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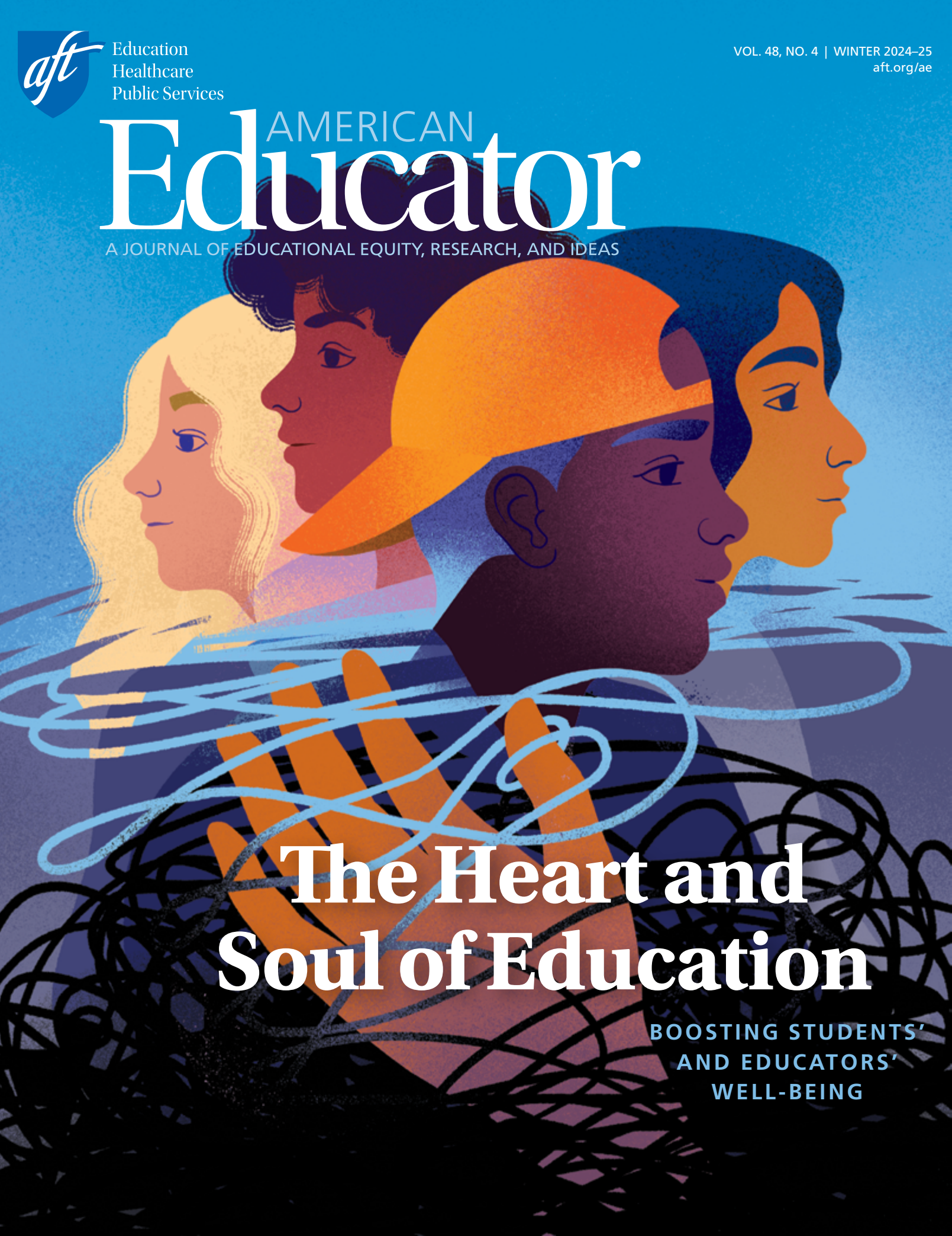
AMERICAN Educator

A JOURNAL OF EDUCATIONAL EQUITY, RESEARCH, AND IDEAS



The Heart and Soul of Education

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Fighting for Our Children's Future

RANDI WEINGARTEN, AFT President

SINCE THE ELECTION, we've all been wondering how to explain the results. Did Donald Trump reclaim the White House because of gender divides? Swaying young voters? Culture wars? Winning more of the Hispanic vote? Elon Musk? Podcasts? The manoverse? All may have been factors, but we know that the economy was top of mind for most Americans—and that when voters feel the cost of housing, gas, or eggs is too high, they traditionally punish the incumbent party. Despite the Biden-Harris administration's economic successes and Kamala Harris's proposals to address the cost-of-living crisis, in the end, she could not overcome the fear and anxiety working families felt.

The Biden-Harris administration guided the country to the strongest post-COVID economy in the world. Wages are up, inflation has cooled, and most economic indicators are improving, yet many Americans are still feeling the aftershocks of the pandemic (and even the 2008 recession). The bottom line is that everyone is an expert on their own experience, and when people suffering economic stress hear how "good" the economy is, they feel gaslit and forsaken.

In the months leading up to the election, I crisscrossed the country, talking to people about their hopes and concerns. Many felt a loss of control and that things were getting worse, reflecting a long-standing trend: the percentage of Americans earning more than their parents has been steadily decreasing over the last 80 years, inflicting psychic wounds on a country that long believed each generation would do better than the last.

Trump tapped into that anxiety and promised voters that if they returned him to the White House, "inflation will vanish completely." Yet most mainstream economists say that Trump's proposals won't conquer inflation, they will make it much worse.

Trump made gains with the majority of Americans who are not college graduates. Sixty-two percent of adults in the United States haven't completed a bachelor's degree, but that shouldn't mean the American dream is out of their reach. The AFT is working to transform high schools and community colleges so all young people have pathways to highly skilled, high-wage careers right out of high school. Eighty-two percent of voters support increasing government funding for skills training, and career and technical education programs are popular with both Democratic and Republican leaders, so it's no wonder that Trump has made project-based learning, apprenticeships, and career counseling a big part of his education program.

Americans need a great education and a union contract so they can get ahead, build the middle class, and rise together.

Americans support the two engines of opportunity at the core of our union—the labor movement and public education. Voters approved school funding measures across the country, and they rejected or repealed school voucher proposals everywhere they were on the ballot. Americans don't need a strongman promising to "fix" their lives. They need a great education and a union contract so they can get ahead, build the middle class, and ensure that communities can rise together.

We're going to stay focused on what's good for kids and families—not labels or ideologies. That's why the AFT will be fighting for common-sense solutions for a better life for America's working and middle classes, striving to ensure that all of God's children are treated with respect and dignity, and working for safe and welcoming schools and for an economy that benefits all, with lower everyday costs. We will be advocating for people to ensure they have decent healthcare, wages, and retirement security, and are able to take care of their families—with childcare, paid leave, and home care for elderly parents. We will be fighting to strengthen public schools, for a new deal in higher education, and for the right of Americans to belong to a union. And, as this issue of *American Educator* shows, we will be champions of our youth's mental health and well-being. Our students are struggling to recover from the pandemic, develop meaningful relationships, and prepare for an uncertain global future. The articles in this issue show us how to help students heal and give them hope.

I worry about the country slipping backward to another Gilded Age, but I know our country can move forward to ensure every American can have a pathway to a better life. I know that the members of the AFT—educators, healthcare professionals, and public employees—will continue doing everything they can to make a difference in the lives of the people they serve. Our guiding principle remains fighting for our children's future and the promise of America. □

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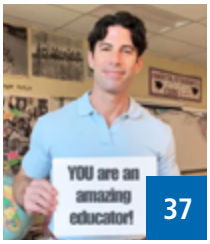

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OUR MISSION

The AFT is a union of professionals that champions fairness; democracy; economic opportunity; and high-quality public education, healthcare and public services for our students, their families and our communities. We are committed to advancing these principles through community engagement, organizing, collective bargaining and political activism, and especially through the work our members do.

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The Kids Are Not OK, But Education Innovations Provide Hope

By Carol Graham

We have an increasingly divided country, polity, and society. While this strains our family dinners and creates anxiety on the left and right, one of the most notable results is the stark decline in the well-being and mental health of our youth. They are facing deep uncertainties about the future of jobs and labor markets, being able to afford college and the consequences of not having a degree, worsening climate change, declining communities, and toxic civic discourse.[1] The youth mental health crisis in large part reflects a decline in hope that has resulted from these trends.

The deterioration in youth mental health first became evident in 2011.[2] Today, our young adults ages 18 to 25 are the least happy demographic group, departing from a long-established U-shaped relationship between life satisfaction and age in many countries worldwide.[3] The longstanding U-curve reflects the unhappiness and stress that most people experience in the midlife years as they juggle financial and family constraints (such as caring for both their children and their aging parents), while both the young and the old exhibit higher life satisfaction and lower stress, anxiety, and depression.[4] But now, youth in the United States are faring worse than their stressed-out parents.

Our young are also unhappy compared to the young in many other countries, including those that are far less wealthy than the United States. These include Bulgaria, Ecuador, and Honduras.[5] In 2024, US youth ranked 62nd in the world happiness rankings. Even more concerning, they also are experiencing an increase in anxiety, depression, and suicide.[6]

There is no magic solution for this crisis. Most suggested policies focus on better regulation of social media and increased access to mental health care. While both of these things are important, they will not address the deeper economic, climate, and civil discourse challenges that precipitated the well-being crisis. Social media and misinformation surely exacerbate the trends, but the root causes are deeper and broader.

The costs of not solving this crisis are high, not only for the youth who are suffering during what should be a very happy time in life, but also in terms of future earnings and productivity and

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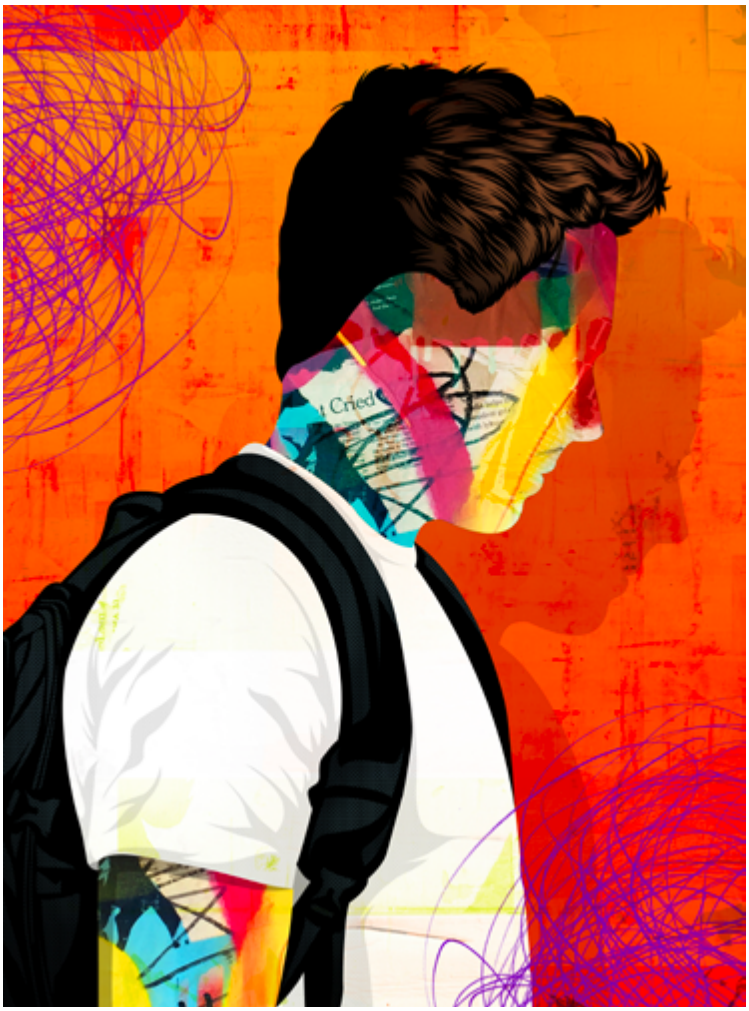

The youth mental health crisis in large part reflects a decline in hope.

our society's health and life expectancy. In 2021, life expectancy for college-educated adults in the United States (who make up just one-third of our population) was eight and a half years longer than for adults without a bachelor's degree—more than triple the gap in 1992.[7] And today, many of the jobs available to those without a bachelor's do not offer health insurance.

