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‘Someone you can run to’: teachers at the coalface of complex trauma

Susan Raymond[1] · **Lesley-Anne Ey**[1]

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Abstract
Recently, safeguarding children in early childhood has received widespread media coverage. This has shone a light on the critical work of early years teachers in supporting the learning, care and safety of young children. However, there has been limited exploration into what early years teachers actually do at the coalface to identify and support children with high levels of complex trauma. Drawing from a research project that examined early years teacher self-efficacy beliefs, this paper provides an analysis of the specific practices and beliefs of three early years teachers working in a complex, integrated early years site, in a disadvantaged community in Australia with a high number of children with complex trauma. Analysing segments of interview data collected over a 10-month period, findings revealed what the participants considered to be successful or challenging within their practice whilst working within a community shaped by complex trauma. This paper provides a hopeful account of the work of early years teachers and the role their teacher self-efficacy beliefs play in supporting children with complex trauma.

Keywords Complex trauma · Child safety · Early years teachers · Teacher self-efficacy · Practice

Introduction

Safeguarding children in early childhood has received recent widespread media coverage and prompted a much-needed conversation about regulatory powers and quality education in the early years. Young children bring their experiences of trauma with them into early education settings and early years teachers play an important role in safeguarding young children in their care. However, childhood trauma is a very broad concept. It can be defined as an event or series of adverse childhood

✉ Susan Raymond
Susie.raymond@unisa.edu.au

[1] Education Futures, University of South Australia, St Bernards Road, Magill, South Australia 5072, Australia

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experiences that are emotionally distressing (Spalletta et al., 2020; Vila-Badia et al., 2022). It can be a single traumatic experience, such as a natural disaster or death of a significant person, or a combination of traumatic experiences. These experiences may include multiple forms of child abuse and neglect, abandonment, displacement or war, parental divorce, bullying or being under institutional care. When there are multiple or cumulative experiences it is considered complex trauma (Spalletta et al., 2020; Vila-Badia et al., 2022). In Australia, over 2023–24, there were 42,100 substantiated cases of child abuse or neglect. Young children were the most vulnerable with approximately 13.6 per 1000 infants < 1 year old, 7.8 per 1000 children aged 1–4 years, and 7.2 per 1000 children aged 5–9 years maltreated (Australian Institute of Health & Welfare, 2025). Additionally, from July 2024 to June 2025, there were 23,494 children aged 0–12 years who arrived in Australia from war torn countries seeking migration via the humanitarian migration stream (Multicultural Youth Advocacy Network [MYAN], 2025). Thus, trauma in early childhood is ubiquitous and teachers in early education settings such as childcare, preschool, or junior primary school will likely encounter children who have experienced some sort of trauma (Ayling et al., 2020).

Exposure to childhood trauma has damaging and often long-term consequences (Bartlett & Smith, 2019; Dye, 2018; Vila-Badia et al., 2022). However, negative impacts from trauma can be lessened or prevented by the presence of a nurturing and protective adult such as an early years teacher or educator (Chelemedos, 2023; Kurian et al., 2023). By providing a safe and trauma-sensitive environment (Chelemedos, 2023; Kurian et al., 2023; Statman-Weil, 2015), early years teachers can play a positive role in children's wellbeing and break cycles of disadvantage (Arthur et al., 2020; Ebbeck & Waniganayake, 2017).

For teachers working with children and families with trauma, practice is multilayered and complex (Garrett, 2024; Parker & Hodgson, 2020). Teachers must engage with multiple strategies to support children with trauma. However, the types of practices early years teachers engage in, their challenges and successes in working with children with complex trauma, is relatively unknown (Southall, 2024). Whilst there are several writings on trauma-informed practice (see Martin et al., 2024; Newton et al., 2024), the complexity and diversity of children's trauma experiences, means a 'one size fits all' response does not work. Teachers, therefore, need to have positive beliefs about their capabilities "to support learning in various task and context specific cognitive, metacognitive, affective and social ways" (Wyatt, 2010, p. 603). These beliefs are known as teacher self-efficacy (TSE) beliefs. High TSE beliefs can improve job satisfaction and psychological wellbeing (Collie et al., 2012; Klassen et al., 2010), as well as act as a buffer in mediating the pressures that come with working with children with complex trauma.

This paper uses TSE as a lens to examine the practices of three early years teachers working in a complex, integrated early years site (children aged 3-6 years). The site was located in a disadvantaged community in Australia with several children experiencing complex trauma. Interview data from a larger multiple-case study project were analysed using the TSE lens along with a working definition of practice provided by Comber (2006). This definition identified teachers' practice as characterised by five types of work; interpretive, pedagogical, discursive, relational and

institutional. Using TSE and Comber's (2006) definition of practice enabled the analysis of the types of practices early years teachers engaged in, as well revealing their beliefs about their challenges and successes in working with children with complex trauma.

We begin the paper by providing a foundation for the conceptual framework, drawing on the body of literature from the field of trauma research. Next, we explore teachers' practice and how this is situated within Social Cognitive Theory (Bandura, 1997) and in turn TSE research. We then describe the origin of the research, which broadly explored the practice and TSE beliefs of early years teachers. The analysis of the interview data is presented to illustrate the types of trauma-informed practice the early years teachers engaged in, and their successes and challenges. The analysis provides a narrative account of the early years teachers' experiences and what they found to be successful or challenging in learning environments shaped by complex trauma. We argue that early years TSE beliefs in working with children and families with complex trauma is an important factor in creating a supportive learning environment to provide the contextual safeguarding (Firmin et al., 2023) needed to negate the negative effects of complex childhood trauma.

