

### Who Needs Healing?

“To turn our dangerous situation around fully . . . we must heal the underlying sickness—our relationship with the planet, our worldview. This means literally changing how we perceive the world around us, and that requires the alteration of our consciousness.”

~P. Devereux, *Re-visioning the Earth*, 1996

### All humans are instinctively creative!

“Creativity and imagination are not frosting on a cake: They are integral to our sustainability. They are survival mechanisms. They are of the essence of who we are.” ~Matthew Fox, *Creativity: Where the Divine and Human Meet*, 2002

“When we create, when we bring something new into being, we are ourselves changed by the process.” Art-making transforms spirit and matter, psyche and body into a more unified whole. ~Margaret Humphris, “Sandplay & Art, *Jung Journal*, 13(2), 143-155.







## Power of Play: Imagination, Body & the Possibility of Healing

Central to both imagination and the body is play. Unstructured, untimed, play where the mind-body follows meaningful yet free associations and imaginal wondering. For many youth and children, play has become a structured event. How might adult organization and monitoring fall away to return imagination to the centrality of play? How might adults themselves get “out of their heads” so that a sheet enclosing the sofa and chair becomes a magical place? That is, where the restriction of time and space and the judging, fearing ego soften or fall away and pots’n pans become a drum kit, a cardboard box becomes a space ship, an ice cream shop, or a tree house in a new land? Dropping into the process of creative transformation requires that we live closer to

our instincts, intuition, emotions, and our core (authentic self). Children’s natural “language” as such is more multi-dimensional and closer, as a result, to the very heart of life. It is not a linear language that one can simply learn. It is more about unlearning and returning to body because things are not static or fixed, and shifts happen with ease. Playing with sand, clay, movement, art—often the non-verbal is in itself a means of experiencing a new way of being in one’s self, potentially free from the mental constructs that keep us stuck. Play in this way aids to establish an inner witness, an additional position from which we can see, free from identification with the literal and rational. This is, in part, why the creative process (and all art-making) is experienced as healing.



## Get Moving!!

**Hypo-arousal: numb, cool, lethargic, no feeling;**  
**Hyper-arousal: restless, warm, irritable, impatient**

“When you are freezing into hypo-arousal or spinning-out with hyper-arousal, the antidote is easy: MOVE! That means, whatever you are doing, wherever you are, when you notice the signs of freezing, when your body is feeling overcome with anxiety, you need to MOVE! It’s easy to do but hard to remember.”

Take this as direct instruction. Notice the sensations that accompany either state for you. Now internalize a voice that says “move” in relation to these sensations. As soon as you begin to feel these, stop what you are doing and MOVE! (M. Mischke-Reeds, *Somatic Psychotherapy Toolbox*, 2018, p. 220)

## Support for ANS Regulation

### Methods to Stimulate the Vagus Nerve

The vagus nerve is a nerve that wanders throughout the entire body and connects every major organ and tissue. Stimulating the vagus nerve induces the parasympathetic nervous system, also known as the rest and digest system—inducing a relaxation response. The easiest method for stimulation: deep, diaphragmatic breathing!



### More Methods. . .

Exercise; Massage—give yourself a hand and/or foot massage using a favourite oil or lotion; take an epsom salt Bath (magnesium soothes!); Fast—intermittently for 1-2 days; Gag—use tongue depressor or back of toothbrush to stimulate a gag reflex which is like jumping jacks for your vagus nerve or Gargle; Laugh!



### Practice Daily

Breathe, breathe, and more breathing! Start with a 3-second inhale; 3-second exhale and build to 4, then 5.

Meditation: Yoga; Qi Gong; Tai Chi; Chant; Sing—calms the mind and induces relaxation.

Positive Social Relationships—phone, write letters, send a care package, create a digital coffee date. . . .



### Sympathetic & Parasympathetic NS

Autonomic nervous system (ANS) regulates all basic functions of our bodies, including internal organs. It operates automatically. Sympathetic nervous system (activating) and parasympathetic nervous system (calming) control opposite physical and emotional reactions, depending on the external environment and our perceptions of it at any given moment.