In addition, we have a more general crisis of "deaths of despair,"[8] primarily driven by premature deaths due to suicide, drug overdoses, and alcohol and other poisonings. Initially, these deaths were concentrated among middle-aged, blue-collar white people in communities suffering from declines in manufacturing, mining, and related industries; these industries typically anchored their communities, often serving as the main source of employment and supporting related civic organizations and local resources such as grocery stores, restaurants, and newspapers. Now, these deaths are spreading to a wider range of races and age groups, including Black people—who have long displayed resilience in the face of injustice and hardship—and teenagers. This crisis is of such magnitude that it has steadily driven down our national average life expectancy since 2015, with overdose deaths alone surpassing 100,000 per year in 2021 and 2022.[9] The increasing participation of the young in these patterns suggests that our crisis of despair is becoming an intergenerational one.

The prospect of intergenerational transmission is disturbing, and there are signs of it throughout research my colleagues and I have conducted in low-income communities. For example, a survey of white youth in Missouri found that they have finished or want to finish high school and, at most, perhaps an additional year of technical education—but their parents do not support them in achieving higher levels of education. This reflects, among other things, a decline in the American narrative of individual effort being the key to success for the white working class.[10] There is no longer a stable work-life narrative for those who do not acquire higher education or technical skills. This is especially concerning because the factors that underpin despair can make people more susceptible to extremist ideologies and create entire geographies that are prone to radicalization and violence. Poverty, unemployment, income inequality, and low education levels are all relevant factors in radicalization, extremism, and mass shootings.[11]

Restoring Hope

An important and underreported solution to the crisis lies in restoring hope. While hope resembles optimism—as individuals believe things will get better—an equally important part of hope (and not optimism) is that individuals can do things that improve their lives and thereby demonstrate agency over their futures. Helping the young form a vision of what their futures can look like will help them have hope and aspirations. This is crucial because, as my research has found, there are strong linkages between hope and long-term outcomes in education, health, and mental well-being, with hope more important to the outcomes of youth with limited access to education and mentorship.[12]

Psychiatrists often cite restoring hope as the first step to recovering from mental illness but offer very few prescriptions for doing so.[13] A classic definition of hope—which entails aspirations, agency, and pathways to achieve goals—provides a good frame for thinking about how to restore hope, but lacks examples relevant to today's youth.[14] Yet today an increasing number of new programs aim to provide students with the agency and pathways to acquire the education they need to lead healthy and productive futures. One potential policy innovation that most people can agree on and that will help restore hope among the young is the development of new models of education that focus on the mix of technological and social-emotional skills students need to succeed in tomorrow's labor force.

Education Innovations

Educational innovations are taking root across the country that focus on middle and high school students and on helping

students who want a college education to achieve it. Community colleges and career and technical education (CTE) programs stand out, as they often bridge the gaps between the skills kids learn in high school and those that are needed to succeed in college and the workplace. CTE in particular provides a productive longer-term track for those who do not want or cannot afford to pursue a college education.

Starting as early as middle school, some programs focus on the social-emotional skills that students will need to succeed in rapidly changing labor markets, such as creativity, adaptability, and self-esteem, in addition to traditional technical skills. The #BeeWell program in Greater Manchester, a large county in the deindustrialized northeast of England, introduces these skills as an integral part of its student engagement process in over 160 schools.[15] It includes strategies to combat loneliness, which is increasing among the young in both the United States and the United Kingdom and is often a precursor to depression.[16] The program relies on the cooperation of families and communities and uses inputs from large-scale surveys of students. Surveys over three years showed modest improvements in student well-being, and demand for the program is increasing in and beyond Greater Manchester.[17]

Youthful Savings is a high school program founded in the United States that targets low-income students. The curriculum addresses basic economic principles, financial literacy, ethical entrepreneurship practices, and protecting mental well-being. Students who participate in the program tend to go on to a vocational school or four-year college. A key feature of the program, according to the four program leaders and participants I interviewed in June of 2024, is the active mentorship that the program leadership provides—that mentorship was a critical factor in the students' decisions to go on to some form of post–high school education.[18]

Across the country, CTE programs are playing an increasingly important role in helping youth develop pathways to good jobs—and therefore restoring hope. In Massachusetts, for example, supporting CTE is a statewide initiative based on creating pathways to successful careers by fostering STEM skills for students of all income levels and backgrounds. Some of the programs are based in high schools and require that students spend part of their training time in local organizations, such as local engineering and building firms, among others. The state has also implemented higher reimbursement rates for high school building projects incorporating CTE programs. These efforts are aimed at modernizing and enhancing vocational and technical education opportunities for students throughout the state.[19] And an innovative CTE program in Cleveland has high school students taking classes and engaged in workplace learning in a hospital as they explore healthcare careers—they can even graduate high school with state-tested nurse aide credentials.[20] Similar high school–hospital partnerships are now expanding thanks to Bloomberg Philanthropies.[21]

Community colleges are also playing a critical role in helping low-income youth find fulfilling education and work opportunities. Macomb Community College (MCC), outside Detroit, has pioneered a model that allows students to take courses from participating state universities and complete four-year degrees while remaining on the community college campus. This avoids the expenses and time constraints introduced by moving and/or long commutes and is particularly important for older students who often must balance work and family obligations. Each student who comes to MCC is partnered with a mentor who advises them on their academic progress and steers them to mental health resources when needed. Approximately 65 percent of students who attend MCC complete four-year degrees, either on the campus or at state schools.[22]

Another aspect of the MCC model is the James Jacobs Legacy Series, which sponsors civic engagement activities and periodic lectures for the students and the community. Macomb County is diverse, with retired auto workers, a longstanding but traditionally discriminated against African American community, and new immigrants. The Legacy Series aims to increase civic engagement across the three populations and to expose students to new connections and networks that enhance their chances of living and working in Macomb post-graduation.

An important part of hope is that individuals demonstrate agency over their futures.

A related initiative inspired in part by the MCC model is underway at Lorain County Community College in Ohio. The college collaborates with employers and other regional partners to provide targeted curricula and paid internships, with the objective of setting up every student for success. Some programs at Lorain, such as one in microelectromechanical systems, have a 100 percent success rate in placing graduates in full-time jobs.

This is because internships in local firms are a mandatory part of its curriculum, and that curriculum is frequently updated with employer input. The internships provide students with both hands-on experience and focused mentorship.[23]

On the demand side of the story, efforts to renovate regional economies and communities in the parts of the country that have suffered the most from the decline of manufacturing industries and employment largely hinge on having local colleges and universities. Higher education institutions provide not only relevant training for the labor force, but also the threshold of knowledge and civic engagement that is necessary for communities and small cities to attract and retain new industries and their workforces.[24]

We can help young people facing decisive junctures in their lives gain agency, skills, and connections.

Mentors and Mental Health

As noted above, a critical part of the success of efforts to restore hope and give youth new opportunities is the provision of mentorship. Mentors not only guide young adults in their goals of skill acquisition but also provide advice on how to deal with mental health and other issues that often arise during the transition from youth to adulthood. While stress and anxiety are not new for high school– and college-age youth, as the rising number of serious incidents shows, they have been severely exacerbated by the above-noted uncertainties about the future of job openings, education, climate change, political divisions, community declines, and even the nature of information itself. While these trends affect many of us, they are particularly challenging for young people trying to make decisions about how to aspire to and invest in better futures.

Insufficient access to mental health care is also a central issue, especially in the roughly 80 percent of rural counties that do not have a single psychiatrist.[25] The role of peers and mentors is invaluable to encourage those who need it to seek necessary treatment. Peers can also help available—and new—providers identify vulnerable people and populations, as does the Visible Hands Collaborative in the environs of Pittsburgh and beyond.[26] This is particularly important for young men; while they often are more reluctant than young women to seek out mental health care because of the continued stigma attached to it, they are showing increasing signs of distress, such as low college completion rates and high levels of labor force dropout.[27]

Given that most mental health conditions emerge during school years, efforts to expand detection and early intervention in schools are promising. Efforts in Massachusetts and Texas that focused on urgent access have shown potential for rapid scaling.[28] And several organizations are collaborating to establish a new "theory of change" in this area by involving trusted community members—ranging from hairdressers to school teachers—to assess the risk of mental health disorders in communities.[29] It is worth a note of caution, though, that projects that seek scale and widespread coverage at low cost are more effective at treating the average case than dealing with complex or more serious mental health issues. That said, given that mental health is increasingly considered a societal challenge on a much larger scale than in the past (and certainly than before the COVID-19 pandemic), it is worth exploring strategies that can reach more people—particularly those who previously have not had access—in new ways. This could help catch the problem in its early stages rather than wait until more extensive and medically intense treatment is necessary.

Providing youth with the skills and support they need to navigate the uncertainties in the economic, social, and other facets of their lives is an important step forward in addressing the crisis of youth mental health. By helping young people facing decisive junctures in their lives gain agency, skills, and connections through education, the initiatives described above show that restoring hope and taking on mental health issues during these very uncertain times is indeed possible.

Even though these programs—and others nationwide—are gaining momentum, we must generate a broad base of public support for them so that they do not operate in silos or only in "supportive" states and counties. This will require broad consensus and the cooperation of both public and private sectors. Without it, we are unlikely to make progress on solving the crisis that threatens the future of our country's young and their ability to even conceive of pursuing the American dream. Especially now, in the early days of understanding how our political, economic, and social divisions are impacting our youth, we must have hope. Our shared concerns for our children and our country give us common ground—that alone gives me hope that we can resolve our differences enough to reimagine the opportunities we offer our youth. ☐

For the endnotes, see aft.org/ae/winter2024-2025/graham.

The Right to Rap

How Hip Hop Helps Students Heal from Trauma

By J.C. Hall

Hip Hop saved my life. It was my therapy long before I entered therapy, keeping me alive just long enough to make it there. I spent my teenage years in and out of rehabs and psych wards that left more wounds than they healed, but there was always one resource I could reliably turn to: Hip Hop. Writing in rhythm and rhyme was a way to structure the unmanageability inside my mind. Making beats allowed me to express my hurt and hope and make the unspeakable heard. Recording and performing connected me with others when I felt lost and alone.