Complex trauma

Children living with complex trauma are at an increased risk of immediate and long-term physical and mental health, and social and financial problems. Complex trauma in childhood, particularly early childhood (Dunn et al., 2019), impacts a child's developing brain, neural circuits and biochemical neuroendocrine. Research conducted by Thain et al. (2024) identified 49 different long-term impacts of childhood complex trauma which affected individuals in various ways. These impacts included externalising and internalising behaviours, emotional dysregulation, developmental impacts, re-shaping biological and innate traits, relationship problems, poor sleeping patterns, and poor mental health (Thain et al., 2024). Similarly, Downey and Crummy (2022) found that complex childhood trauma resulted in low self-esteem, depression and anxiety. Survivors were found to abuse alcohol and drugs as a coping mechanism, while others denied the negative impact on their wellbeing, especially if it was inflicted by their parents.

Thus, children living with complex traumua are at increased risk of cognitive difficulties and poor executive functioning which, without intervention, can be life-long (Bartlett & Smith, 2019; Matte-Landry et al., 2023; Thain et al., 2024). Complex trauma affects a child's immune system, ability to regulate their stress responses and enhance their risk of developing psychiatric disorders (Agorastos, 2017; Meier et al., 2024; Nkrumah et al., 2024; Olff, et al., 2025). With poorer childhood mental health, anti-social and violent behaviours, and poor school attendance associated with complex trauma, there is higher prevalence of learning difficulties and academic challenges, which impacts educational attainment (Bartlett & Smith, 2019; Bellis et al., 2018).

In the absence of a nurturing and protective adult (Chelemedos, 2023; Collie et al., 2012; Kurian et al., 2023; Ryan et al., 2017), exposure to early and chronic

stress caused by complex trauma, negatively impacts the neural structures, connectivity and the functioning of the brain (Ryan et al., 2017). The continuous exposure to complex trauma places the child in a state of chronic stress, altering their sensory, social, cognitive, and endocrine systems which negatively affects development and learning (Ryan et al., 2017). The impact of complex trauma is diverse and is dependent upon the type, severity and duration of the trauma, as well as the characteristics of the child (e.g., child's age), family characteristics and social situation. Given the amount of time early years teachers spend with children on a day-to-day basis in early education contexts, their practice can have a powerful impact on mitigating the negative effect of complex trauma (Kurian et al., 2023; Statman-Weil, 2015).

Role of the teacher

Comber (2006) describes teachers' practice as involving several different types of work. Interpretive work encapsulates the analytical and diagnostic effort that is required in making decisions about children's learning and wellbeing. Central to this decision-making and in turn, pedagogy, is the teacher's knowledge of the child's community. Practice is, therefore, reflexive to engage with practical teaching approaches tailored to the individual child. Importantly, understanding how words affect the child, their parents/carers, and community (discursive work), underpins teachers' authentic and respectful interactions in building relationships. These practices are framed by the institution or the "routines, resources, physical facilities, and organisational practices" (Comber, 2006, p. 63).

Early years teachers working in complex sites in disadvantaged communities need social-emotional competence (Jennings & Greenberg, 2009). They require a sound understanding of their practice and must be attuned to trauma-induced behaviours and emotions (Nicholson et al., 2023). As part of a multi-tiered systems of support (MTSS) framework to respond to complex trauma, teachers are involved across all three tiers. Tier 1, universal trauma informed practice and support for all children; Tier 2, focused support for children at risk or showing early signs of complex trauma; and Tier 3, intensive tailored intervention for children with significant issues caused by complex trauma (Berger, 2019).

If children have access to a supportive environment, the plasticity of the brain in early childhood means some of the impacts from complex trauma can be reversed or minimised (Collie et al., 2012; Nicholson et al., 2023). Early years teachers, therefore, need to employ trauma-informed approaches within their practice that include modelling and reinforcing positive social, emotional, and communicative interactions (Nicholson et al., 2023). Flexibility and the ability to adapt the physical, social, and temporal aspects of the environment are important to enable agency and meet children's needs and lessen the risk of anxiety or trepidation (Nicholson et al., 2023). Thus, trauma-informed teachers provide safe, predictable and supportive learning environments which support the rewiring of the brain (Howard, 2020; Nicholson et al., 2023; Southall, 2024). They also build positive and trusting relationships with children and read and respond to children's relational cues to establish a sense of safety (Nicholson et al., 2023; Southall, 2024). Such practice

generates better educational, social, emotional, and behavioural outcomes for children (Berger, 2019).

However, not all strategies teachers employ to support children living with complex trauma will work for all children, all the time (Statman-Weil, 2015). Children's experiences, personalities and circumstances differ, and teachers need to tailor responses to meet the needs of each child. Working with children and families with complex trauma can, therefore, be physically and emotionally challenging and exhausting. Teachers who feel under-prepared in trauma informed practice report compassion fatigue, secondary traumatic stress and burnout (Berger et al., 2023; Daniel & Van Bergen, 2023; Oberg et al., 2023). Positive relationships with children and high TSE provide a protective barrier against burnout (Daniel & Van Bergen, 2023; Demerouti et al., 2001). High TSE for trauma-informed practice also plays an important role in teacher's decision-making in choosing courses of action (Zee & Koomen, 2016) when responding to children with complex trauma.

Teacher self efficacy

TSE extends the tenets of self-efficacy, a key component of Social Cognitive Theory (Bandura, 1997). TSE, or the beliefs teachers hold in relation to their capabilities, regulates teacher behaviour or practice, their thoughts, feelings and motivations (Bandura, 1997). The bi-directional relationship between these factors is represented by the Triadic Reciprocal Causation model (Bandura, 1997), adapted below to the teaching context (Fig. 1). The interdependent and richly contextualised nature of teachers' work within their teaching context, represented by the P-B, B-E and E-P connections are changeable, dynamic and interrelated (Bandura, 1997, 2001).