## Traumatic Events are Extraordinary!

Judith Herman (2015) offers a helpful understanding of trauma during our current health crisis: “Traumatic events are extraordinary, not because they occur rarely, but rather because they overwhelm the ordinary human adaptations to life . . . the common denominator of trauma is a feeling of ‘intense fear, helplessness, loss of control, and threat of annihilation.’” Natural and human-made disasters are beyond our control, which result in fear and often dislocation (including isolation from normal social engagement) at both a community and individual level. Loss of community connection, even in the form of familiar shopkeepers and passers-by, and loss of the normal support networks that provide essential physical emotional and safety nets, such as regular conversation with work-colleagues, can activate a sense of betrayal and loss of relationship with the divine and/or nature. Disasters, in this case a pandemic, demonstrate the potency of nature, a power that can make us feel small and insignificant. Such feelings can bring up a primeval layer of rage and terror. One of the primary characteristics of such events is the sense of overwhelming helplessness. Reaching out for the support and help of family, friends, and community is critical, as is offering aid and care to others. Maintaining connection, even with pets, and strangers, aids to restore faith and stimulate healing. Try to avoid watching repeated images and reporting on TV and social media. Get the necessary information and then do not continue to view. Watching scenes of suffering and horror will deepen states of traumatic shock and freezing. Express your feelings in meaningful ways, including many forms of artistic expression. Listen to others’ stories, but avoid letting the telling become a repetitive, compulsive activity. It can be very helpful to tell the story with interruptions, questions, reflection, so to break up

the sense of urgency and haste to retell the story—which is a form of traumatic reenactment. Elaborate on the deep and real sentiments that can emerge from sharing what happened with interested and compassionate listeners. Let the feeling, affect, and sensation rise with the telling. If it becomes too much, breathe and slow; make contact with your listener. Resume when the activation has lessened. It is important, when either hypo- or hyper-aroused not to exceed one’s window of tolerance whereby the body becomes under- or over-whelmed. Events that disrupt our sense of security and trust in the world might well bring up other unresolved traumas. Proceed gently. Before addressing earlier traumas that might appear at this time, it is important to stabilize from what just happened/is happening. Some might experience horror associated with disasters. If so, wanting to escape is a natural response. This urge is often, simultaneously, coupled with a strong urge to help and protect those being harmed. The sense of one’s personal safety coming at the expense of others will often produce survivor guilt, strong identification with feelings of helplessness, as well as feelings of impotent rage. Such feelings might sometimes be turned inward as a result of not being able to stop the harm from happening to others. The primary characteristics of horror trauma are very primal and instinctive, and often include strong, almost animal-like reactions. The mutually exclusive urges of self-protection and protection of others can produce agonizing survival dilemmas. It is important to move out of identification with helplessness. Access the desire for being alive and for living. This is a fluid time. Things will change. They will not always be this way. (See Peter Levine, *Somatic Experiencing Practitioner Training, Intermediate: Module 3*)



# Engage with Nature

Be curious! Wonder! Delight in what can be seen in the night sky, along river valley trails, with your pets in local parks, even plants! Listen to birdsong, wind in the trees, silence. Buy a plant and pot it in a beautiful planter, or slip one and start it for a friend. For millennia, Nature has been a source of renewal for people throughout the world.

“Intelligence is no longer ours alone but is a property of the Earth . . . each ecology seems to have its own particular intelligence, its unique vernacular of soil and leaf and sky.” ~David Abram, *The Spell of the Sensual*, 1997



## The TSPP Newsletter

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## Commentary on *Trauma-Sensitive Pedagogy & Practice Newsletters 1 and 2*

### Research Context

Informed by global and national literature and initiatives, including the World Health Organization (WHO), the Mental Health Commission of Canada (MHCC), the Public Health Agency of Canada (PHAC), and research in early developmental trauma, "mental health" has been identified, pre-COVID-19, as a global crisis (Sieff, 2015; van der Kolk, 2014; Lanius et al., 2010; Levine & Kline, 2007). In response, public education has been deemed the ideal place to address child and youth mental health (Wei et al., 2011; Wei et al., 2015). Present trends in policy research promote school mental health as an effective means to address issues of illness, and access to and effectiveness of service delivery. This direction has encouraged policy makers and researchers from various disciplines to influence and shape best practices and evidence-based or informed programs, services, and interventions in schools. Alberta's recent educational guidelines integrating systems of care with new and emerging Programs of Study (Alberta Education, 2018) have intensified the need for whole-school approaches (JCSH, 2008).