Hip Hop provided me agency, but unfortunately, it was not always enough. The first time I was institutionalized was the summer before my senior year of high school. I spent two months involuntarily in a drug treatment center. Upon arrival, a staff member confiscated my CD player, headphones, and rhyme books. When I vehemently protested, I was told that rap music would only further encourage the substance abuse and criminality that brought me there. I did not know how to articulate that the music was a way to cope with my mental health struggles and find some semblance of purpose in life—and I did not feel I should have to. But I did know I was being punished for my love of and identification with Hip Hop.

This was a common experience for me across various institutions, from rehabilitation facilities to hospitals. For years prior to and after that first institutionalization, every mental health professional I encountered pathologized the cure. Making matters worse, therapy did not resonate with me because it was not relevant to my everyday experience. It wasn't until years later, when I met a therapist who respected my love of the music, that I gave therapy a genuine try. Ultimately, it was both Hip Hop and therapy that saved my life.

Spawned from the rubble of the postindustrial urban climate of New York City in the 1970s, Hip Hop rose as a countercultural phoenix from the ashes of the "burning Bronx."[1] In response to government abandonment of urban neighborhoods and removal of basic city services, such as those provided by police and fire departments, youth found a way to not only survive but thrive. What began as an economically feasible form of entertainment rapidly transformed into innovative styles of self-expression—including DJing, MCing, breaking, graffiti, beatboxing, and fashion—that took the world by storm. As an expressive form of alchemy, Hip Hop turned the commonplace to gold; through it, not only did forgotten youth find a way to cope, but they created multiple pathways to self-empowerment.[2]

J.C. Hall, LCSW, EXAT, is a Hip Hop artist and social worker at Mott Haven Community High School in the South Bronx, where he founded the Hip Hop Therapy Studio program to provide culturally resonant treatment to youth through artistic media. In 2020, he won a national Jefferson Award for Outstanding Public Service Benefiting the New York Community. He is also the 2024 recipient of the Psychotherapy Networker Vanguard Award and a 2024 winner of The David Prize.

ILLUSTRATIONS BY MINK COUTEAUX. PHOTOS: PAGE 7 BY MARKUS SCHWER FOR THE DOCUMENTARY *BACK TO TAPE 3*; PAGES 9 AND 10 COURTESY OF LEO PFEIFER FOR THE DOCUMENTARY *HAVEN IN THE BOOTH*; PAGES 11, 13, AND 14 COURTESY OF KYLE MORRISON FROM THE DOCUMENTARY *MOTT HAVEN*

In the face of systemic neglect of low-income urban neighborhoods, Hip Hop was much more than entertainment: it was a countercultural revolution embodied as a way of life bound to community action and social change. Across modalities, Hip Hop represents the democratization of art-making. No prior knowledge or formal training is needed to participate. Rap is conversational; if you can talk, you can rap. If you can hear, you can DJ; see, and you can tag (graffiti); move, and you can break (dance). Hip Hop's accessibility embodies its equalizing function. Hip Hop is still considered a voice of the oppressed and a tool to confront those in power[3] and fight injustice.[4] Its mass appeal extends far beyond the aesthetic: people relate with the message. Its sociopolitical resonance is arguably the reason for its global reach.[5] Hip Hop represents resilience, resistance, and redemption for those living on the margins; to this day, it is an art form for the underdog and is used in social action and political protest all over the world.[6]

Given their drastically different cultural underpinnings, it might seem counterintuitive to merge Hip Hop and therapy. In both, however, people are partaking in expressive practices to help them release, communicate, and connect. In a group setting, whether sitting in a circle or entering what we call a "cypher" in Hip Hop, individuals share their personal experiences in response to one another through verbal and nonverbal means. This interpersonal exchange is built on the curative capacity of connecting to a community. Hip Hop has always been healing—and will continue to be, with or without professionals. Whether intuitively or explicitly, Hip Hop has served therapeutic purposes since its inception, rooted in practices that trace back to the beginnings of humankind. We have used the arts, language, rhythm, and ritual to heal for millennia.[7] In that sense, Hip Hop is a modern adaptation of ancient healing practices. Merging Hip Hop and therapy also helps address a primary critique of psychotherapy, which is that it represents Eurocentric, upper-middle-class ideals and is dismissive of cultural differences. A push for culturally competent treatments has been underway for several decades due to significant evidence of disparities in the quality of mental health services delivered to racial and ethnic minority groups[8] as well as cultural bias in healthcare considerations and decision-making.[9]

While Western psychological traditions of healing focus primarily on verbal therapies, cultures around the world depend upon mindfulness and physical action, including rhythmic movements, in healing rituals that are also underscored in religious ceremonies. These traditions take into account the vitality of physical synchrony with oneself and others, particularly since the formation of relationships and attachment is embodied in expressions, gestures, and touch.[10] Trauma results in visible bodily dysregulation; yet when individuals play and create together, the shared experience of agency and enjoyment generates a sense of physical attunement.

The Restorative Potential of Hip Hop Therapy

In the mid-'90s, a clinical social worker began laying the empirical foundation for integrating Hip Hop's healing capacities into mental health treatment. *Hip Hop therapy* (HHT) was first coined and introduced to the literature by my late professor, mentor, and friend, Dr. Edgar Tyson. HHT blends the inherently cathartic components of the culture with well-established treatment modalities, from music, poetry,[11] and other expressive therapies[12] to solution-focused,[13] narrative,[14] cognitive behavioral,[15] psychodynamic,[16] and dialectical behavioral therapies.[17] It takes what is relevant to the client within these more traditional approaches and reimagines their applicability and procedural processes. Similar to how DJs created sonic arrangements by revising popular records or rejuvenating dated and abstract ones, HHT is a culturally resonant remix of therapeutic conceptions, revitalizing established forms of psychotherapy that have historically overlooked disenfranchised populations.

Developed as a specific intervention using rap music to initiate therapeutic dialogue, HHT has evolved into a conceptual framework that entails various methodologies from song analysis to creation of the art itself (music or otherwise). Based on Tyson's assertion that Hip Hop culture is the "central mechanism of HHT" and cannot be distilled down to one element,[18] Hip Hop therapy is an umbrella term for all Hip Hop–based psychotherapeutic interventions. Much like the culture, Tyson's original model has evolved into an approach with significant global resonance.[19] In fact, one of the greatest strengths of bringing Hip Hop into treatment is its propensity for cross-cultural diplomacy. Its transcendence of geography, race, ethnicity, religion, and socioeconomic status highlights Hip Hop as an intercultural tool with the unique capacity to address the traditional lack of multiculturalism in therapy. The same way Hip Hop culture was born out of oppressive structures that pathologized marginalized communities, HHT was born from the need for culturally competent treatment amid a nonrepresentative and even harmful mental health care system.

Hip Hop represents resilience, resistance, and redemption for those living on the margins.

HHT highlights the innate hardiness within a maligned and criticized culture. Over the decades, the mainstream conversation about Hip Hop has highlighted its supposedly corrupting influence on youth.[20] When researching the use of Hip Hop in treatment, all Tyson found was literature on the negative influence of rap music.[21] There was no acknowledgement of its social justice goals, its empowering of individuals and communities, or its rich history as a culture. Given its many art forms, parallels can be drawn between HHT and expressive arts therapy, which is a synthesis of the creative arts therapies (also known as expressive therapies) that include music, writing, drama, dance, and art therapy.[22] Similar to HHT, expressive arts therapy transitions freely and purposefully between two or more creative forms of expression to aid in deeper personal and social exploration and promote individual growth, community development, and transformative healing.[23] Although the majority of HHT-related research focuses on music, some studies—not to mention five decades of testimonials from the Hip

Hop community[24]—also indicate the therapeutic potential of Hip Hop dance and visual art.[25]

As a component of HHT, rap's form and function make it particularly well-equipped for use in treatment. Its form mirrors an effective therapeutic environment[26] similar to Vygotsky's zone of proximal development, where the ideal setting for growth involves something that is optimally challenging (not too hard or too easy). Rap vocals have rhythmic complexity that can feel somewhat chaotic in comparison to singing but are within the context of a basic, grounding drumbeat. When done well, it is a beautiful, efficient balancing act between order and chaos. The same occurs in therapy, or anywhere (including educational spaces) that meaning-making occurs. A holding environment—a psychological space that is simultaneously safe and challenging, structured but not stifling—must be established. In function, rap is deeply rooted in self-analysis and vulnerability, which is evident in the fact that some of its biggest artists (e.g., Tupac, Biggie, Eminem, Jay-Z, Nas, Kendrick Lamar, J. Cole, and Drake) are those who have most deeply explored their own internal worlds and sociopolitical circumstances. Rapping has also been notoriously uncensored, with lyrical content often tackling taboo subjects—this is ideal for therapy sessions in which you need to be able to discuss anything.

Hip Hop and Trauma

When individuals relive a traumatic experience, their capacity to clearly think and speak becomes impaired. This limits their ability to make sense of what is going on within themselves and others around them.[27] Opening lines of communication between the verbal and nonverbal parts of the brain can allow us to process trauma and break free from the rigid patterns it locks us into. Uncoupling these thoughts, emotions, and physical sensations is essential to the reevaluation and reintegration of memories.

As a result, theorists have endorsed approaches such as expressive arts therapy and eye movement desensitization and reprocessing (EMDR) when traditional talk therapy is unsuccessful.[28] Engaging in artistic endeavors involves a complex array of cognitive, sensory, and motor activities, encouraging the holistic functioning of the brain. In addition to their incorporation of nonverbal processes, the expressive arts embody "patterned, repetitive, rhythmic activity,"[29] a crucial tool for regulating the nervous system. Drumming, dancing, drawing, and singing engage and settle the mind and body, making relational and cognitive processes more accessible.[30]

Rap music is optimal for processing trauma because of its marriage of rhythm and meaning. Aside from the instrumentation, each unit of rhythm (stressed and unstressed syllables) holds verbal significance, making it impossible to separate the meaning from the music. Not only does rap create a grounding environment that regulates the nervous system through rhythm, but part of that rhythmic engagement is also rooted in cognition, bridging the mind-body gap.

Experts have noted the neurobiological underpinnings of meaning-making, highlighting that flashbacks occur when the brain fails to properly situate traumatic events in the past.[31] A simple grounding beat and the rhythmic arrangement and delivery of syllables help create an environment for reprocessing and novel meaning-making to situate a past trauma so that it is no longer triggered by present reminders. The dual focus established by writing rhymes to a beat is also reminiscent of EMDR, where a rhythmic, body-based task provides enough distraction for the mind to access and evaluate (reprocess) experiences that would normally trigger one's stress response system.[32]

Hip Hop Therapy in Practice: Mott Haven Community High School

With the foundation built by Dr. Tyson, I hit the ground running as a clinical social work intern in pursuit of my master's degree. A Hip Hop artist myself, I incorporated the more expressive elements of the culture, such as writing, producing, recording, and performing, into my work with clients.* In 2012, I was placed at Mott Haven Community High School, a newly founded "second-chance" transfer school in the South Bronx for over-age and under-credited students two or more years off track. Transfer schools are small public high schools that offer accelerated coursework and an opportunity to earn credits at a faster rate for students 16–21 years old who have either dropped out or fallen behind.[33] Compared to citywide school averages, these schools have predominantly Black and Hispanic students, with significantly lower Asian and white populations and much higher percentages of English language learners and students receiving special education services.

