



INTERNATIONAL JOURNAL of ADVANCED SCHOLASTIC RESEARCH



ISSN:2635-313X

Volume 1, Issue 2, May 2015

website: www.worldresearchacademy.com.



COPING WITH TRAUMA AND BUILDING RESILIENCE AMONG PUPILS IN SCHOOLS IN NIGERIA.

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Abstract

This paper x-rays traumatic situation and building resilience among primary schools pupils in Nigeria. The pupils experience different forms of trauma, such as violence, death, abuse, and illness among other things. Experiencing trauma, especially at a young age, disrupts young people's ability to relate to others and manage emotions. It can overwhelm a child's ability to cope with and regulate their emotions effectively. Subsequently, students may experience and or show symptoms of mood swings, impulsivity, emotional irritability, anger and aggression, anxiety, depression and dissociation. On the other hand, resilience refers to the ability to cope and move forward in the aftermath of trauma. Resilience is the ability of a child to recover and show early and effective adaptation following a potentially traumatic event. It is the process and outcome of successfully adapting to difficult or challenging life experiences, especially through mental, emotional, and behavioral flexibility and adjustment to external and internal demands. This paper recommends that both the teachers and parents should assist the pupils to manage and cope with traumatic situation.

Keywords: Trauma, resilience, coping strategies

Introduction

Students enter the secondary school system having experienced different forms of trauma, such as violence, death, abuse, and illness. Children who are exposed to trauma run the risk of facing negative long-term effects that include mental illness, depression, and anxiety. Students' academic performance, school attendance, and overall intelligence are affected by exposure to trauma. Such experiences may cause students to live in fear and pain, and may also lead them to struggle in areas of learning and behaviour while in school.

What is Trauma?

According to US Department of Justice (2007), trauma is a painful emotional or physical experience that produces lasting psychic effects or disorders. Trauma is also defined as an internal injury especially to the brain, which may result to a behavioral disorder of organic origin. Wilson, (2013) defines trauma as an unpleasant emotional experience of such intensity that leaves a lasting impression on the mind. He further states that trauma is a psychological wound that never completely heals.

Trauma is when we experience very stressful, frightening or distressing events that are difficult to cope with or are out of our control. It could be one

incident, or an ongoing event that happens over a long period of time. Trauma is an emotional response to a distressing or disturbing event that overwhelms the individual's ability to cope (Saunders, & Adams,2014). Trauma is subjective – a traumatic experience for one person may not be traumatic for another, but that does not mean it is any less real for the person who is traumatized.

People of all ages experience trauma, but it has a particularly long-lasting impact on children as their brains are still rapidly developing. Often, children and adolescents don't have the necessary coping skills to manage the impact of stressful events on their own or the language to explain their feelings (or even what happened).

A traumatic event is a frightening, dangerous, or violent event that undermines a person's sense of safety in the world and creates a sense that catastrophe could strike at anytime.

Trauma is a very frightening or distressing event that may result in psychological harm. Trauma is a pervasive problem. It results from exposure to an incident or series of events that are emotionally disturbing or life-threatening with lasting adverse effects on the individual's functioning and mental, physical, social, emotional, and/or spiritual well-being (VanderWegen, 2013).



Experiences that may be traumatic include:

- Physical and emotional abuse
- Sexual assault
- Childhood neglect
- Parental loss in childhood
- Domestic abuse
- Motor accidents
- Earthquakes
- Living with a family member with mental health or substance use disorders
- Sudden, unexplained separation from a loved one
- Unexpected death of a loved one
- Poverty
- Addiction
- Racism, discrimination, and oppression
- Gun violence
- Violence in the community, war, or terrorism etc

The manifestation of trauma may differ based on cultural perspectives. For example, in some cultures people express their experiences of trauma more publicly and with their community whereas in others the expression is more individualistic and private. For instance in the western world, it's very easy to report cases of rape and sexual molestation as compared to countries like Nigeria where it is almost considered an abomination to speak about such.