Whole-school approaches integrate social and emotional wellbeing into all aspects of teaching and learning, promote behavioural skills, and empathy-based programs. Building upon Wells, Barlow, and Stewart-Brown (2003) who sought universal approaches to mental health promotion, effectiveness was found when interventions ran continuously for more than a year; they involved changes to the school climate; they were informed by student voices; and they were aimed at the promotion of mental health as opposed to the prevention of mental illness (McHale & Maidrag, 2015, p. 6). Because educators and staff members today are expected to undergo professional learning to acquire skills that support child and youth mental health (Kutcher et al, 2013), the response requires the development of mental health resources, supports, and training for them (Wei et al, 2011). In addition, the *Alberta School Act* has responded in-kind by implementing new criteria as Teaching Quality Standard (TQS) (Alberta Education 2018a) (as well as Leadership Quality Standard (Alberta Education, 2018b)), applicable to teacher certification, professional development, supervision, and evaluation; thereby, intensifying the need within Alberta. Of particular relevance to this study are the Teaching Quality Standard sections mandating: (i) "to build positive and productive relationships with students, parents/guardians, peers, and others in the school and local community" (Alberta Education, 2018a, p. 4); (ii) be "aware of and facilitate responses to the emotional and mental

health needs of students”; and (iii) “establish, promote, and sustain inclusive learning environments where . . . every student is welcomed, cared for, respected and safe” (p. 6).

The Alberta Teachers’ Association (ATA) and the offices of the Canadian Mental Health Association (CMHA) have partnered to promote the mental health of children and youth, such as the “Healthy Minds Bright Futures” program and the “Creating a Compassionate Classroom” document (ATA, n.d.). Alberta Education (2018a; 2018b) has mandated teachers and leaders to establish inclusive learning environments and foster effective relationships, inclusive of care, empathy, and mental health (Alberta, Education, 2017; Edmonton Public Schools, n.d.; CMHA, n.d.). Most understanding and support in relation to health care reflects a Western-centric and medical/psychiatric orientation to mental health whereby other traditions and epistemologies have not been noticeably considered. David Grauwiler, executive director of the Alberta division of the CMHA, admits that the discussion of mental health in schools commonly shifts to “clinical interventions and the cohort of therapists, psychologists, and other helping professionals” (p. 20). While this type of work makes important contribution, “clinical supports and interventions” aid the “highest and most obvious needs” (Grauwiler, 2018, p. 20). The needs of many children and youth, with mental health problems who are not identified as vulnerable or in peril, will remain unmet and thus will not receive adequate support. Herein, two problems become apparent: 1) there is an emergent need to provide intercultural mental health perspectives, methods, and resources that work across cultures in school contexts; and, 2) many children and youth with mental health issues do not receive adequate support, which thereby impacts their learning.

## Research Design

Attentive to these local and global mental health realities and Western conceptions of healthy functioning that bias the design and implementation of mental health models (Unger, 2005; Unger et al., 2007; LeBlanc et al., 2005), a participatory poetic inquiry *Image, Body & Voice*,<sup>1</sup> was conducted in an inner city school with eight grade six “girls.”<sup>2</sup> Poetic inquiry, a dynamic way to approach knowledge generation, learning and sharing, serves here as “a call to action, agitation, and a frame for future social justice work” (Faulkner & Cloud, 2019, viii). It is uniquely suited to inquiry with youths’ voices because it privileges their lived experiences in relation to developing pedagogical practice. Poetry, a poetic basis of mind, creates space for dialogue about critical awareness, social justice, and a re-visioning of social, cultural, and political worlds. Seeking to learn from youth and so develop informed service and programs for pre- and in-service teachers, I was guided by the following research question: *In what*

*ways might “girls” experiences with art-integrated activities and body-centred techniques inform educators about pedagogical practice and mental health interventions?*

A healthcare practitioner with Inclusive Learning, a department within the local public school board, familiar with my ongoing research, reached out to an inner-city school principal regarding the high needs youth attending her school. The principal sought guidance, strategies, and tools for the wellbeing of a select group of students. Homeroom teachers had expressed concern over the readiness of the female students soon to transition to junior high school. The teachers and principal were interested in supports for the students’ social emotional learning and development. After conversation with the healthcare practitioner and principal, the study was designed and ethics sought. A few months later, the project was introduced during lunch hour to the grade six female students (22 in total, although not all present that day); however, only eight expressed interest and returned the parent/caregiver consent forms by the due date. Despite a small number of participants, there was diversity among them: vulnerable youth, girls, LGBTQ2+ persons, and persons with disabilities, as prioritized among the goals of *Canada’s Future Skills Centre*.