Whilst research on trauma-informed practice highlights the need for responsive and supportive adults (Bartlett & Smith, 2019; Nicholson et al., 2023), teachers need to believe they have the capability to support children with complex trauma. TSE is an expectancy belief i.e. a belief an individual holds as to whether they have the capability to carry out desired actions (Bandura, 1997). A TSE lens provides insight

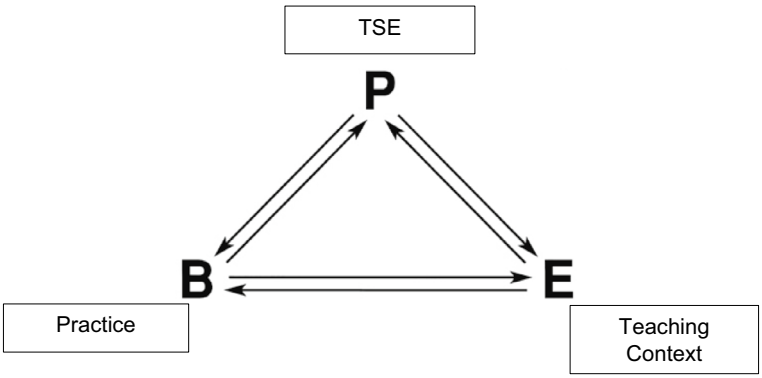

Fig. 1 Adaptation of the Triadic Reciprocal Causation Model (Bandura, 1997)

into the practices early years teachers enact to support children with complex trauma by considering their choices and the effort and motivation they apply to their practice (Zee & Koomen, 2020).

Limited research has been conducted on early years TSE beliefs for trauma-informed practice (Ayling et al., 2020). Generally, TSE studies with teachers of young children have found higher levels of TSE to be associated with the use of more developmentally appropriate pedagogies (Cobanoglu et al., 2019) and the use of more varied pedagogical approaches (Zee & Koomen, 2016). Teachers with high TSE tend to develop opportunities for children to engage in problem solving and emphasise more child-led inquiry (Glackin, 2016). Teachers with high TSE also persist in supporting children who find learning challenging and cater better for individual differences (Tschannen-Moran & Hoy, 2007). High TSE has also been consistently attributed to teacher wellbeing and job satisfaction (Zee & Koomen, 2016). Further research into early years TSE beliefs for trauma-informed practice is needed to understand the practices that may reduce the negative effects of complex trauma on young children.

The research context and process

This paper draws on interview data from a larger research project that investigated the influence of TSE on teachers' practice, in four early years sites in metropolitan South Australia. The study was conducted over a 10-month period with eight early years teachers. Data collection involved a series of three individual semi-structured interviews, completion of a TSE scale and video observation. The TSE scale and video were used as prompts within the interview process to explore the participants' thoughts and feelings as they reflected on their TSE beliefs (Civitillo et al., 2019; Hadfield & Haw, 2012).

Whilst the larger research project focused on the connection between TSE and practice more generally, one site within the research project provides the focus of this paper. Three teacher participants from this site; Kate, Ellen and Mary (pseudonyms), reported high levels of complex trauma amongst the cohort of children and families attending. The site was situated in a disadvantaged community with 41% of the parent population in the bottom quartile of socio-educational advantage (Australian Curriculum Assessment & Reporting Authority [ACARA], 2012). The site had a total of 243 children enrolled (20% identified as Indigenous). Three- and four-year-old children attended for a minimum of 15 h per week (sessional preschool), and five- and six-year-old children attended full-time, five days per week. Kate, Ellen and Mary's descriptions of their TSE for their practice in working with children with complex trauma were woven throughout their interview data.

The 12-item, Teachers' Sense of Efficacy Scale (short form) (TSES) (Tschannen-Moran & Hoy, 2001) was used to provide insight into the participants' TSE beliefs. The short form was chosen as it has the best construct validity (Chang & Engelhard, 2016) and has been widely adopted by the TSE field (Chang & Engelhard, 2016; George et al., 2018). The short form includes a total of 12 questions or items—four in each of the domains of instructional strategies, classroom management, and

student engagement, anchored on a 9-point Likert scale. The domains encompass a "broad range of teaching tasks and represent the richness of teachers' work lives and the requirements of good teaching" (Tschannen-Moran & Hoy, 2001, p. 801). However, the TSES was used for this research as a qualitative tool to explore the participants' reasoning behind their self-assessment of their TSE. Questioning specifically sought to address the relationship between the participants' TSE and the interpretive, pedagogical, discursive, relational and institutional work of the early years teachers, reflected in Comber's (2006) definition of practice and Wyatt's (2010) definition of TSE. The short form enabled the participants to complete the scale within the timeframe of the interview. The participants were asked to think-aloud whilst they filled out the scale and at the conclusion, discuss their own interpretations of their TSE beliefs. Capturing this qualitative data was significant in providing greater understanding of the participants' TSE beliefs (Wheatley, 2005; Wyatt, 2012, 2014). The scale was included as the final phase of the research process to increase the trustworthiness of the data, reducing the influence of social desirability in the participants' responses to the items.

Following the completion of the TSES, descriptors using the Likert scale scores: low (1&2), low-moderate (3&4), moderate (5&6), moderate-high (7&8) and high (8&9) were utilised to ascertain their self-reported TSE. Kate, Ellen and Mary converged into two general TSE categories across the descriptor range of: moderate-high; and high. Kate, an early career teacher of one year and Mary, a late career teacher of 30 years and leader for the site, scored high on all three domains, whilst Ellen, a mid-career teacher of seven years, scored moderate-high across the three domains. The participants' scoring of the TSES did not illustrate a significant difference between the three domains and so appeared to represent a general sense of TSE (Gibson & Dembo, 1984) and could thus be described as having generally moderate to high TSE for instructional strategies, classroom management and student engagement.