Traumatic experiences often initiate strong emotions and physical reactions that can persist long after the event. However, immediately after a traumatic event, shock and denial are typical. Notably, a student does not need to have experienced a traumatic event directly. He/she may witness the event, see it through the media or may be told about it often with gruesome details. Traumatic events during one's childhood can impact negatively on a student's development throughout the rest of their life. Exposure to traumatic events can disrupt brain development and can have immediate and lifelong adverse effects on academic, social, emotional, and physical wellbeing of students.

Impact of traumatic experiences on students' academic performance

Prewitt, E. (2016) posited that traumatic experiences can impact on intellectual abilities by affecting cognitive functioning, learning and academic performance, emotional regulation and stress

response, as well as self-esteem and motivation. The capacity of traumatized children and young people to learn is significantly compromised. Their neurobiology is stressed. Their relationships can feel unstable. Their emotional state is in flux. They find it difficult to stay calm or regain a state of calm if they feel distressed or perturbed. Change is perceived as dangerous. Their memory is under pressure. They are disconnected from themselves and time. Their behaviour rules them. New experiences and new information carry with them elements of threat and uncertainty.

Perry,(2000) asserts that the traumatized brain activates the survival centers and deemphasizes the learning centers in these ways:

- Trauma can undermine many skills that are crucial for learning, including the development of language and communication skills, the ability to organize and remember new information and reading comprehension.
- Students coping with trauma may experience intrusive thoughts or flashbacks that prevent them from paying attention in class, studying, or focusing during timed assignments.
- School-related trauma (like bullying or unfair punishment) often leads to school avoidance, leaving the most vulnerable students behind academically.
- Trauma also negatively impacts young people's sense of self, making it difficult for those students to feel motivated, proud, and engaged in their learning. These children tend to have attention problems, lower cognitive functioning, behavioural problems, decrease in school attendance, grade repeats, and achievement problems, including lower reading achievement.

Signs exhibited by a traumatic student in a classroom

1. **Re-experiencing:** This is a situation whereby the traumatized student consistently thinks about the event to the point of nightmares or constant fear.
2. **Avoidance:** This is a conscious attempt to avoid interaction or thinking about the event. Individuals may exhibit this behavior



through frequent interruptions, speaking too much, experiencing intense anxiety, or making loud noises repeatedly. The nervous system becomes overactive when children (and adults) experience unwanted emotions or feelings.

3. **Continuously having negative perceptions or moods:** This manifests as low self-esteem, blame, loss of interest in formerly pleasurable activities, and poor memory. There is often an underlying feeling of hopelessness after a traumatic event.
4. **Heightened stimulation:** Often, a student who has experienced a traumatic event will be on edge and constantly looking for something terrible to happen. Due to a constantly heightened nervous system, they might complain of nausea or headaches.

Other signs to look out for among traumatized students include:

- Excessive anger or irritability
- Unusual startle reactions
- Significantly increased or reduced appetite
- Exhaustion
- Aggression (physical or verbal)
- Regular tardiness/absence from class
- Perfectionist or controlling behavior
- Difficulty concentrating
- Frequent headaches or stomachaches
- Low self-confidence
- Hoarding (snacks, school supplies)
- Risky behavior (substance use, sex)
- Panic attacks
- Extreme self-reliance or hyper-independence
- Running away
- Defiance
- Alienation from peers (self-isolation or inability to relate/make friends)

Left unaddressed, the negative impacts of stress and trauma can disrupt a student's behavior, and emotional wellbeing, academic success and health. In both learning environments, students exposed to trauma may also exhibit truancy, repeated tardiness, decreased attention to personal hygiene and grooming, and behaviors they have not demonstrated before, such as unreasonable fears or repetitive speech and behavior patterns.

Impact of traumatic experiences on students' socio-emotional development.

Socio-emotional development is a process through which students acquire the capacity to understand, experience and manage emotions and to develop meaningful relationships with others.

The impact of trauma on a student's socio-emotional development is evidenced both in child socialization and performance in school. Traumatic distress among children can manifest as emotional and behavioral disorders that are detrimental to achievement. Traumatized children tend to become fixated at the emotional and cognitive level at which they were traumatized, and they tend to use the same means to deal with contemporary stresses that they used at the stage of development at which the trauma first occurred (Openshaw, 2011).