Mott Haven Community falls within the country's poorest congressional district;[34] 94 percent of students are economically disadvantaged,[35] and 45 percent of children live below the federal poverty line.[36] The students I work with face tremendous obstacles, from community violence and juvenile justice involvement to foster care placement, homelessness, teenage pregnancy, physical and sexual abuse, and mental health issues. Much of my work involves processing trauma rooted in these and a wide range of other experiences. In my internship, I used Hip Hop therapy with some students to address both trauma and specific mental health conditions, including mood disorders, substance use, and PTSD (more accurately conceptualized as developmental trauma,[37] which is complex trauma,[38] or the existence of multiple, often ongoing events, that begins in early childhood).

After my internship, I was hired full-time at Mott Haven Community as a social worker and continued engaging students through HHT. Upon seeing the interest and involvement of students who were the most difficult to engage, the school's principal provided me with a budget to build a professional recording

*Although people of all backgrounds can benefit from elements of HHT, such as writing down their feelings and vocalizing them rhythmically, Hip Hop is not culturally resonant with everyone. In these cases, I do not incorporate it into interventions tailored to meet clients' specific needs.

studio in an old storage room. The origins of the studio program are chronicled in the award-winning short documentary *Mott Haven*, which is available for free at go.aft.org/sis. I have been running the studio for over a decade now, and in that time the space has more than doubled in size. Being able to provide this outlet to youth in the birthplace of the culture that saved and helps sustain me is beyond my wildest dreams. It is truly poetic justice.

The Hip Hop Therapy Studio

The HHT studio is a voluntary afterschool program open for several hours a day. There are typically 12 to 15 total participants at a time, although due to varying schedules, most sessions range from 8 to 12 students. In the studio, I offer direction, assistance, materials, and hands-on training in the expressive components of HHT, and I facilitate group therapy and discussions surrounding relevant themes.[39] I also meet with group members for individual sessions throughout the school day, where I employ both expressive and receptive (i.e., listening) methodologies. Group discussions regularly involve students showing me and each other songs and videos, which naturally evolves into conversations about related topics relevant to their lives. I find that this informal, natural flow of events is conducive to engaging students in therapeutic dialogue because it is noninvasive and a more realistic reflection of social interaction.

The studio provides students a space to socialize and express themselves freely through creative processes in a positive, supportive environment.[40] They form strong bonds and help each other through these undertakings—and they tend to keep each other in check, making sure everyone respects one another and follows group norms. Once these norms have been co-constructed, redirection is rarely needed. Because only so many individuals can create a song per session, and only so many songs can be shared and discussed, members are invested in the group progressing smoothly and efficiently. Participation alone is positive reinforcement for respecting one another and the space. To this point, Hip Hop–based interventions are particularly powerful in that what is therapeutic is perceived as a reward rather than a punishment. The implications this has for youth engagement and investment cannot be overstated, particularly for youth whose introduction to therapy is too often coerced and based on thoughts and actions deemed problematic by adults in their lives. Adolescents are commonly considered resistant to treatment,[41] but it is vital to evaluate how mental health professionals are failing to engage them in authentic, strengths-based ways.

In the studio, students are encouraged to engage in music-making and are given the tools to do so. For those who need it, I illustrate how to rap by detailing the technical aspects of rhythm and rhyme and structuring lyrics within a beat. I demonstrate how to use the recording, engineering, and production equipment and professional audio software. I also guide them through performances: I teach them how to authentically express their content through emotional attunement in the recording booth and on stage, and I teach techniques such as visualization, breathing, and relaxation exercises for overcoming performance anxiety.[42] We discuss how to portray moods and meanings nonverbally, through posture, facial expressions, and tone. At the end of the year, we put on an annual showcase, which serves as a narrative through song with themes determined by the students and based on their work. The students codirect the show, developing skits, dances, props, and artwork to advance the storyline, which diversifies the modalities through which the therapeutic process materializes. All these experiences translate into social and emotional competencies, from emotional regulation through self-awareness and reflection to enriched verbal and nonverbal communication skills. Ultimately, the cultivation of these proficiencies is central to students' ability to navigate intra- and interpersonal conflicts,[43] and their skill development also increases their self-esteem and sense of self-efficacy.[44]

Rap music is optimal for processing trauma because of its marriage of rhythm and meaning.

Healing and Feeling: Ephraim's Story

Although the youth I have the privilege of working with face incredible odds, they embody a degree of resilience that would be difficult for most people to comprehend. The grit, untapped talent, and growth I get to witness daily is profoundly inspiring.

Consider Ephraim Weir, a young man you'll meet in the *Mott Haven* documentary (and hear from in the sidebar on page 14). I was first introduced to Ephraim, a Caribbean American male, a couple of months into the 2013–14 school year. Only 17 years old, he had just returned from a month's stay in an inpatient psychiatric setting for a suicide attempt.* He had stabbed himself in the chest, and his mother explained that he seemed incoherent and unable to express himself beforehand, going days without eating or sleeping. The school was trying to re-engage Ephraim, and after debriefing me earlier that day, a school counselor brought him over for an introduction.

As he entered my makeshift office, the old storage room I was turning into a music studio, Ephraim had a suspicious look on his face. I could tell his trust would be hard-earned, as I know all too well the harm well-intentioned mental health professionals and educators can cause in the name of "helping." In addition to his legitimate mistrust of my profession as a social worker and therapist, my being white and dressed in professional garb likely

*If you or anyone you know needs support, call or text 988 for the Suicide and Crisis Lifeline.

did not help. Ephraim was wearing the latest street fashion and had a swagger that gave me the impression he was immersed in Hip Hop culture—for me, a promising sign that we could connect. Even if we were from two very different walks of life at first glance, Hip Hop is something you can smell on people. As a culture, it goes well beyond the artistic expressions associated with it, being rooted in shared beliefs and customs affecting everyday existence.

When Ephraim entered, we engaged in an awkward handshake that was half shake and half slap. He was polite but clearly not looking forward to this interaction. He presented as sad and solemn—hopeless even—with his eyes glued to the floor. Other than the occasional cagey, fight-or-flight glance at me, Ephraim seemed resigned and indifferent to what he likely perceived would be another disconnected lecture forced upon him. I knew these looks because I had seen them in the mirror countless times.

After our somewhat uncomfortable introduction, I asked Ephraim what kind of music he listened to. When he said "Hip Hop," I inquired about his favorite artists and songs. He obliged, surprised by my familiarity and mutual appreciation. We began trading songs, and what started as awkward silences and one-word answers soon evolved into an in-depth discussion of favorite lines, their meanings, and the intricacies of rhyming and creative writing. It felt like having a conversation with a long-lost friend about the current state of Hip Hop—until the bell rang. I knew we had made progress though, regardless of how momentary the lapse in hierarchy.

What may have appeared to some as a waste of time at best and a neglect of duty at worst, this first session with Ephraim laid the foundation for a strong therapeutic alliance that would last for several years until our work together concluded. In this initial meeting, I intentionally did not bring up his hospitalization. I wanted him to know that this experience did not define him, nor was it the most interesting or important thing about him that we could talk about. Maybe because I have been hospitalized on numerous occasions for psychiatric reasons, including at the very facility he had just been released from; maybe because during those stays, I had developed close friendships with many teens just like him—like me. Or maybe it was because I know that to develop a working relationship with a person, I need to see them for who they are, not just what they've done or what has happened to them. I need to see their strengths as well as their struggles. Knowing that Ephraim had Hip Hop as a cultural source of strength was a much more important finding in that moment than digging immediately into his past and presenting issues.

As I began working with Ephraim, his identification with Hip Hop culture became my window into his reality. After a while, he revealed that he wrote poetry, that all of his poetry rhymed, and that he had attempted to rap before and secretly always wanted to, but he felt he was not good at it. He insisted that he was not a rapper, and when asked what he meant by this, he explained that he did not like to write about money, cars, and women. This is a common reflection of the stereotypes associated with rap as opposed to the "more refined" poetic forms such as literary verse or spoken word. I found this deeply disconcerting. There was an injustice being perpetuated here: a cultural form of expression that resonated with him was being reflected back in such a way that he was discouraged from exploring something he had a natural knack for. A resource was portrayed as a vice, and a strength masked as a liability.

Ephraim should never have been steered away from rap and made to feel ashamed for a desire to rap, whether by someone he respected or the mainstream representation and criticism of this fundamentally Black art form. As a white kid from the suburbs, Hip Hop is not my native tongue, so I can understand the skepticism I've received about it my whole life. Misguided as it is, I get how my appreciation of and participation in the culture can lead to the occasional accusation of appropriation because of my appearance. But for Ephraim, a Bronx-born Black youth of the culture, in the birthplace of the culture, to have received the message that rapping is wrong was unacceptable. If anyone had the right to rap, it was him.

As a therapist, I tried to remain objective in exploring why Ephraim felt that way about rap. I challenged his preconceptions of what defined a rapper, and I explained that we create our own definitions. A rapper is merely one who raps. To me, a rapper is a warrior for human rights and social justice; to Ephraim, based on what he predominantly heard and saw, as well as the larger society's general interpretation and what was projected back at him, a rapper was selfish, materialistic, and antisocial. I clarified that both definitions can be true at the same time.

Ephraim seemed invigorated by the idea that rap can be what you make it, but he still believed he did not have enough innate talent. I told him that anyone can rap or write rap lyrics. Each individual has a unique perspective and story to tell. With some guidance and a blueprint for the form of rap music, I assured him he could be rapping in no time. Ephraim was skeptical, later admitting he initially thought I might have been trying to turn him into something he was not. However, he noticed I never pressured him or told him what I thought he should do; I merely offered assistance if he decided to give it a shot one day, in the meantime expressing interest in reading his poetry. He was not ready to share at that moment, and I did not push, simply suggesting he stop by the studio after school for a group session if he was interested. He had not made any friends in the school at this point, and I thought coming could be good for him whether he participated or not.

Ephraim took me up on the offer, initially coming and sitting against the wall, not communicating with anyone. He witnessed the other members taking risks, attempting to rap, some effectively and others clumsily. From the outside, it may have appeared like he was silently judging from a distance, but I knew he was just gauging the temperature of the group. He wanted to see if it was truly a safe space before he became willing to put some skin in the game. After a few weeks, Ephraim approached me in the hallway with a poem he wanted to show me. Elated, I asked him to read it to

me, but he insisted that I read it on my own. This reminded me of when I first began sharing my writing. My lyrics were pieces of me, and they were so fragile that I could not bear to watch a person's initial response out of fear that they would hate it or, worse, pretend to enjoy it. I would ask others to read it or listen to a recording when I was not there, and this is what Ephraim was requesting. I enthusiastically obliged, taking his poem back to the studio. What I read looked much like my first attempts at writing lyrics: deeply introspective rhyming poetry that simply lacked a defined structure.

When we next met for an individual session, I expressed how genuinely impressed I was with his writing and openness to sharing it with me. My excitement was palpable, and Ephraim's smile let me know he could see I was authentically engaged. I began going over it with him line by line and explained that he had already written a rap without knowing it. I illustrated how it fit on different beats with different tempos through a few simple rearrangements, and that because of its rhythmic structure, it would fit within a certain range as long as its delivery was sped up or slowed down. He was amazed, and at that point, his journey as both a rapper and a fully invested group member began. In group, Ephraim was applauded for his efforts by the other members, who had started to become wary of his silence. Slowly, he went from letting others read his work to rapping out loud and then recording and collaborating with the rest of the group. Despite being extremely nervous, he even mustered enough courage to perform in that year's showcase, shocking everyone who had met him beforehand.