To add greater specificity, analysis for this paper involved the detailed examination of the participants' TSE beliefs for working with children with complex trauma in relation to Comber's (2006) conceptualisation of practice through five types of work: interpretive, pedagogical, discursive, relational and institutional work. Our guiding questions were*: What practices did the early years teachers implement when working with young children with complex trauma in early years educational environments?* and *What aspects of their practice did they consider successful or challenging?*

Data analysis took place throughout the data collection process, using inductive and deductive approaches with theoretically driven coding (King, 2004). Table 1. provides examples of the inductive and deductive analysis in relation to themes, codes, and sub codes.

From the data analysis, emerging insights informed the interviews to inductively derive meaning from the data (Merriam and Grenier, 2019). Analysis involved the annotation of interview and field notes and the researcher's use of a reflexive diary to keep track of thoughts and speculations about the data (Merriam and Grenier, 2019; Smith & Eatough, 2007). Following the conclusion of the research process, a

Table 1 Example of deductive and inductive analysis

Question	Theme	Code	Sub-code	Deductive example	Inductive example
Where did their belief about their self-efficacy for trauma informed practice come from?	Developing Self-efficacy	Relationship to Practice	Mastery experience	*I think that's come from childcare… It's come from working with babies*	
Why is play important for learning and development? Did you come with that belief, or did that develop?	Developing Self-efficacy	Relationship to Practice	Beliefs	*I did come with that because as a child I spent so much time out playing, and I can remember how enjoyable it was, and how satisfying it was, and being out doing things, creating things*	
Why is play important for learning and development? Did you come with that belief, or did that develop?	Developing Self-efficacy	Relationship to Practice	Physiological	Cont… from above quote… *.That was an unbelievable feeling and I know that I learnt so much through that*	
How do you assist families in helping their children?	Working with families	Challenges	Mastery Experience		*I've been in the Early Years for a very long time. At the moment, I'm having a few issues communicating with families that don't speak English. I'm finding it a bit tricky. Trying to communicate. That's a challenge*

Table 1 (continued)

Question	Theme	Code	Sub-code	Deductive example	Inductive example
How do you assist families in helping their children?	Working with families	Challenges	Managing Feedback		*In parent/teacher interviews, you know, feedback from your parents; the good stuff is great. Quiet often you don't get that and it's the negative stuff that comes back. I'm very sensitive to things and then it worries me*
How do you assist families in helping their children?	Working with families	Challenges	Justifying Practice		*I think it starts with the parents. If they're not invested in it [play], or if they can't see the beneits, it makes it really hard. So you have to really explain what you're doing because it's expected that you know*

more in-depth, systematic and methodical analysis of the individual cases occurred in the following stages:

(1) *several close and detailed readings of the data:* Analysis began with the careful re-reading of the interview transcripts and pre-coding occurred and involved highlighting significant words and quotes in relation to practices involving working with children with complex trauma (Creswell, 2007; Hennink et al., 2011). Initial thoughts and comments were recorded as memos on each transcript, so that points of significance could be returned to at a later stage in the analysis process (Smith & Eatough, 2007; Storey, 2007). This stage of the analysis was akin to a free textual analysis (Smith & Eatough, 2007).

(2) *identification of initial themes, organised into clusters and checked against the data:* The ideas and notions that emerged from stage one was interrogated using TSE and Comber's definition of practice. Analysis focused on statements that the participants made about their TSE beliefs and their practice for working with children with complex trauma. Topic codes were utilised to consider similarities and differences across the three teachers (Creswell, 2007), to develop heuristic and interpretable meanings from the data (Lincoln & Guba, 1985). Topic codes enabled interpretations relevant to the research questions to emerge and for greater transparency of the analytic process (Storey, 2007).

(3) *refinement, reduction and examination of themes to establish connections:* The themes that arose out of stage two analysis were numerous and, to further reduce the data, initial themes were clustered to identify the connections between the most important themes in the transcript (Smith & Eatough, 2007). Evidence to support the research questions was sought from the data until a point of saturation and no further information or evidence was found (Merriam and Grenier, 2019). Analytic coding using the literature required codes to be re-visited to develop emergent themes (Merriam and Grenier, 2019) and were iterative to provide evidence of the teachers' practice (Merriam and Grenier, 2019). Superordinate themes were a record of the researcher's own interpretations of the data, and every effort was made to ensure the integrity of the participants' account of their own experiences by including their direct quotes or voice as illustrative evidence of the theme.

(4) *the production of a narrative of the participants' perceptions of their experiences as interpreted by the researcher* (Smith & Eatough, 2007; Smith & Osborn, 2004): Analysis continued as the findings were written using code weaving (Saldana, 2009), whereby a narrative was created to converge the codes and themes in determining the key findings. A descriptive narrative of the researcher's interpretations, utilising the participant's voice as evidence of the superordinate themes was created, followed by a return to the literature to ensure the data were interrogated critically and the findings could be considered trustworthy.

To ensure the trustworthiness of the data, triangulation was used throughout the research process to ensure that the research methods and analytic process remained coherent with the research questions (Glackin & Hohenstein, 2018; Howell Major & Savin-Baden, 2010). Member checking was used significantly to ensure understandings were developed from the participant's perspective (Merriam and Grenier, 2019). The researcher was also an experienced early years teacher and was therefore considered a partial insider (Chavez, 2008; Kee et al., 2001). Through this

positioning, the researcher was able to quickly gain the participants' trust, enabling rich understandings of their TSE beliefs and practice to be developed (Kee et al., 2001). The partial insider positioning also provided an informed interpretation of the complexities that early years teachers face within their contexts, local community context and broader educational context.