Another major way child trauma stunts socio-emotional growth is by disrupting the development of secure attachments and trust. Secure attachments with caregivers are essential for a child's emotional well being and provide a foundation for healthy relationships later in life. However, trauma can disrupt the formation of these attachments leading to difficulties in trusting others consequently leading to emotional detachment, fear of intimacy, and challenges maintaining long-term relationships.

Traumatized children can develop disdain and/or distrust toward adults or anyone perceived to be associated with their traumatic experience which negatively affects interpersonal interactions with school personnel and authority figures (Cahill, 2012). For example a child who was traumatized by a step-mom may develop disdain towards all females generally.

Children may also model the antisocial behavior associated with the traumatizing condition or seek security through associating with deviant peers, which can negatively impact achievement (Cahill, 2012). For example a real life case of a male senior student molesting a junior male student in the hostel and after thorough probing, it was discovered that he was also molested as a junior student.

Experiencing trauma, especially at a young age, disrupts young people's ability to relate to others and manage emotions. It can overwhelm a child's ability



to cope with and regulate their emotions effectively. Subsequently, students may experience and or show symptoms of mood swings, impulsivity, emotional irritability, anger and aggression, anxiety, depression and dissociation.

Early trauma, particularly trauma at the hands of a caregiver, can markedly alter a child's perception of self, trust in others and perception of the world. Children who experience severe early trauma often develop a foreshortened sense of the future. They come to expect that life will be dangerous, that they may not survive, and as a result, they give up hope and expectations for themselves that reach into the future (Oehlberg, B., 2008).

Traumatized children lose themselves in the process of coping with ongoing threats to their survival. They also, cannot afford to trust, relax or fully explore their own feelings, ideas or interests. Young trauma victims often come to believe there is something inherently wrong with them, that they are at fault, unlovable, hateful, helpless and unworthy of protection and love. Such feelings lead to poor self-image, self-abandonment, and self-destructiveness. Ultimately, these feelings may create a victim state of body-mind-spirit that leaves the child-adult vulnerable to subsequent trauma and re-victimization (Moroz, 2005).

Furthermore, trauma can negatively impact on a child's self esteem and self worth. Traumatic experiences can lead to feelings of shame, guilt and worthlessness, which can significantly impact on a child's sense of self and confidence. Long-term trauma can lead to a negative self-image of themselves and struggle with feelings of inadequacy, leading to low-esteem and self destructive behaviours.

After experiencing trauma, children often view themselves and the world differently, because they lose their ability to make sense of their experiences (Kuban & Steele, 2011). Not only is their rational thinking altered, but their emotional brain is also affected. Symptoms of trauma include "posttraumatic stress disorder, anxiety problems, depressive symptoms, and dissociation" (Jaycox et al., 2009). Further effects of trauma include "school drop-out, violence perpetration, internalizing problems (i.e., posttraumatic stress disorder),

alcohol-related problems, and illicit drug use" (Zahradnik 2010)

What is Resilience?

Some children are more resilient than others and may not develop the symptoms of posttraumatic stress after a traumatic experience (Little et al., 2011). According to the American Psychological Association (APA), psychological resilience is defined as "the process and outcome of successfully adapting to difficult or challenging life experiences."

In the context of trauma, resiliency refers to the ability to cope and move forward in the aftermath of trauma. Resilience is the ability of a child to recover and show early and effective adaptation following a potentially traumatic event. Resilience is the process and outcome of successfully adapting to difficult or challenging life experiences, especially through mental, emotional, and behavioral flexibility and adjustment to external and internal demands." Resilience is defined as the ability to retain or recover normal levels of psychological functioning after facing traumatic experiences (Bonanno, 2004).