I wish I could say it was all smooth sailing from there on out. However, many of the youth I work with are returning to war zones when they go home, often crossing gang lines just to attend school. One Friday evening in April 2014, weeks after that showcase, the group was wrapping up and Ephraim was annoyed that he did not get the chance to record what he had been working on because our time had run out. I proposed that the upcoming Monday be all his. The rest of the group agreed; they were excited to see what he had been working on. But over the weekend, Ephraim was jumped by two assailants and stabbed eight times. Abandoned by his friends, he was left bleeding on the sidewalk alone. By some miracle, a stranger in a minivan pulled over, applied pressure to his wounds, and called an ambulance. He was rushed to the ER with a punctured lung and ruptured spleen, among other serious injuries. When he came to, fighting for his life in a hospital bed, Ephraim told me his first thought was of the studio and how he would not be getting his Monday.

After an extended recovery period, Ephraim returned to school with a cane and a stack of new writings. For the rest of that year, we spent much of our time processing his emotions surrounding that trauma—including anger and betrayal, with a desire for revenge at the forefront—particularly through his writings and recordings. He wrote an extraordinary song, his first full song ever completed, elucidating his healing process and renewed appreciation for life. What could have easily initiated a destructive downward spiral of retaliation became a point of reference for Ephraim reframed as a rebirth. The song is called "Heaven's Gates." It is an ode to his recovery, and the chorus sums it up best:

> Healing and feeling, we all just dealing
> Praying to the ceiling, hope for the realest
> Secrets revealing, then a lot of tearing
> Try to keep achieving, everything I believe in

This anthem about how he was healing, feeling all his feelings, and then moving on to achieve greater things is the essence of therapy: the means and the end. (To listen to "Heaven's Gates," go to go.aft.org/cmp.)

Ephraim was given a second chance at life, and through his art, he took on the challenge. After barely attending and failing the majority of his classes at a traditional public high school, at Mott Haven Community his attendance improved from 29 percent to 92 percent[45] and he passed every class he took. He entered Mott Haven Community in 2013 with three of the 44 credits and none of the five New York State Regents Examinations required to graduate. In 2016, he graduated with honors, receiving two scholarships for growth and perseverance for a total of $2,500 toward college tuition. The biggest change, however, extended far beyond academics. He exhibited tremendous self-awareness, confidence, and willingness to share and relate with others. He greatly improved his relationships at home, and his mother was especially amazed with his transformation. From having no friends, barely speaking to anyone, and getting into a fight during his first month at the school before his suicide attempt, Ephraim developed into a social butterfly loved by students and staff alike. To this day, Ephraim continues to turn to Hip Hop and making music as a source of solace.*

The grit, untapped talent, and growth I get to witness daily is profoundly inspiring.

Each student I have worked with has as awe-inspiring a story as Ephraim. They have all made incredible personal strides against inestimable odds, and it has been one of the utmost privileges of my life to work with each of them. From improved peer, familial, and community relations to personal development, the HHT studio has had a positive impact on all participants over the past decade. Even students who had previously been deemed unreachable and who were closed off to the idea of therapy have excelled at identifying and exploring emotions, learning and utilizing positive coping mechanisms, and developing self-regulation capacities and tolerance for discomfort. They have flourished in fostering social awareness and skill sets through open interaction and developed communicative abilities that have allowed them to practice navigating social relationships, dynamics, and structures. They also have enhanced their critical thinking, in terms of themselves and society at large, leading them to examine the power of the individual and group and better understand how to effectively advocate for themselves. The studio provides a safe, supportive space for all of this to occur, where open dialogue, authenticity, and respect are primary.

*To learn how Ephraim and another studio participant continued to utilize the therapeutic relationship they developed with Hip Hop long after treatment ended, watch *Byways*, a follow-up to *Mott Haven*, available at go.aft.org/aj2.

Mental Health in Schools

Although education is not the primary focus of my work as a therapist, I would be remiss to ignore its impact on students' life courses and how that relates to mental health goals. Mental health has long been correlated with academic achievement,[1] which is part of the rationale for incorporating an HHT program in a school setting. Unfortunately, children with mental health challenges are significantly more likely than their peers to develop substance use issues, engage in criminal activity, and drop out of school.[2]

In the United States, 37 percent of special education students with a mental health condition age 14 and older drop out of school (the highest dropout rate of any disability group).[3] In a recent survey, 40 percent of high school students reported feeling so sad or hopeless in the past year that it interfered with their normal activities, and nearly 30 percent had experienced poor mental health in the past 30 days.[4] Tragically, suicide is a leading cause of death in the United States; in 2021, it ranked second for youth ages 10–14 and third for those 15–24.[5] Compounding the tragedy, many of these deaths (and their reverberating consequences) likely could be prevented if mental health care were widely available and easily accessible. Nearly 17 percent of youth ages 6–17 have a mental health condition, half of whom do not receive treatment.[6] There are also vast racial and ethnic disparities in access to[7] and use of mental health services in the United States, with people of color less likely to seek treatment,[8] and more likely to prematurely terminate treatment,[9] than white people.

When thinking about prevention and early intervention, it is important to keep in mind that 50 percent of all lifetime cases of mental illness begin by age 14 and 75 percent begin by age 24.[10] Since onset can be difficult to detect and millions of families lack health insurance, children must often rely on mental health resources provided by their schools. But schools are often ill-equipped to address mental health issues[11] (particularly in a culturally relevant manner), despite becoming the de facto mental health providers.

Few schools meet the recommended student-to-staff ratios[12] for social workers, school counselors, or school psychologists, and many of these professionals do not routinely provide psychotherapy. School counselors do not diagnose students or provide therapy,[13] and though they have a background in psychology as it pertains to education, they often get bogged down with academic concerns and graduation plans. School psychologists primarily provide academic and psychological assessments, identifying special education needs and developing support strategies rather than holding weekly therapy sessions. And while social workers may be clinically trained and licensed to provide therapy, in poorer communities they can easily get overwhelmed with needs-based assessment and assistance around food insecurity, unemployment, homelessness, and connecting clients to appropriate resources.

Our educational infrastructure must prioritize mental wellness if we are going to see any significant and lasting change in the capacity to self-actualize in our communities. In the mental health profession, we talk about meeting the clients where they are, and although this is meant metaphorically, it is important that we also meet them where they are physically.

–J. C. H.

For the endnotes, see aft.org/ae/winter2024-2025/hall.

In addition to socioemotional development, HHT has shown to be tremendously effective at helping youth process significant traumas they have experienced. I have worked with numerous students who used the creative process to address and reframe experiences they were previously too ashamed to talk about with anyone, let alone record and perform in front of the community. I have seen the process help reunite families by creating a space where they could authentically express how they felt about certain dynamics or events and then initiate communication and behavioral change. I have seen it cut across gang lines and create a space for collective healing and bond-building. I have seen youth come to terms with previous activities that led to incarceration, from harm inflicted upon others to harm inflicted upon them in the streets or by the justice system. I have seen youth process realizations about gang involvement and decide to avoid that lifestyle while prioritizing their personal goals and developing healthier relationships. I have seen it steer individuals away from retaliation for events that anybody would want revenge for. I have seen them work through losing multiple people in their lives, from friends and family to fellow classmates. I have seen it bring some back from the brink of serious self-harm and suicide.

I have also seen HHT breathe new life into students, providing joy, connection, and purpose. In creating a safe space to play, I have seen youth hardened by their environments get the opportunity to let loose and be children, often for the first time in their lives. I have seen them develop tremendous insight into their thoughts, behaviors, and actions and become change agents for themselves and those around them. And while education is only one focus of our work together, I have witnessed these students' graduation rates nearly double compared to other transfer schools in the borough as a result of the mental health benefits they experienced.

Although we work toward the same aims in other approaches, the advantage of Hip Hop therapy is its cultural responsiveness and cross-cultural applications. Very few things in this world can bridge racial, ethnic, socioeconomic, religious, and geographic divides. Hip Hop is clearly one of them. □

For the endnotes, see aft.org/ae/winter2024-2025/hall.

Finding Connection and Confidence Through Hip Hop

BY EPHRAIM WEIR

I went to two high schools before Mott Haven Community. In one school, I was skipping classes to spend time with my girlfriend and I got behind, so my mom told me to find a trade. After trying a trade program, I begged my mom to go back to school. We started searching for credit recovery schools, and that's how we found Mott Haven Community.

I got into a fight my first month with a kid who I thought had gone through my bag. I was suspended and almost kicked out of school. Pretty soon, I was feeling overwhelmed with pressure to pass my classes and prepare for Regents exams (which are required to graduate from high school in New York). Depression and anxiety started kicking in. There were nights that I was so anxious about going to school the next day that I couldn't sleep. Plus, things weren't working out with my girlfriend, and I was becoming sad over that.

I started feeling like I wasn't going to get through the challenges of high school. All this pressure was building up inside me. I wasn't stable mentally. Then I got into an argument with my girlfriend that pushed me to the point that I wanted to take my life.

In the hospital, seeing people who were struggling with worse things than I was gave me some perspective. I also learned about activities like drawing that help when I feel depressed—and that I didn't need to be in the hospital to do. After I left, I still felt depressed and anxious sometimes, but music helped. I started listening and relating to artists who were going through the same things I was, and it helped me feel less alone. Writing poetry also helped. It became an outlet for certain emotions when my mind was cluttered. After I wrote, I'd feel like I could let go of the things I was holding inside.

When I met J.C. and learned about the Hip Hop therapy program, it sounded like a cool way to share my creative side with somebody who understood and who I could trust. In the studio, I learned to write rap, which was different than my poetry. When I wrote poetry, it was just for me. I didn't share it with anyone. But when I wrote rap, I wrote about things everyone could relate to because we're all just dealing. I liked thinking that maybe my words would resonate with someone and help them like other artists helped me.

Without the Hip Hop therapy program, I probably wouldn't have finished school. The studio got me excited about learning. Once I started writing rap, it was easier to write essays. Sharing lyrics on the stage made me more comfortable asking questions or presenting in class. And connecting with others in the group challenged and pushed me as an artist and as a person. Listening to them share their art and be vulnerable with their emotions taught me to respect others because everyone is going through something.

The program also helped me be more open to getting therapy because it didn't seem like therapy. It felt like just a class where I learned how to talk about what I was going through. I'd had another therapist before coming to Mott Haven Community, but when I talked with J.C., I felt like he was interested in what I had to say and he was really there to help me. I didn't feel like I was just talking to a wall. After graduating, the experience gave me the confidence to look for a therapist outside of school who was a better fit for me and even be open to taking medication if I needed it.

I think all schools should have a Hip Hop therapy program and a studio. You don't know what kids are going through at home. When I was coming to school with anxiety—feeling suppressed with no outlet—no one knew. But the studio gets you engaged with school. You learn to write your own story, and that gives you control over your life. That's what it did for me.

I used to feel nervous walking into classrooms. But now my life is a performance, and I'm the artist. So I walk into rooms with confidence. I wake up every day feeling like a superhero.

How can I save the world? ❑

The studio gets you engaged with school. You learn to write your own story, and that gives you control over your life.