Familiar with relational and body-centred practices that supported mental health, methods were intentionally layered wherein a transdisciplinary praxis emerged. That is, several arts, contemplative, and somatic methods were introduced in variant sequences and contrasting durations, until the youths’ responses pointed to a “right way,” thus, becoming the guiding ritual for our meetings. For example, we began with sharing circles for a check-in, followed by body-centered techniques: breathing, grounding, visualizing, and movement (Rosenberg, et al., 1985; Rosenberg & Kitaen-Morse, 1996). These were integrated alongside practices inherent to integrated body psychodynamics: attunement, containment, boundaries, breath, and agency. The self-referred, creative 60-90-minute period of arts-integrated practices: imagining, drawing, colouring, painting, and play, was followed by a return to the group and then a check-out. The creative process focused on making life-size body maps. Body maps broadly defined are life-size body images, while body mapping is the process of creating body maps using collage, photography, painting, or other arts-integrated techniques to visually symbolize aspects of people’s lives, their bodies, and their worlds (Wienand, 2006; Devine, 2008; MacGregor, 2009; Gastaldo et al, 2012; Gastaldo et al, 2018). Of significance, body maps beckon a symbolic and poetic approach whereby their inclusion invites and validates imagination, sensation, and body awareness—that which enables engagement with sites of injury, even trauma, yet in a safe, playful way (Crawford, 2010; Haiman, 2013; van der Kolk, 2014; Orchard, 2017). Methods were infused with

knowledge and skill from my professional training in trauma studies and body psychotherapy, such as pendulation, resonance, somatic awareness, and somatic empathy (Levine, 2015, Stanley, 2015) as well as clinical training in analytical psychology—particularly active imagination and symbol amplification. Colourful life-size body maps emerged as the culminating research creation artifacts. In total, we met eight times, for 2.5 hours per meeting, over a period of five months. In order to support the healthy changes that unfolded through student participation, their homeroom teachers were invited to meet and discuss (three times during the data creation and collection period) their awareness of and attention to the body and the arts in teaching and learning. They also participated in pre- and post- questionnaires (ethics approved).

The study was undertaken within an animated worldview that includes images, intuition, imagination, feeling, the unconscious, transpersonal, transgenerational, transgender, the imaginal, and emergent dimensions (Fidyk, 2013). It calls forth practices, knowing, and values inherent to traditional and Indigenous peoples (Traditional Ecological Knowledge): ritual, ceremony, expressive movement (drumming, dancing, chanting), and community healing to name a few. The guiding ethics of an animated paradigm applied not only to conducting research but also to opening up relations within the school community and beyond. The values of respect, relationality, and relational accountability governed, reflecting interconnectedness, empathy, humility, and care—qualities inherent to a sense of belonging to a much larger cosmos—inspired (Wilson, 2008).

Axiological considerations must reflect the values of the paradigm wherein the study (and so living and teaching) unfolds. Meeting the institutional requirements: *University of Alberta* Research Ethics Board (REB) approval for human research, Cooperative Activities Program (CAP) approval for Edmonton's Public School Board (EPSB), which includes a police information check, and the Alberta Teachers' Association code of ethics are not sufficient. These formal requirements do not reflect the ethos of the group, the topic, or the ethics of an animated paradigm, hence respect, relationality, and attunement to the ways the participants responded were the critical guide. Permission was obtained to take photographs during the creative process and of the body maps. The body maps were digitally copied and the originals returned to the participants. As well as being a certified teacher, I am certified and registered in Integrative Body Psychotherapy, Inherited Family Trauma and Family Constellation, Jungian psychotherapy and Somatic Experiencing (in training, Advanced 1). While my interest was always pedagogic, my care and relations were additionally informed by psychological training.