Findings and discussion

The findings and discussion section analyses what practices Kate, Ellen and Mary implemented as they worked with and supported children with complex trauma. Given that little is known about the work of early years teachers in working with children with complex trauma (Southall, 2024), we have organised the findings and discussion into themes that aligned to what the participants considered to be successful or challenging within their practice, beginning with their successes. Through the teacher's voices, Kate, Ellen and Mary detail the specific practices they engaged in, ranging from universal, focused and tailored practices (Berger, 2019).

It's not me that's doing the learning.

> *It's not me that's doing the learning, it's them, so I want to make it the best that I can for them.* (Ellen)

The early years teachers were cognisant of their role in ensuring children were at the forefront of their practice. The United Nations Convention (UN Convention) on the Rights of the Child (UNICEF, 1989) and the image of the child as competent and capable (Edwards et al., 1998) were deeply embedded within the teachers' interpretive, pedagogical, institutional, discursive and relational practice (Comber, 2006). Kate, Ellen and Mary upheld the UN Convention through their belief that every child has the right to be heard and a commitment to protecting the dignity of every child. As such Kate, Ellen and Mary empowered children to foster a sense of safety and control. Prioritising the child provided a rich tapestry to their practice and like a tapestry, the combination of threads made a unique context for children to thrive. The teachers' moderate-high TSE beliefs for their practice ensured that they encouraged children's agency (Nicholson et al., 2023) and considered each child's funds of knowledge (Moll et al., 2005) as an opportunity to build on what the children knew and valued in their own lives. The teachers supported children's agency through attention to their voices, which Ellen explained as fundamental interpretive work:

> *They have a voice and that's sometimes forgotten. They're only little, but they have a voice, and they know what they like and what they don't like. They come with a whole bag full of knowledge before they even start.* (Ellen)

An asset-based approach, working from children's strengths (Hattam & Rigney, 2023), was an important factor in the success of the teachers' practice. They viewed their interpretive work as connecting with children's life-worlds, and their high TSE for student engagement ensured experiences aligned to children's interests and were

co-created with the child (Fleer, 2022). Adapting the physical, social, and temporal aspects of the environment to enable agency and meet children's needs (Nicholson et al., 2023) was important to these teachers. They maintained an unwavering belief in working alongside the child as a *co-learner*:

> *My role is to set the environment, to set the scene, to be a supportive person when needed…to provide explicit teaching, to ask questions, to wonder, to travel along on the journey with them. It's got to be open-ended, and it's got to be flexible so that they can come up with their own theories.* (Kate)

However, complex trauma was constantly there in the background, like a radio that could not be switched off. Sometimes it was louder and other times quieter. The teachers described their knowledge of children experiencing domestic violence, poverty, food scarcity, anxiety, stress, police intervention and children who found themselves under the Guardianship of the Minister (foster care). These experiences were also in combination with individual characteristics such as learning difficulties, auditory processing and Autism diagnoses, and a mix of languages and cultures, including a high percentage of Aboriginal children (20%). Whilst ever-present, the complex trauma experienced by the children and their families,[1] was placed in the background as they prioritised the relational aspects of their practice to provide a safe environment for children and families, which was akin to more tailored interventions (Berger, 2019). Mary described her belief in her ability to be respectful in her interactions with children and families:

> *I work hard at being friendly and non-judgemental and welcoming to everybody. I'd have to say that's probably the key...With the kids it's getting down at their level and listening to them…Building relationships with parents, it's that listening to them and trying not to be judgemental about things. Being open I suppose, listening to what they have to say.* (Mary)

The development of reciprocal positive and trusting relationships with children and their families was prevalent (Bartlett & Smith, 2019; Howard, 2020; Southall, 2024). The teachers interpreted and responded to children's cues, prioritised inclusivity, and modelled and reinforced positive interactions to develop a trusting and safe environment (Bartlett & Smith, 2019; Howard, 2020; Nicholson et al., 2023; Southall, 2024). The teachers' moderate-high TSE reported on the TSES was important in shaping their positive classroom management and student engagement practices, particularly when more tailored interventions were required.

The focus on relationship building and responsive practice by attuned adults within this early learning environment communicated safety and calm, predictability, and child agency. This eased stress, reduced trauma reminders and supported children to cope and build resilience (Nicholson et al., 2023), offsetting the impact of their complex trauma (Collie et al., 2012; Nicholson et al., 2023). Kate was clear in her articulation of the importance of trauma- informed practice, explaining that

[1] The term family has been used to encompass all adults caring for children in the home environment, to be inclusive of children under the Guardianship of the Minister.

"*certain parts of the brain are developing*" and children who experience complex trauma are "*on the back foot*" and teachers need "*a really good knowledge of child development and of children and their needs*". The application of trauma-informed practices evident in the teachers' interactions and communication with children, demonstrated child-centred (Fleer, 2022), and strengths-based practices (Nicholson et al., 2023), in alignment with moderate-high TSE for instructional practices reported on the TSES.

A pedagogy of listening (Rigney & Kelly, 2023) enabled teachers to reinforce a sense of safety, calm, and agency to foster the rewiring of the brain effected by complex trauma (Howard, 2020; Nicholson et al., 2023; Southall, 2024; Statman-Weil, 2015):

> *It's that whole thing of listening and understanding where kids are coming from – what they've already got and then what they're interested in. But mostly what they already know and what they're experts at and what might inspire them.* (Mary)

The teachers engaged in practices that prioritised children's wellbeing and learning, taking the time to get to know the child and their family. They were curious about the child's interests and engaged with their families in respectful ways (Bartlett & Smith, 2019; Howard, 2020; Southall, 2024). They listened and observed carefully, noticing the needs, interests and capabilities of the child and built positive and trusting relationships (Southall, 2024), providing a welcoming, responsive, and supportive environment (Bartlett & Smith, 2019).