Ephraim Weir, who passed away in November 2024 soon after completing this article for American Educator, *was a poet and Hip Hop artist by the name of HeFromWhere. He graduated from Mott Haven Community High School in 2016 and worked in Manhattan as a concierge.*

ASK THE COGNITIVE SCIENTIST

Understanding Disruptive Behavior in the Classroom

How does the mind work—and especially how does it learn? Teachers' instructional decisions are based on a mix of theories learned in teacher education, trial and error, craft knowledge, and gut instinct. Such knowledge often serves us well, but is there anything sturdier to rely on?

Cognitive science is an interdisciplinary field of researchers from psychology, neuroscience, linguistics, philosophy, computer science, and anthropology who seek to understand the mind. In this regular *American Educator* column, we consider findings from this field that are strong and clear enough to merit classroom application.

By R. J. R. Blair and Daniel T. Willingham

QUESTION: How can we better understand and support children who are highly aggressive?

R. J. R. Blair is a professor of translational psychiatry at the University of Copenhagen in Denmark and a member of the board of scientific advisors for the US-based National Courts and Sciences Institute. His previous positions include serving as the director of the Center for Neurobehavioral Research in Children with Boys Town National Research Hospital and as the chief of the Section on Affective Cognitive Neuroscience at the National Institute of Mental Health. Daniel T. Willingham is a professor of cognitive psychology at the University of Virginia. He is the author of several books, including the bestseller Why Don't Students Like School? *and* Outsmart Your Brain: Why Learning Is Hard and How You Can Make It Easy. *Readers can pose questions to "Ask the Cognitive Scientist" by sending an email to ae@aft.org. Future columns will try to address readers' questions.*

ANSWER: Aggression has multiple causes and is part of the typical human's behavioral repertoire. However, a small percentage of children engage in more severe and more frequent aggressive behavior than is typical, and these children may have differences in several mental processes (rooted in genetics and/or their environment) that require treatment. The good news is that most of these children can be helped—if they have access to therapeutic interventions. In this article, our aim is to increase understanding of these differences so that educators can become stronger advocates for connecting these children to mental health services.

Student aggression causes considerable disruption for both peers and teachers. Aggressive students make it harder for their classmates to learn, diminish teacher job satisfaction, and contribute to educator burnout over time.[1] This is not just a US problem. A 2019 report examined data from students ages 9 to 17 from 144 countries and found that, on average, one-third of students reported an incident of peer aggression within the previous month.[2] Teachers at a school in the United Kingdom actually went on strike due to concerns that their school was unsafe for staff due to pupil violence.[3]

Psychologists' definition of *aggression* matches its everyday usage: aggression is intentional behavior meant to cause either physical or psychological pain.[4] Thus, a student who spreads a rumor about another child on social media with the intention of

ILLUSTRATIONS BY STUART BRIERS

embarrassing her is acting aggressively. That's true even if the plan backfires, with the aggressor ending up shunned and the target suffering no consequences. But if a student carelessly bumps another child who then falls and breaks his ankle, no aggression has taken place. Intent, not outcome, is everything for defining aggression (though outcome still matters for students and for educators creating a safe, caring environment).

Of course, there is a multitude of reasons why a child might act aggressively. Even though many of us wish this were not true, aggression is a standard human response—in many situations, it's perfectly normal. Aggression can be used to achieve dominance, be used to acquire resources in situations where they might not otherwise be readily available, and be seen in response to frustration, a threat, or social provocation. So it's no surprise that many social variables, such as economic deprivation and a high-stress home environment, can increase the risk for aggression.[5] But this type of "normal" aggression—and all the potential systemic, historical, environmental, economic, and political causes—is outside the scope of this article. As cognitive scientists, we're only focusing on how the

risk for aggression can also be increased by *neuro-cognitive difficulties*—and what we can do about those difficulties. Neuro-cognitive difficulties are mental processes mediated by known brain systems that are not working as well as would be expected for a child of a given age. In this article, we'll discuss four such processes. At the same time, we acknowledge that the divide between systemic, historical, etc., causes of aggression and neuro-cognitive ones is not as clean as our introduction sounds. Neuro-cognitive difficulties can arise from genetics and from the conditions in which a child is living—often both are involved. Regardless of the cause, the core message of our article remains: most highly aggressive children can be helped, especially if the adults around them know about and advocate for therapeutic interventions.

Two indications of the presence of neuro-cognitive difficulties are the severity and the frequency of the aggression (a fight that ends with bruises is very different from a string of fights that end with several people hospitalized). Of course, severe and frequent aggression may indicate a neuro-cognitive difficulty but not a diagnosis—and even these indicators can be ambiguous because they are open to interpretation and have historically been applied with bias. It's well documented that in our communities and schools, misbehaviors are judged as more serious if they are committed by a Black child rather than a white child.[6]

Despite the difficulty in interpretation, it is important not to ignore potential neuro-cognitive difficulties. Unfortunately, biases occur here too, as there are strong indications that Black people are far less likely than non-Hispanic white people to receive the mental health services they need.[7]

The goal of this article is to provide insight into some of the difficulties faced by some children who show high levels of aggression. Our goal is not to explain the aggression of every child or even of the majority of children who show aggression—as noted, there are myriad social and contextual reasons why an individual might be aggressive. Instead, our goal is to help educators understand those individuals—estimated at perhaps 1 to 2 percent of children—who show aggression regularly and whose aggression is more likely to result in significant harm to victims. We hope that increased understanding will lead to better management, including providing the interventions these children need and deserve, and to a calmer and more productive classroom environment.

How Do Psychologists Understand Aggression?

Psychologists distinguish between two types of aggression: instrumental and reactive. Instrumental aggression is chosen to achieve a particular goal. For example, a preschooler might punch a peer to make him relinquish a swing on the playground. Reactive aggression, in contrast, is associated with anger and occurs in response to provocation, a threat, or frustration. Causes of frustration can be varied—from a sense of the injustice of a particular situation to the experience of a classroom computer not turning on.

Both forms of aggression can be within the scope of "healthy" social interactions. We see instrumental aggression when football players try to physically hurt opposing players, or when basketball players seek psychological damage through trash-talking. These are accepted by all involved as part of the games. Moreover, all mammals show reactive aggression if provoked by a strong enough threat (and again, this may be within socially accepted norms). For example, US President Andrew Jackson faced an assassination attempt in 1835 as he left the US Capitol. When the assassin's gun misfired, Jackson attacked the man with his cane (and survived because the assassin's second gun also misfired). Many Americans today would likely see that instance of reactive aggression as understandable.

But instrumental or reactive aggression may not be within social norms—that is, either may be out of proportion to the context. Hitting someone with your cane is proportionate if your target just tried to kill you, but not if your target merely criticized your hat.

Is This Typical or Clinical Aggression?

Educators and researchers alike are much more concerned about acts of disproportionate aggression than typical aggression, and isolated acts are not likely to be cause for long-term concern. But when such acts are part of a persistent pattern, they may be a sign of a child in need of significant support. The *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, Text Revision* (DSM-5-TR), published by the American Psychiatric Association, is the widely accepted authority on definitions and diagnostic criteria for mental disorders.[8] It lists two diagnoses specifically associated with aggression during childhood: oppositional defiant disorder and conduct disorder.

Oppositional defiant disorder is seen primarily before age 10, and the symptoms are a combination of angry/irritable mood, vindictiveness, and defiant behavior, all lasting at least six months. Children with this disorder often don't comply with requests from authority figures, deliberately annoy others, and blame others for their mistakes or misdeeds.

Conduct disorder usually applies to children ages 10 to 18 and is defined by the commission of aggressive acts toward people and animals, destruction of property, deceitfulness, and the violation of community rules (e.g., skipping school or running away from home). These behaviors demonstrate a persistent tendency to violate the rights of others and to flout the rules of society.

A third diagnosis worth mentioning is attention deficit hyperactivity disorder (ADHD). Symptoms of ADHD include inattention (difficulty to focus), hyperactivity (excess movement that is not appropriate for the setting), and impulsivity (actions engaged in without thought). Children with ADHD are at increased risk for aggression[9] and often also meet criteria for conduct disorder. Up to 70 percent of children with conduct disorder also receive diagnoses of ADHD.

Most highly aggressive children can be helped, especially if the adults around them advocate for therapeutic interventions.

The criteria we listed for oppositional defiant disorder, conduct disorder, and ADHD are categories of behavior, and the DSM-5-TR provides guidance about how to interpret everyday behaviors to judge whether they fit any categories. Still, in many respects, these diagnoses are not terribly helpful. Both conduct disorder and oppositional disorder have been used to guide interventions, but neither diagnosis is successful in predicting whether an individual will benefit from any specific intervention. Moreover, possession of a diagnosis does not inevitably mean the individual has neuro-cognitive difficulties. Contextual reasons for aggression—such as being exposed to aggression among peers and/or family members or enduring long-term poverty—can lead to diagnoses in the absence of neuro-cognitive risk. Moreover, many other diagnoses, such as depression, posttraumatic stress disorder, and forms of anxiety disorder, are also associated with at least some increased risk for aggression.

The benefit of a diagnosis is that it increases the chance that the individual will receive the help of mental health professionals. And yet, we must be mindful of the well-established problems of inappropriate diagnosis, particularly of young Black males. For example, compared with their white peers, youth of color are less likely to be diagnosed with ADHD and more likely to be diagnosed with oppositional defiant disorder or conduct disorder, even after controlling for confounding variables (like prior juvenile offenses or adverse experiences). This is problematic because misdiagnosed youth may not have access to needed medications, in-school accommodations, or community-based therapies.[10]

What Underlies Clinical Aggression?

Because the diagnoses don't provide much help with respect to guiding interventions, we believe that greater attention should be paid to the range of underlying mental processes that can give rise to an increased risk for aggression rather than the diagnoses *per se*. A more detailed understanding of these underlying processes offers the promise of more individualized interventions.

Behavioral and neuroscientific data point to four mental processes that, if operating atypically, can lead to aggression. We describe each in turn. Children with heightened levels of aggression most often do not show problems in all four of these processes. Indeed, some may show none. But many clinically aggressive children do show at least one. Just what causes dysfunction in these mental processes is not well understood, although both genetics and the conditions in which a child is living are implicated.

1. Acute threat response. There is a brain system that organizes the basic mammalian response to threat: freezing for mild threats, fleeing for more serious threats, and reactive aggression for strong threats. If all is going well, reactive aggression will only occur in response to extreme threats (perhaps a human attacker or a rabid animal). But there are factors that can increase the responsiveness of this system, making reactive aggression more likely in response to threats that would prompt most people to freeze or flee. These factors can be genetic but also environmental; in particular, exposure to a threatening environment or to abuse.[11] Of course, one may then ask what level of exposure is sufficiently toxic to impact brain function? This is a complex issue and is different for each individual. More severe and frequent exposure increase risk, but resilience factors—within the individual, such as their ability to self-regulate their emotions, and within their social environment, such as the availability of supportive family or friends—reduce risk. In the classroom, over-responsiveness of the acute threat response brain system might manifest as explosive rage in response to what for other children would feel like a mild threat, such as being frustrated (perhaps following the denial of a toy or, in an older child, a phone) or being socially challenged by a peer or teacher.