## Research Discussion

At present, 10-20% of children and youth in Canada experience mental illness but only one in five receives mental health services (PHAC, n.d., p. 9). At higher risk for both depression and suicidal ideation are girls and young women. Aboriginal youth, who include First Nations people on or off reserve, Métis, and Inuit, die by suicide at a higher rate than settler peoples, including cluster suicide (Statistics Canada, 2012; Linklater, 2014; Gaywish & Mordoch, 2018). Trauma expert Bessel van der Kolk (2014) argues that trauma is the “greatest threat to our national well-being” (p. 348). Trauma is an epidemic—not only among the world’s low and middle-income countries but also throughout Canada at all socioeconomic levels. Indeed, the current climate has been called a worldwide “hidden epidemic” of trauma and fear—this naming occurred long before the Covid-19 pandemic and its far-reaching and complex implications (Lanius et al., 2010). While an increasing number of students have experienced traumatic events such as natural disasters; terror incidents; violence at home, in the streets, or war; displacement and exile, there too exists an increasing number of students caught by the suffering of trauma experienced via medical and dental trauma (sudden illness or injury, emergency or medical procedure), interpersonal trauma (betrayal, abandonment, and abuse: emotional, physical and sexual), and neglect. Evidence-based research links the effects of childhood interpersonal trauma on brain activity, self-awareness, and social functioning (van der Kolk & d’Andrea, 2010, p. 59), as well as the effects of early life stress upon disease in adulthood (Fisher & Gunnar, 2010, p. 133). The number of students exposed to these kinds of traumas has increased substantially in recent years. The effects of trauma manifest as distraction, lack of attention or focus, reluctance to trust, hyper-vigilance, startle response, poor memory, social isolation, and difficulty in social interaction (van der Kolk, 2014, Linklater, 2014, Levine, 2015, Stanley, 2016). The surprising yet paramount discovery in this research was the value of, even yearning for, depth of relationship that developed among the participants and with me. Because injury happens in relationship, healing happens there too. That is, emotional and social injury can be mended indirectly through consistent, safe, relational engagement.

When participants were asked during individual interviews what was their favourite aspect of the project, it was unanimous—check-ins/outs—conducted as ceremony at the beginning and end of each meeting. They said, “You listened”; “We got to say how we felt; how we were doing,” and “we heard about each other.” The second favourite aspect (six of eight participants) was the healthy snacks (strawberries, cheese, vegetables, and yoghurt cups) served and eaten during research creation and collection. When seeking clarification, I asked if it was the food selection, but I was sheepishly told, “No, it was you serving the snacks!” This response again highlights the

critical nature of relationships and the time and space necessary to cultivate them. I admit to being surprised that no participant named art supplies (vast amount and variety) or missing class. Sharing circles, ritual, and ceremony greatly aided the bonding that unfolded as these methods privileged each participant as well as the group. After a few meetings, when the participants entered the library (space which I had rearranged), they would run-walk to the circle formed with yoga mats. They respected the expectations to remove shoes and sit quietly upon the designated mats despite their excitement. The predictability of routine (with slight variation): mats arranged in different orders, varied breathing exercises, and new visualizations, for example, created a safe container, permitting trust and care to develop quickly among us. Soon the check-ins transformed from brief personal updates to sharing experiences or talking of issues that ran counter to their sense of fairness and justice such as double standards among siblings, and gender inequity within cultures. One participant grew very vocal and became a leader on these matters. One day I asked the principal about activism in the school, sharing briefly about the vocal activist. She was shocked when I mentioned whom because she saw the participant as a “shy, quiet student.” The homeroom teachers noticed and reported the eight participants were more confident and socially engaged with their peers during and outside of class time—transitioning more smoothly between activities/subjects and not as isolated or reliant on a few peers but friendlier with more and diverse classmates.