It could all go to hell in a handbasket.

> *I have learnt to give away a lot of that control, but you never know when it's all going to go to hell in a handbasket, and it does sometimes.* (Mary)

The teachers had high TSE for classroom management and through the discussion of their individual scoring of the TSES, the teachers described their beliefs about the contextual safeguarding the children needed (Firmin & Lloyd, 2023). The teachers ensured the environment was flexible to adapt to the children's needs (Collins et al., 2023) and continued to prioritise building trusting and safe relationships with the children. The teachers let go of control or re-defined what this meant, as Kate explained:

> *I don't think control is about yelling and setting firm rules – it is about having rules in place but not set by me. To me, control is about setting the right environment and being the right person, and having the right relationship, and that controls disruptive behaviour. If you cement a really, really strong, positive, supportive relationship, then in that way you are controlling that [disruptive behaviour].* (Kate)

Providing children with choice, agency and control reassured them that this environment was safe (Nicholson et al., 2023). By using a calm tone and being cognisant of their non-verbal communications, teachers provided an environment that avoided trauma triggers and nurtured self-regulation (Nicholson et al., 2023).

The site used play as their main pedagogical approach in alignment with the practices of the Early Years Learning Framework (Australian Government Department of Education [AGD], 2022). The children were free to move between inside and outside learning environments, following their own interests and directing their own learning. Having predictable, yet flexible, schedules reduced the likelihood of children becoming dysregulated (Nicholson et al., 2023). Importantly, play was used as an opportunity to build relationships, whilst acknowledging how children felt and their sensitivities in the moment. Kate explained:

> *The pedagogy is delivered in a really playful way. Children are free. They're not pushed to do more than what they're ready to do. They're choosing to move further along. I do think I encourage them. We talk about stretching our learning muscles.* (Kate)

The teachers also recognised that children came with different experiences and at times they needed to model and rehearse social, emotional and communicative interactions (Nicholson et al., 2023). Mary described co-playing as effective in supporting children to develop their relational skills:

> *Helping children to develop play skills – the ones who don't know how to get into a play situation, so getting in there and sort of co-playing. With one particular child, who we realised had no play skills and didn't get building with blocks or Lego or anything like that, somebody needed to sit down [with him] and build, because if he doesn't see it, he's not going to get it at all. And then eventually that transfers to being able to play with other children.* (Mary)

In more teacher directed moments, the teachers continued to empower children, handing over control, to facilitate learning. The teacher's TSE for instructional strategies was high (Ellen was moderate for questioning), and thus they confidently enabled children to take control of leading discussions, communicating their ideas and testing their theories. Ellen described the deliberate choice of the teachers to "*steer away*" from requiring children to "*sit in front of the teacher and listen*". Instead, the teachers remained responsive to children's cues (Bartlet & Smith, 2019) and let moments of interaction "*run their course*", to see where ideas might go. This pedagogical approach was important to the teachers, honouring the child as capable and competent (Edwards et al., 1998):

> *There's not one way to teach anything. Everything can be taught in a different way, and if you just provide more opportunities for learning to take place, then it will happen. We can do explicit teaching, definitely, and I believe in explicit teaching, but certainly we're not the end of it.* (Kate)

The teachers' high TSE for managing the classroom environment and instructional strategies enabled them to let go of control with the possibility that "*it could go to hell in a handbasket*". The teachers drew on multiple strategies to remain "in tune" with the children's social and emotional cues (Nicholson et al., 2023). They negotiated rules, used judgement as to whether to intervene in play or relational interactions and supported children to self-regulate. It was also understood by the

teachers that strategies that work with one child on a particular day, may not work with another child or on another day (Statman-Weil, 2015). Ellen explained:

> *I've got fiddle toys, I've got three of my boys who have a pillow friend, and that helps them with their listening and their concentration. But then that doesn't always work for them. So, I have to have other things in the back of my head. It just depends on the day really and the child as well. What works for them.* (Ellen)

Carving out a space or providing sensory toys established a safe-zone for children to help them build their coping strategies (Nicholson et al., 2023).

Mary, Kate and Ellen provided a safe environment where there was an acceptance that things may not go right all the time. Mary, as the educational leader also made the environment safe for Kate and Ellen, giving them permission to try innovative approaches and strategies and to just "*throw it out there and see where it goes*". The teachers were, therefore enabled to engage in child-centred approaches that were highly relational and based on the teacher's knowledge of the child and their family. Under Mary's leadership, the teachers were able to ensure that the children's voice in all matters that concerned them (UNICEF, 1989) remained central to all aspects of their practice.

Someone you can run to.

I am absolutely someone they can run to. (Mary).

The early years teachers were well attuned to the children and the complex trauma that the children bought with them into the context. When the volume on the radio was loud, the teachers understood that they needed to be the person the child could "*run to*". Kate described this as being the child's "*secure base*", predictable, dependable and safe. Trauma-informed practice moved beyond just being child-centred, to employing strategies that were specific to children presenting with complex trauma. In other words, the teachers understood when to move beyond general care practices and when more tailored interventions were necessary (Berger, 2019). Kate explained:

> *Whatever happened that was terrible in their home life the week before, it usually just gets worse, and worse, and worse, and then goes back to being okay– it's changing all the time. So, you do need to have this incredible bank of strategies to bring out.* (Kate)

Strategies included ensuring that discursive interactions were calm and respectful, rubbing children's backs, ignoring trauma-induced behaviour, scaffolding relational interactions, sitting with children as they worked through emotions, and providing fiddle toys etc. The strategies were very much dependent on the characteristics of the individual child and their needs (Collie et al., 2012; Ryan et al., 2017).