2. Response control/behavioral disinhibition. Considerable evidence points toward the role of the several brain regions in control of behavior.[12] This control is necessary when, for example, a child knows she should be attentive to the teacher, but a cute dog is visible outside the classroom window. Problems with response control may increase the risk for aggression,[13] but the increase will probably show only if there is already some propensity to be aggressive. For instance, if the child felt the urge to rage or grab another child's belongings, difficulties in response control make it more likely that the child will actually do those things.

3. Reward- and punishment-based decision-making. Several brain regions are important for reward-based decision-making; these regions allow us to anticipate what a reward or punishment will feel like and respond to rewards or punishments once received. That's crucial to allow us to make good decisions—that

is, to choose the behaviors that will give us the most reward. If these systems are not working well, the individual will make poorer decisions—choosing, for example, a small reward now rather than a much larger reward in the future (like playing truant for the day as opposed to attending school regularly to ensure graduation). Such poorer decision-making increases the risk the individual will engage in aggression and also increases the risk for future substance abuse.[14] These problems in judgment may occur over a long period (being truant rather than trying to excel) or a short period (taking a drum from the school band room to play with for the afternoon, even though it's likely you'll get caught and face consequences).

4. Empathy. The brain regions important for empathy—specifically, for responding to the distress of other individuals—together with those involved in decision-making, reduce the probability that we will harm others. If these systems are not working well, the individual will be more willing to harm others to achieve their goals.[15] They may be more likely to use weapons at school (rather than simply threaten to use them) and continue to attack another child even when that child is attempting to disengage.

What Makes Children Prone to Clinical Aggression?

There are genetic contributions to the risk for aggression,[16] which presumably prevent typical functioning of the four mental processes described above.[17] However, the details of these contributions—which specific sets of genes play a role and how they influence development—remain mostly unknown.[18]

There are also many social and environmental variables—including home and community variables (many with systemic, historical, etc., causes) as well as environmental toxins such as lead exposure—that influence brain development and increase the risk for aggression. While there are too many variables to review here, educators should be aware of the potential impact of abuse and neglect. Physical, sexual, and emotional abuse all increase sensitivity of the acute threat response, particularly if the abuse is persistent and severe.[19] Neglect (physical and emotional) appears to reduce the brain response to reward.[20]

How Can We Reduce Clinical Aggression?

When people hear that there is a genetic influence on a propensity to behave aggressively, they sometimes conclude that nothing can be done. The word "genetic" is equated with inevitability. But that's inaccurate. Consider that there are genetic risk factors for depression and for obesity, but that doesn't mean children suffering from these health issues cannot be helped.

A number of different interventions may reduce children's clinical aggression, and they are usefully divided into psychosocial and pharmacological interventions. Note that the ones we describe below were designed by mental health professionals for use by psychologists and/or psychiatrists. Our purpose in describing a few of the more commonly used interventions is to give educators a better understanding of how clinically aggressive children—no matter what the underlying causes are—can be helped.*

Psychosocial interventions. Two main psychosocial interventions used for aggression, as well as anger/irritability, are cognitive-behavioral therapy and parent management training.[21] Cognitive-behavioral therapy targets deficits in emotion regulation and social problem-solving skills that are associated with aggressive behavior.[22] Interventions are conducted with the child and use structured strategies to produce changes in thoughts, feelings, and behaviors.[23] Common techniques include helping the child learn to identify the antecedents and consequences of their aggressive behavior, learning strategies for recognizing angry feelings and regulating expressions of anger, generating new ways of thinking about things that trigger aggression, and modeling and rehearsing socially appropriate behaviors that can replace angry and aggressive reactions. Cognitive-behavioral therapy has been successful in helping children who have experienced abuse; it seems most effective for children who have difficulty managing the acute threat response.[24]

Parent management training aims to change family interactions, specifically to reduce parenting behaviors that prompt the child's irritability and aggression. It assumes that some forms of irritable behavior and aggression are reinforcing for the child. For example, a child who doesn't want to go to school (perhaps because another child has been teasing him) may throw a violent tantrum. The parent concludes, "We can't send him to school like *this*," and allows him to stay home—and the child learns that a violent tantrum allows an escape.

During parent management training, parents (or the primary caregivers) are taught to identify the function of maladaptive behavior, to give praise for appropriate behavior, to communicate directions effectively, to ignore maladaptive attention-seeking behavior, and to use consistent consequences for disruptive behaviors. Parent management training is conducted with parents, though sometimes in conjunction with their children.[25] It primarily targets aggression the child learned through previous less-than-optimal social interactions. It is not specifically designed to address the mental process difficulties described above (acute threat response, disinhibition, decision-making, and empathy). However, by reducing some particularly maladaptive parenting strategies (e.g., harsh and inconsistent discipline, such as excessive scolding and corporal punishment), it may reduce environmentally induced hyper-responsiveness to acute threats (and thus reduce irritability and/or rage-based aggression).

Considerable research indicates that cognitive-behavioral therapy and parent management training reduce irritability

*Yet another topic that is outside the scope of this article, but educators should be aware of, is that sometimes the best intervention is targeting the root cause of aggression—such as trauma, abuse, neglect, and/or depression—with the hope that the aggression will fade once its catalyst has been addressed.

and aggression.[26] These improvements in child behavior can be stable over time and prevent antisocial behavior in adulthood.[27] However, they do not benefit all children equally. This may reflect that these interventions have yet to be optimized to address other difficulties that some aggressive children struggle with. Recent work demonstrated that children who did not benefit from one of the most successful forms of parent management training showed particular difficulty in their empathic responding to the distress of others.[28] Interventions will need to be adjusted individually to help all children.

Pharmacological interventions. The most commonly used pharmacological medications for reducing children's risk for aggression are neuroleptic (antipsychotic) medications. These are reported to have some impact on reducing aggression.[29] However, the mechanism by which they have an impact remains unclear. Far more research needs to be done. Currently, it is not certain whether neuroleptic medication beneficially impacts any of the mental processes outlined above.

Stimulants, like Adderall, are another pharmacological intervention that has been shown to reduce aggression risk, in particular in youth with ADHD.[30] Mechanistically, this might occur via reducing general response control problems; this is seen in at least some youth diagnosed with ADHD.[31] Because of how stimulants affect the brain,[32] they might make the aggressive child more responsive to the distress of others and, in turn, better able to restrain themselves. There have been provocative data indicating that for children with reduced empathy, stimulant medication can amplify the effects of psychosocial interventions.[33] But individuals whose increased aggression risk might relate to enhanced acute threat responsiveness are unlikely to benefit from stimulant intervention—they may actually become more aggressive.

What Can Educators Do?

So, what does all this information imply for educators? There are three points we'd emphasize.

First, when you have a student who shows aggressive behavior, your instinct may be to try to work with the student—for example, to talk with and observe the student—in an effort to discern what triggers their aggression. That's of course appropriate, but it's also essential to remember that every public school district is required by federal law to have a process in place to identify students who need additional support. We recommend that you contact the school administrator who is in charge of that process the *first* time you are suspicious the child may need help. Even though many school systems do not have enough staff for this process to operate as well as it should, it is still crucial to start the process. That way you can get information about how you can best support the child and ensure they get the services they need as soon as possible.[†] In addition, that first moment of concern should also lead to record-keeping on your part: document the frequency, timing, duration, apparent trigger, and specific actions of each aggressive episode. It makes sense to start this record-keeping even before you are certain about the seriousness of the problem, because the formal process will require documentation. If you wait to initiate the process until you're sure you can't handle the child's behavior on your own, you'll be frustrated by the delay.

Second, even if aggression reaches clinical levels—that is, it requires mental health support—it's important to keep in mind that the majority of aggressive children can be helped. There are no "bad kids" who are beyond help. In particular, the stereotype about boys of color from lower-income families as being violent and beyond help is incorrect.[34] Many children showing aggression can be helped—and early intervention is always better.

Genetic and other biological factors can affect one's propensity to act aggressively, but this is the case for all health problems—whether heart disease, asthma, diabetes, or aggression. Any identified biological factors provide us with treatment targets, even though we do not yet have the scientific understanding or ability to act on all of them (that too is the case for many health problems).

For this reason, clinically aggressive children should not be excluded from regular school settings unless absolutely necessary to protect themselves or others from harm. Many show emotional difficulties, and their reactive aggression can be helped by psychosocial interventions. These same interventions can also help some of the more generally or typically aggressive children. Those whose aggression is a byproduct of ADHD may be helped by stimulant medication. But there are some—in particular, those children who lack empathy—for whom we really need to develop better treatments.

There should be no blanket responses—each child with aggression is an individual with their own strengths and weaknesses.

The third thing we suggest educators keep in mind is that minimizing the problem helps no one. We've seen educators and families shrink from the suggestion that a child's aggression might be a symptom of mental illness. This shrinking away fosters the stigmatization of mental illness and prevents the child from receiving needed help. There should be no shame in a mental health diagnosis, whether it is depression, anxiety, or conduct disorder. Recognizing problems for what they are is the first necessary step to addressing them, and in many districts, for accessing the services that will help the child thrive in school.

In short, additional resources and interventions are needed. But there should be no blanket responses—each child with aggression is an individual with their own strengths and weaknesses. Teachers are in a great position to try to understand these children—and to help connect them and their families with resources, including clinical care. □

For the endnotes, see aft.org/ae/winter2024-2025/blair_willingham.

[†]When the process is operating slowly, educators may be tempted to tell families that their children need therapy or medication. Such conclusions can only be reached by mental health professionals. However, educators may be able to help families learn about community-based supports.

Welcoming Migrant Students

Lessons from Colombia

By Joshua Lerner

In the spring of 2022, I sat down with my first-grade co-teacher and Lucia, the mother of one of our newcomer students, Andres.* We pulled up three chairs on the classroom rug to talk about how we could work together to help Andres transition to school each morning. Andres and Lucia had recently migrated from Colombia, and this period of adaptation had been hard on Andres. Lately, he had been crying and would only come into the building holding my hand. It would take him the better part of the morning to feel comfortable enough to take off his coat, hang up his backpack, and join his classmates.

Conferences like these were not new to me. I've been a bilingual teacher in Chicago Public Schools (CPS) for 15 years. I am currently the English learner program teacher at my school. My job is not only to provide bilingual education and English as a second language services but also to coordinate our school's program (with over 220 multilingual learners), collaborate with my coworkers on professional development, and increase family engagement. However, this particular conversation had a big impact on me because it led me to see the gaps in how well our school truly understood many of our students' families.

In short, we found out that Andres's family was escaping ongoing rural violence in Colombia after his father had been tragically killed. We also learned that Lucia was an early childhood educator in her native country. Through tears, we brainstormed ways we could help Andres feel more comfortable at school. But silently I was contemplating other questions. What had kept me from understanding more about Andres and his family's life experience up to this point? And why had I never thought to relate to Lucia as someone with whom, despite our disparate experiences, I might actually have a lot in common? After all, I now knew, she was a fellow teacher.

CPS received close to 9,000 migrant students between August 2022 and April 2024,[1] and nearly 80 percent of the migrant influx came from Venezuela.[2] My current school welcomed over 30 Colombian and Venezuelan students in that span. Inspired to

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*Pseudonyms are used throughout this article for students and family members. When full names are provided, they are not pseudonyms.

ILLUSTRATIONS BY CAROLINA PELÁEZ

better help our school welcome these students—students like Andres—I decided to apply for a Fulbright Distinguished Award in Teaching Research to study migration and education in Colombia. I sought to learn more about the context of education and migration there, specifically regarding the education of migrant students in the region. By researching this topic in this particular place, I also hoped to develop my familiarity with the cultures, politics, and international contexts that were increasingly relevant to my own local school and district.