Relevant here was the inclusion of somatic methods that taught the participants how to emotionally self-regulate. When regulated, a person is more able to be themselves because an emotional reaction (hyper- or hypo-arousal) will not hijack them. In our sharing circles, the “girls” learned how to build and discharge energy via breathing techniques—giving them greater control over their bodies’ unconscious reactions—disregulation that can lead to fragmentation and or dissociation. The life-size body maps as research creation illustrated that the participants learned to externalize sensations and emotions in a safe way, aiding them in the development of skills needed for emotional self-regulation (See images in *Newsletter 1* p. 2—body map in progress at top and head at bottom left, p. 3—legs at upper right, and p. 4—full body at bottom right). Again, during the individual interviews, each reported using the new skills with benefit during exams, sports, and at times of boredom or anger. They too learned by way of the yoga mat—designated sacred space: boundaries are important and should not be violated. They loved this idea, respecting everyone’s mat as personal space—keeping them clean, and when not in use, neatly rolled and stowed away. When gifted the mats during the last meeting, I saw several walking through the hallways hours later with the purple rolls slung over their shoulders—possibly a symbol of pride in participation (see Fidyk 2019a, 2019b for more on the research conducted).

## Research Knowledge Mobilization

A multi-pronged approach to knowledge mobilization was enacted through academic, public, and practitioner sectors. Effort was taken to mobilize knowledge throughout the research process via research output in the forms of peer-reviewed publications and conference presentations, including keynotes, to various professional organizations and educator groups. Greater impact was sought by working closely with local teachers and health-care providers in schools through academic and non-academic community engagement: invited school presentations and professional development workshops, including invitational “special sessions” with teachers, Success Coaches, and other health-care providers in school contexts. This work with local teachers flagged another problem, which underlies the newsletter project: most feel unprepared to meet child and youth mental health needs. Further, many teachers feel overwhelmed by class enrollment, individual and behavioural needs, and a lack of valuable professional development targeting (in practical ways) student social-emotional wellbeing, trauma, and mental health—now compounded by the impact of COVID-19. Working with these teachers and other school-based professionals revealed an interest in and a desire to develop sustainable solutions for children and youth in public schools with health challenges as well as supports for teachers themselves.

In response, I organized a grass-roots initiative: *Community of Professional Practice: Supporting Social-Emotional Wellbeing of Students and Teachers* (COPP) inviting those who had directly expressed interest to me: local teachers, art therapists, counselors, teacher-counselors, social workers, and graduate students enrolled in my *Trauma, Memory & Body* curriculum graduate course (Summer 2018). They, in turn, invited colleagues/friends with similar interests, drawing more in-service teachers along with artists, activists, leaders, curriculum specialists, and Inclusive Education specialists. We, 25 in number, met triweekly September 2019–March 2020 (stopped by pandemic regulation) to collaborate, share resources, methods, and tools, and to engage in professional practice regarding the development of essential skills and skills development related to social-emotional wellbeing and mental health issues.

Funding from *Research Impact Canada*, *VP Research & Innovation University of Alberta* and *Kule Institute for Advanced Study* mobilized evidence-informed knowledge through two events: (i) professional community engagement with 50 invited pre-service teachers (EDSE) at a workshop hosted February 8, 2020, for the exchange of knowledge, skills, and resources in a context of partnership and reciprocity. COPP volunteers presented and assisted with the event. And, (ii) community and public

engagement via the hosting of a workshop the afternoon of February 18, 2020, for 35 in-service teachers, school staff, and parents/caregivers where the highlights of and methods from *Image, Body & Voice* were shared, with attention to emotional regulation, play, and self awareness. Both events offered experiential opportunities (personal body maps for example), a combination of approaches to support mental wellness, including culturally aware methods for diverse populations, intended for social inclusion and freedom from discrimination and violence.