During the interview with Mary while reviewing her video observation, Mary noticed and supported a child through a period of emotional de-regulation. The child had been building with large wooden blocks and had created an elaborate structure. In an instant, the child moved from regulation to de-regulation, throwing blocks and

destroying his own creation and that of everyone around him. It was an intense rage which Mary explained:

> *it's touch and go with [child], he's having a bad life at the moment. His life is out of control – and he gets hurt and I think it's to be expected that those irrational sorts of things are going to happen. I felt as much as I could do was just preserve his dignity with respect and everything. I was very aware that he probably still needed something to eat.* (Mary)

Recognising that all behaviour is a form of communication (Nicholson et al., 2023), Mary's relational practice enabled her to make adjustments to support the emotional and physical needs of the child. Before engaging with the child's behaviour, she helped him make some food and organise himself a drink in the kitchen. This provided the child with time to self-regulate and a moment for Mary to provide a supportive environment for him to feel accepted and sense of belonging (Howard, 2020). Through an enabling process, Mary then supported the child to re-connect with his peers, apologise and move on, modelling and guiding pro-social behaviour (Nicholson et al., 2023).

The teachers worked collaboratively to support one another to manage incidents like Mary's. However, the institutional practices required to provide the contextual safeguarding (Firmin & Lloyd, 2023) were more broadly supported by the leadership at the school adjoining the early education setting. Extra resources, additional staffing and flexible working conditions were all supported by the school's leadership. The teachers felt the school principal understood the importance of their work:

> *He's [principal] very much about wellbeing and a holistic approach to education. He can see how important the early years are, and he's really invested in it.* (Kate)

Through valuing the teacher's voice and their practices, leaders can increase TSE (Gonzalez et al., 2017). The practice of the leaders within the site – Mary and the school principal, were critical in enabling the TSE beliefs for trauma-informed practice. Importantly, borders were crossed between the school and early education context to support children to transition between settings. Transitions can be a sensitive and triggering experience for young children with complex trauma as "moving from the known to the unknown can cause an internal feeling of anxiety and loss of control" (Nicholson et al., 2023, p. 91). Border crossing included opening the school playground for the children in the early education context, creating fun and engaging "electives" the children could opt-in one afternoon a week within the school context, and sharing facilities such as the library and canteen.

The teachers worked across all tiers of the MTSS framework with their trauma-informed interventions (Berger, 2019). At the Tier 1 level, all teachers provided a safe, welcoming, responsive and supportive environment. They worked hard at building non-judgemental, trusting and secure relationships with children and their families. At the Tier 2 level, teachers were aware of the children and families at risk of complex trauma. They created environments that were calm, conducive to children's learning and supported child agency. They were also conscious of avoiding

trauma triggers and supported children to move from the known to the unknown. They drew on play to support the development of relational skills and self-regulation to address early impacts of complex trauma. At the Tier 3 level, they were attuned to the child's situation, understood their needs and acted as a secure based for the child. Recognising that behaviour is a form of communication, teachers tailored support strategies to accommodate each child. They understood that strategies that may have worked yesterday, may not work today (Statman-Weil, 2015) and had a bank of strategies. They often supported the child to work through their emotions and guided prosocial behaviour while preserving the child's dignity.

The challenges of the balancing act.

Whilst Kate and Mary had high TSE and Ellen, moderate-high, and described confidently their beliefs for their practice in working with children with complex trauma, they also reported challenges. Notably, the interpretive practice of following children's interests was a challenge. Mary expressed concern that only following children's interests could result in "*skimming*" across the surface of learning and potentially not engaging with topics such as "*Indigenous Australians, and sustainability*".

The balance of taking a more emergent approach to planning (Leggett, 2025) with curriculum requirements was difficult to navigate. Despite having supportive leadership, the academic push-down was a challenge for the teachers' practice. Kate was concerned that "*children are not ready*", a concern echoed by Ellen:

> *If they're not interested in it then they're not going to want to do it. So, forcing something on them is just not be good for them. I think when they're ready then they'll want to do it.* (Ellen)

Barblett et al. (2016) describe the proliferation of the 'schoolification' of the early years, where expectations for young children's learning resemble more school-based expectations. Learning is "messy", but in contexts where complex trauma is ever-present, pedagogical approaches must be more responsive, flexible and adaptable to meet the needs of the child (Bartlett & Smith, 2019). Institutional practices such as timetabling, allocation of support staff and operational practices such as the sounding of bells and assemblies, were also challenging for the early years teachers. Mary described these as the "*sacred cows*" of schools and actively pushed back against these practices to make them more suited to the complex environment of the early education context.

Class size was also an ongoing challenge to the relational practice of the early years teachers:

> *A lot of them [children] come and talk to me, and it's really hard to engage with one person one-on-one. I do find that in my day, that I'm just constantly bombarded with children coming over.* (Kate)

The feeling of being "*bombarded*" by the children was also reflected in Mary's description of "*going mad*". For Ellen, feeling bombarded or overwhelmed, manifested itself as "*frustration*". Ellen was conscious of the need to remain "*calm*" and

knew frustration was of no help to her or the children, however, the continued effort required to work with children and families with complex trauma, was significant.