Factors that might build resilience in children after traumatic events

National Child Traumatic Stress Network Schools Committee (NCTSN) (2008) outlined some strategies that fosters resilience among traumatized students

- Support from parents, friends, family, school, and community: Children are dependent on others for their survival, and family, peers, schools, neighborhoods, and communities can provide resources that promote resilience. The quality of the systems and supports in a child's life can greatly assist children's resilient recovery. Feeling close to or having a sense of belonging with other family members, peers, and community members can help children cope with trauma.
- Feeling safe at home, school, and in the community: A strong, positive relationship with a primary caregiver who acts to ensure safety and protection after a traumatic event. A circle of family members who are committed to each other, share time together, resolve problems and conflicts effectively and efficiently, celebrate successes, hold



shared values and beliefs, practice meaningful rituals, and have predictable routines. A school that provides a positive social environment, works to foster and develop the child's cognitive skills, and promotes student safety and belonging through the support of school counselors, school social workers, school resource officers, teachers, and other school staff (e.g., bus drivers, cafeteria workers).

■ Possessing a sense of self-efficacy—a child's belief that he or she can be successful in different areas of life. Having a sense of meaning in one's life, which might include spiritual or cultural beliefs, connections with others, or goals and dreams.

■ Possessing talents or skills in certain areas (e.g., the arts, athletics, academics). Possessing a variety of adaptive and flexible coping skills that he or she can use in different situations. Challenging life circumstances or adversities, for example, living in poverty, racism, ongoing community violence, social isolation, or illness can undermine children's resilience.

■ A community that ensures access to quality essential services such as childcare, after-school programs, healthcare, and mental health services; has safe neighborhoods; provides green space, quality food sources, and healthy recreational activities; fosters a sense of community and connectedness; and has an equitable and diverse culture.

Strategies to Foster Resilience and Promote Mental Health

1. **Practice Mindfulness:** Mindfulness is being present now without judgment. It can help us manage our emotions and develop a more positive outlook. Mindfulness can be practiced in many ways, such as meditation, deep breathing, or yoga.
2. **Build a Support System:** A dedicated support system can help us manage stress and overcome challenges. This can include family, friends, or a therapist. Surrounding ourselves with positive and supportive people who can offer practical advice and emotional support is essential.
3. **Practice Self-Care:** Self-care involves

caring for physical, emotional, and mental well-being. It can include exercise, eating a healthy diet, getting enough sleep, or engaging in hobbies we enjoy. By prioritizing our self-care, we can build our resilience and maintain a sense of balance and perspective.

4. **Reframe Negative Thoughts:** Our thoughts can impact our emotions and behavior. Reframing negative thoughts into more positive ones can help us manage our emotions and develop a more positive outlook. By focusing on the positives, we can build our resilience and avoid becoming overwhelmed by stress and challenges.
5. **Learn from Failure:** Failure is a natural part of life but can be challenging. Developing resilience involves learning from failure and using it as an opportunity for growth and improvement. Reframing failure as a learning experience, we can build strength and use our setbacks as a springboard for personal growth and development.

Resilience is a powerful tool for managing stress and building emotional strength. By practicing mindfulness, building a support system, practicing self-care, reframing negative thoughts, and learning from failure, we can develop resilience and overcome life's challenges. Contact a professional for support if you struggle with mental health issues or stress. Remember, developing resilience takes time and practice but is a worthwhile investment in your mental health and well-being. We can maintain balance and perspective by prioritizing our resilience, even in adversity.

Conclusion and recommendations

The manifestation of trauma may differ based on cultural perspectives. For example, in some cultures people express their experiences of trauma more publicly and with their community whereas in others the expression is more individualistic and private. For instance in the western world, it's very easy to report cases of rape and sexual molestation as compared to countries like Nigeria where it is almost considered an abomination to speak about such things.

Traumatic experiences often initiate strong emotions and physical reactions that can persist long after the



event. However, immediately after a traumatic event, shock and denial are inevitable. However, resilience is a powerful tool for managing stress and building emotional strength. By practicing mindfulness, building a support system, practicing self-care, reframing negative thoughts, and learning from failure. This paper recommends that both the teachers and parents should assist the pupils to manage and cope with traumatic situation

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