## Research Implications

Because “trauma is about loss of connection”—to ourselves, to our bodies, to our families, to others, and to the world around us (Levine, 2005/2008, p. 9), pedagogy and school routines would benefit significantly from increased opportunities for: social engagement, meaningful involvement, group building activities, play (Fidyk, 2019c), and forms of joyful engagement (such as pets, window boxes, and gardens). This shift in practice can occur through sharing circles, rituals, and ceremonies as well as using role-play, rhythms, movement, and the arts (music, forum theatre, and drama) across curricula. Time for activities such as yoga, tai chi, drama, choir, dance, sports, martial arts, chanting, and drumming are vital because promoting social-emotional, mental, and spiritual wellbeing begins with the body. Body awareness underscores self-awareness. Pedagogy must link head, hand, and heart: connect assignments to personal sensations and emotions; integrate images by linking the symbolic, poetic, and imaginal domains with learning; invite imagination into all aspects of learning; permit movement: stand up, change seats, wiggle, even rock. Change the pace of teaching and learning; build in stops and pauses; slow down. Offer opportunities to feel satisfaction in everyday things like reading aloud, along with support through communal efforts and activities, which promote agency and community. Doing so provides an antidote to the isolating and withdrawing tendencies that are common among those who suffer from the effects of trauma, mental illness, and/or poor social-emotional skills. Addressing mental health necessitates fresh understanding alongside the development of relational and somatic skills and attitudes, which reshape the very way teaching and learning unfold. Without authentically integrated compassion and care as an embodied presence, an enduring response to mental health will not be possible (ATA, n.d.).

## Newsletter Project



As follow-up to the two community and public engagement events, *Trauma-Sensitive Pedagogy & Practice (TSPP) Newsletters* were created. These research creation artifacts aimed to provide key tools and info to support mental health in a user-friendly fashion. *Newsletter 1*, based on the workshop presentations, summarized pertinent knowledge and skills about emotional regulation as well as pedagogical practices that could be integrated across curricula and grade level. It was emailed to the pre-service teachers attendees who began their practicums the following week (February 2020). *TSPP Newsletter 2* (created and distributed April 2020), while highlighting the info and skills shared with teachers, leaders, and parents, considered: “What is needed now in education contexts to support social emotional wellbeing and mental health needs—with intercultural, inclusive, and intergender sensibility?” It focused on trauma as a loss of connection (Levine, 2015), emphasizing: “healing begins with self-awareness” (van der Kolk, 2014). While a research creation artifact, it spoke of soul weariness, art-making processes, engagement with nature, and offered specific activities in which teachers, families, and community members could immediately partake. These research creation artifacts reflect a whole-school approach that recognizes all aspects of the school community impact students’ mental health and wellbeing, and that learning and mental health are inextricably linked. The aim of these evidence-based research outcomes is to influence change in behaviour, attitude, and interpersonal understanding regarding wellness and trauma in schools.

### ***Trauma-Sensitive Pedagogy and Practice Newsletter 1***

*Community Engagement for Trauma-Sensitive Pedagogy & Practice* for pre-service teachers all-day workshop included five presentations by teacher researchers—graduate students who had taken trauma studies or analytical psychology graduate courses with me and regularly attended the COPP meetings. The event was organized intentionally to support comfort, safety, and optimal attention: breaks were scheduled between each presentation; nutrition and beverage were available throughout the day, self-engage activity centres were located away from the main group; presentations took place in a large sharing circle and were held consecutively so to build community. The event space was a large open area with flowers, art-supplies, sofas, armchairs, and natural light. Time was taken at the beginning and at regular intervals to engage in centring and grounding activities. Conversation was encouraged throughout. The presentations included: Mandy Krahn, *Art Therapy: Creative Expression Through Drawing upon Life Experiences & Imagination*; Alison Brooks-Starks, *Altaring & Being Altered: Natural Forms for Grounding*; Vessela Balinska-Ourdeva, *Attending to Transgenerational Trauma in the High School ELA Classroom*; Karen Jacobsen, *Supporting Students’ Self-Awareness Through “Felt Sense” & Mandalas*, and myself, *Image, Body*

*& Voice: Supporting Girls' Wellbeing*. The event was charged with curiosity and excitement and was deemed successful by on-going feedback during the day, and the experiences of the presenters and COPP volunteers (in particular Miranda Niebergall and Linda McFalls). Eight weeks later an assessment was emailed to participants along with certificates of participation and the *TSPP Newsletter 1*.

*TSPP Newsletter 1* was designed as a “take-away” for the pre-service teachers starting their practicums the following Tuesday. Many were nervous about the prevalent nature of mental health issues in school contexts and were worried about their own capacities to respond effectively, or rather, do no harm. The newsletter highlights one key aspect from each presentation through quotations and snapshots of terms such as felt sense and pastiching. The info was designed to be specific, focused, and easy to access, as I had imagined that the pre-service teachers might print a copy and keep it with them at school. I hoped it would serve as a vital resource. All images included were taken with permission during the workshop.