Despite the system level challenges faced by teachers such as academic push-down, class sizes, timetabling, assemblies, and lack of human resources, the three early years teachers prided themselves on being able to provide a safe environment where children and families felt acknowledged and a sense of belonging (Bartlett & Smith, 2019; Howard, 2020; Southall, 2024). However, at times parents were not available or were perceived as using the teachers as "*slave labour*". Nonetheless, the early years teachers engaged in educative processes to support families. Ellen's belief in supporting the child through the family was pertinent:

> *It starts with the parents…If they're not invested, or if they can't see the benefits, then it makes it really hard, so you have to really explain what you're doing and why.* (Ellen)

At the coalface, the early years teachers worked with the child and their family. They withheld judgement and understood the child's lived experience as "*hard*". Their role was defined by what they believed their role not to be, as Kate explained:

> *It's not my place to comment on what their parents are or are not doing, because the child is not in control of that. That's their [parent's] decision. The last thing I would want is for them to feel shamed because of the way that they've been raised and the culture of their home.* (Kate)

Teaching in settings with complex trauma involves high emotional labour and contains ethical complexity. The pressure to remain calm and keep trying to work with children and their families when system challenges are against them, places teachers at risk of 'moral injury'; a concept characterised by the psychological distress experienced by teachers who are pressured to ignore their core values and professional beliefs due to systemic and institutional constraints (Oberg, 2025). In this case, teachers often had to suppress concerns about student welfare. The early years teachers made sure children were fed, had the opportunity to rest and play and importantly, felt safe. Whilst their TSE did provide them with a buffer, the emotional demands of the job were high, even for the most dedicated. Without system support, training, and better resourcing, teachers are at risk of burnout, moral injury, and compassion fatigue (Oberg, 2025).

This paper has discussed the role high TSE has played in the trauma informed practice of three early years teachers. It has outlined a range of pedagogical practices these teachers used to support young children living with complex trauma, including identifying the need to have a bank of flexible and adaptable strategies to draw on while understanding that what might work one day may not work the next. The teachers identified 'relationships' as the most successful component for working with children living with complex trauma and discussed the challenges in navigating system challenges such as academic pushdown, class sizes, timetabling, assemblies, and the lack of human resources. For these teachers high TSE appeared to support their practice.

Limitations.

Whilst this research presented findings from a small number of teachers, it showcased an atypical, trauma-informed early education environment that can be used as an exemplar for other early education settings with high cases of complex trauma. However, it is acknowledged that a larger number of teacher participants across more sites, would add to the richness of the data set.

In addition, the use of the TSES, which is designed for primary and secondary school teachers, required some translation of terms to fit the early education context. Whilst the domains—student engagement, classroom management, and instructional strategies, provided some indication of the participants' TSE, these domains were not enough to understand their TSE beliefs in working with children with complex trauma. Coupling the qualitative interview data was important to enable the researchers to understand the participant's reasoning behind their scoring. The overlaying of Comber's (2006) definition of practice also enabled a more in-depth analysis of what practices the teachers engaged in when working with young children with complex trauma and the aspects of their practice they deemed successful or challenging. Further research is needed regarding early years teachers' practice at the coalface when working with children with complex trauma (Southall, 2024). Studies regarding the potential of high TSE for practices that benefit children with complex trauma would add to the TSE and the complex trauma research fields (Ayling et al., 2020).

Conclusion

Kate, Ellen and Mary are three early years teachers whose practice exemplifies the work that many early years teachers are doing to prioritise children's wellbeing and safety and mitigate the effects of complex trauma that children bring with them into early education settings. Their work provides a positive narrative and acts as an exemplar for supporting young children living with complex trauma.

From examining the practice of these early years teachers, the following are recommendations that could support the safeguarding of young children in early education:

- Mandatory professional learning that supports TSE for trauma informed practice is included in pre-service teaching curricular and ongoing training for all in-service teachers and educators;
- Greater human resourcing (increased number of early childhood educators and support officers, and multidisciplinary support such as counsellors and psychologists);
- Smaller group sizes in early education settings with high levels of complex trauma;
- Education settings are funded adequately to address all children's needs and lessen inequality;
- Pedagogical approaches are responsive, flexible and adaptable to meet children's needs;

- Child wellbeing is prioritised including involvement with coordinated therapeutic responses to child and family complex trauma;
- Teachers are supported and their wellbeing is recognised and addressed; and
- Behaviour policies are strengths-based.

Kate, Ellen and Mary's beliefs about what works permeated their interviews. They were clear that a child-centred, trauma-informed approach was central to their practice. This approach ensured that all decisions, whether pedagogical, relational, discursive or interpretive, were made with the needs and interests of the children in mind. The teachers were willing to let go of control, to engage authentically with children and act as co-learners alongside the child reflecting understanding that working with children with complex trauma required responsiveness and flexibility.

Being in-tune with children and their families presented some challenges. These included the complexity in following children's interests, while trying to navigate the increased pressure of the 'schoolification' of early years education, large group sizes, school operational challenges, and the relational work involved in working closely with children and families. Kate, Ellen and Mary's high TSE did, however, provide a buffer against these challenges. They exercised their agency in pushing back against practices that did not align with their core values about what was important in working with children and families with complex trauma. This paper provides a hopeful account of the work of early years teachers and the role their TSE beliefs played in supporting children with complex trauma.

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Susan Raymond is a Senior Lecturer in Early Childhood Education at the University of South Australia. Susan has over twenty years' experience in leadership and teaching in preschools, schools and university. Her research interests are in early years teacher self-efficacy beliefs, teachers' practice and initial teacher education.

Lesley-Anne Ey is a lecturer and researcher at the University of South Australia in Education Futures and The Australian Centre for Child Protection. For the past decade Lesley's research has explored child abuse and childhood adversity in education settings. She is highly regarded as an applied education researcher specialising in providing real-world solutions to prevent and respond to complex trauma.