## ***Trauma-Sensitive Pedagogy and Practice Newsletter 2***

*Community & Public Engagement for Trauma-Sensitive Pedagogy & Practice* for in-service teachers, school staff, and parents hosted by principal Dr. Elizabeth Shen (a member of COPP) at Lynnwood School, included a brief overview of the research project, *Image, Body, & Voice*, with special attention to the methods used and insights garnered from the participants. The methods were modeled and practiced with those in attendance, including a personal body map (not life-size) with tracked sensation. Here, emphasis was placed on the adult's own capacity for autonomic nervous system regulation via stimulation of the vagus nerve as well as other regulating activities. Only when we access the parasympathetic nervous system can we enter into social engagement and continue to regulate. Too often, people do not have the self-awareness or skills to regulate their own hypo- and hyper-arousal and need to be taught how to shift their attention inward and how to build capacity. When tracking the inner world (body), it is important not to move too quickly and name emotions but rather to be curious and notice, then name sensations. The participants were highly engaged and asked many questions despite it being an early dismissal Wednesday during spring break.

When University and public school classes resumed the following week, I sent the Newsletter to the 25 members of the COPP and there was very positive feedback. Then reporting on COVID-19 accelerated and I became aware of collective fear among people at large. In particular, my after-degree undergraduate students (winter course)

were not coping well despite a very collegial class grouping and strong rapport. For the first class held remotely, I knew that a sense of “contact” would be essential so I scheduled a synchronous zoom meeting. I suggested that the 12 members offer a short check-in and then we discuss the assigned course readings. I was surprised by the degree to which everyone was struggling and we spent the entire 80 minutes checking-in—listening, attuning, and encouraging (via regulation). The following class was switched from asynchronous to synchronous zoom so to support their sense of safety and stability. As I watched and listened to the effects the pandemic was already having on many, I decided to hone in on the physiological aspects of dysregulation or over-, underwhelm and mental health needs in a second newsletter.

*TSPP Newsletter 2* while highlighting information and skills shared with the attending in-service teachers, school staff, and parents/caregivers, I focused on relevant and supportive quotations regarding soul weariness, art-making processes, and engaging with nature. I offered specific activities in which teachers, families, and community members could immediately partake. I deemed it critical to address trauma that arises via disaster, to emphasize play and imagination, and to provide multiple ways to stimulate the vagus nerve so to support autonomic nervous system regulation (Kharrazian Resource Center, 2019; Rosenberg, 2017). While schools were closed, I was in regular communication with my 10 and 13-year-old nephew and niece in rural Saskatchewan, and knew the ways that they were active and learning. I asked my sister to take photographs of their activities and used these images with permission in *Newsletter 2*. While the aesthetic appeal of the dark background of some photos and the grey sky in others was not favourable, I prioritized the validity and transferability of the activities and thus their relevance during the time of school closure and social distancing. These photographs capture a few days of their lives during COVID-19 and were shared as a way to encourage readers to get outside, pull out board games, learn a new hobby—socially engage while maintaining health recommendations. Central to supporting emotional and mental health needs, we would be well-served during the pandemic and as we return to increasingly social lives, if we developed specific skills: increase self-awareness of inner states; develop awareness of the ways the body reveals affective states and sensations; basic strategies for “listening” to the bodies of children, youth, and the elderly (and our own); develop competencies regarding social awareness, relationship skills, and responsible decision-making.

When an agri-business in Saskatchewan contacted my sister to acquire permission to share *Newsletter 2* with their employees, I realized that the 100 or so people whom had received one of the newsletters through participation in the events named was simply not enough outreach, I sought publication with *Art/Research*

*International*. Through the transdisciplinary readership of this journal and its open access, a wider audience can access these artifacts. It is my hope that these two research creation newsletters, while reflective of two knowledge mobilization events—and the initial participatory poetic inquiry with vulnerable youth—offer insight, practical advice, and some relief during this current crisis, while contributing to a whole school approach.



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## ENDNOTES

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<sup>2</sup> While identified by the school as “girls,” there were participants who did not want to be called “girls” and identified as “not-girl” and “not-boy” but “something else.” I use quotation marks to respect that choosing.