Challenges

I carried out my Fulbright project in Medellín, living there with my family from September to December 2023. I partnered with a host institution, Universidad de Antioquia, and received guidance from a mentor in the education department. I spent my mornings at Institución Educativa Fe y Alegría Luis Amigó (Amigó), a public school in the neighborhood of Moravia, where I observed classrooms; conducted interviews with students, staff, and families; and taught the occasional lesson as a guest teacher. Afternoons were spent visiting other schools, meeting staff at community organizations, or meeting over coffee with families and teachers to ask them more about their experiences. In between, I transcribed and coded interviews or sat at my desk at the university to read everything I could about migration and education in the region.

My school welcomed over 30 Colombian and Venezuelan students between August 2022 and April 2024.

More than 6.1 million refugees and migrants have left Venezuela in recent years, the largest mass migration in South America's recent history.[3] Colombia is home to the largest share of these migrants, with over 2.8 million Venezuelans living there as of January 2024.[4] Such a large-scale movement of people has affected all aspects of Colombian society, not least of which has been the nation's school system. In Medellín, the arrival of roughly 33,000 Venezuelan students over the past five years has introduced challenges and opportunities at all levels of policy and practice.[5] Venezuelan migrants now make up 10 percent of Medellín's population.[6] As of 2020, Venezuelan migrant students made up 7 percent of children in the city's schools.[7] Despite the influx, no new schools have been built, so the existing schools are straining to meet all of their students' needs.[8]

National policies in Colombia have gone a long way to help regularize and integrate migrant families, especially children. Yet, adequate resources for the schools are not being delivered. Federal policy only gets you so far. Juan Felipe Aguirre, education director at Intégrate, a social service agency that works with displaced people in Medellín, described schools with close to 50 students in a classroom. "There are schools with principals and teachers who are very flexible. They take students past the margins of what they can accommodate, all to uphold the social mission of education. But all this takes a toll on the quality of the education being offered."[9]

A local principal highlighted the contradiction in the schools' nutrition program. She receives 200 servings of milk daily for a student population close to 10 times that size. At Amigó, a school that serves over 100 Venezuelan students, the principal showed me classrooms that had been closed off for over a year due to the dangers of crumbling ceiling tiles.[10] And in the final stretch of the semester, at a time when schools were busy re-enrolling all families for the following school year, Medellín's schools lost internet for a week and were at risk of running out of funds to maintain custodial and security staff.[11]

At the schools where I spent time getting to know teachers, students, and families, there were also challenges regarding the school experiences of newcomer students and their families. After migrating, families often struggle to locate the certificates and paperwork needed to enroll their children, and there are significant discrepancies between Venezuelan and Colombian school levels and credentials. All this leads to huge barriers to enrollment, with families often turned away because they cannot provide necessary paperwork, or students placed in inappropriate grade levels and classes. Meanwhile, some students and staff adopt the anti-immigrant and xenophobic sentiment that is a growing undercurrent in much of the society at large.[12] Students reported to me that a foreign classmate might be chastised if they stick out in any way, whether in the type of sandals they wear, the regional language they use, or their accent.[13]

Almost every Venezuelan student I spoke with described the isolation and embarrassment they felt whenever they were called *veneco*, a slang insult for a Venezuelan living in Colombia. But that word, a lexical joining of the names of both countries, also hints at their shared history of regional struggle and solidarity. After all, a generation ago, Colombians were the ones migrating to Venezuela seeking a better life.[14]

The schools and spaces that were most inspiring during my time in Medellín were the ones that embraced this sense of shared history while refusing to give up their demands for more support for all. As Moravia community leader Gloria Ospina told me, "The saying goes, *'Dónde comen dos, comen cuatro.'* ['Where two eat, four can eat.'] Yes, we practice great solidarity in this neighborhood. But still people die of hunger here. One should not have to always take from their own mouth to feed their neighbor. What we need is more bread."[15]

Coexistence and Community

Mornings for my family in Colombia started just how they always did in Chicago, with my partner and I scrambling to get our two young children (then ages three and five) ready for school. First, one of us would drop Isaac off at kindergarten; he went to a local school with other middle-class Colombian students from the neighborhood. Then we would cart Rosa to her local daycare, which she attended with about 20 other kids from the high-rise development where we lived. Finally, I would take the metro to a downtown stop and walk 20 minutes through Moravia to my school placement.

I walked alongside the trickling ravine that cuts through the neighborhood, passing vendors selling fresh bananas and

avocados, corner stands selling *arepas de choclo* and *buñuelos*, and countless murals depicting the history of this unique area of the city. Moravia has always been a home to people searching for a better life. In the 1950s, it attracted Colombians fleeing poverty and violence in the countryside. New arrivals built shacks and simple homes out of found materials, forming a bustling new neighborhood practically from scratch.[16] Seventy years later, with its proximity to the city's bus station, Moravia continues to be one of the first stops for migrants arriving in Medellín. With this dynamic of migration and relocation, the neighborhood's schools are critical institutions for the practice of *convivencia*, a concept that loosely translates to "coexistence."

Neighborhood schools are critical for *convivencia*, which loosely translates to "coexistence."

The first time I heard *convivencia* was October 3. That morning, the academic coordinator at Amigó announced the first day of the school soccer tournament, a yearly tradition. All students and teachers gathered on the school's patio, many observing the makeshift pitch from second-floor balconies surrounding the courtyard. Teams of younger children were to be coached by older students, with a few additional classmates serving as referees and announcers. The school's academic coordinator kicked off the games by addressing the crowd: "The reason we hold these games each year is to improve our school's *convivencia*, to work toward peace, toward the respect that we each have for our classmates."

Convivencia is a catch-all term whose meaning has evolved over decades; it has come to represent a shifting set of civic qualities, including moral values and positive habits, school climate and violence prevention supports, democratic and citizenship education, community building, and education for peace.[17] It has been growing in importance as a theme in Colombian schools since the mid-1990s, when a federal law dictated that all schools must develop and publish formal plans for how they will establish positive school climates.[18] In 2004, national citizenship standards were released, recognizing a growing systemic need to teach students how to live in community, a further expansion and operationalization of *convivencia*.[19] In 2013, another federal law further detailed how schools should work toward these goals, including by establishing school-community *convivencia* committees.[20] That year, a text and training professional development module were published to support the furthering of classroom and school-based practices.[21]

To my outsider eyes, it seemed that the national and local emphasis on *convivencia* was an effort to define schools as the essential civic institutions that will help Colombian society move beyond its violent, conflict-ridden past (due largely to the country's history of drug trafficking). Indeed, this view was corroborated by multiple educators and university education faculty. In this way, it's similar to the critical role that antiracist and culturally sustaining pedagogies play to address societal inequalities created by centuries of colonialism, slavery, racism, economic inequality, and anti-immigrant policy in the United States. The key difference, however, is the extent of the agreement about *convivencia* as a critical goal for Colombian schools and society. Yes, economic inequality is entrenched and there are those who cling to xenophobic sentiment. Nonetheless, I came across *convivencia* everywhere during my time in Colombia. This concept wasn't just one of the many buzzwords or trends floating around school campuses. It often seemed as if educators and families alike conceived of *convivencia* as the central goal of education itself.

In recent years, the goal of welcoming and integrating Venezuelan students into Colombian schools has become a new context in the *convivencia* paradigm. In the face of extreme societal inequality and infrastructural challenges, teachers and school leaders are making important efforts in their school communities to achieve this goal. Through my research, I found this work fell into two categories: schoolwide and individual educator practices.

Schoolwide practices:

- Effectively carry out national policies and programs toward *convivencia*.
- Promote a philosophy of inclusion that becomes part of the school's reputation in the community.
- Serve as a community ally through organizational partnerships.
- Create extracurricular opportunities for artistic and cultural expression among students and families.

Individual educator practices:

- Develop positive relationships with students by trying to understand their experiences.
- Intervene directly in cases of xenophobia or bullying.
- Create classroom communities that bring students together across differences.
- Use teaching practices that make learning accessible for all.

Schoolwide practices often had a positive influence on the mindsets and practices of individual educators in the school community. However, even when these school practices were not taking place, individuals could still establish welcoming and supportive experiences and environments with new students and families. In the following vignettes, I attempt to provide a snapshot of educators and school communities engaged in this important work:

Known in the neighborhood. Amigó is known as a bona fide community institution. Its principal and academic directors are famous in the neighborhood; there's a graffiti mural of one of the directors on a local storefront. Next to the school's main entrance,

a mosaic of the history of Moravia depicts community leaders and images of residents building their homes from the ground up. Of all the schools in Moravia, Amigó has done the most to maintain a thriving partnership with the nearby Centro de Desarrollo Cultural de Moravia. There, kids can attend wraparound extracurricular classes. Students' families take job development courses or simply spend time in a safe space using free Wi-Fi. Families have the choice of attending a few local schools, and while Amigó is in worse physical condition than some of its neighboring institutions, most families want to send their kids there. As one teacher told me, "Students and families feel that their realities and conditions will be understood here."[22]

Student authors. At Institución Educativa Presbítero Luis Rodolfo Gómez Ramírez (Ramírez), teachers recognize that one of the characteristics separating Colombian and Venezuelan students is their different regional vocabularies. Some of the words they use—for everything from foods to classroom materials—are so distinct that they can generate a barrier within their shared language of Spanish. A team of teachers brings a group of students together in the library to share about their language and experiences. What results, a year later, is a professionally published dictionary full of the direct translations for *colombianismos* and *venezolanismos* as well as an appendix of lesson plans and activities about cultural exchange and community building. It's called *Chamolandia*. (*Chamo* is a slang word young people use to refer to their friends.) You can find plenty of copies in the school library, a testament to these student authors and their work to build community across culture and language.

It seemed as if educators and families conceived of *convivencia* as the central goal of education.

Revamping an annual festival. Manuel López Ramírez, principal of Institución Educativa Eduardo Santos, pointed to his heart and told me, "With all of the migration happening, it's starting to revitalize that little supremacist that many people carry inside."[23] One way of combating the resurgence of xenophobia at his school is rethinking the school's annual festival, which historically only celebrated the regional *Paisa* culture.[24] They will now call it a "Cross-Cultural Festival of Colombia and Venezuela." They will celebrate not just local traditions but also cultural expressions from Venezuelan regions, and customs practiced by many Afro-Colombians at the school who come from the coast. The principal of Amigó has moved his school in the same direction. At last year's Colombian/Venezuelan festival at Amigó, Colombian and Venezuelan families danced the *joropo* together, a folk rhythm that unites both countries.

Lighting a candle. Yolida Ramirez, a teacher at Institución Educativa Héctor Abad Gómez, truly sees her migrant students and their classmates. One day, she explained to me the practice that I had observed her do with her second-grade students when I first visited her class. Each morning, after attendance, she lights a candle with her students and leaves it burning throughout the morning. Why? The candle represents all the students who have left. "Migrant students are often transient," she told me. "Students often see their classmates suddenly pick up and leave for the United States. It would be strange not to acknowledge that."[25] That day, I noticed a student, Kevin, who the class greeted especially warmly. He and his family had been gone for weeks, attempting to get to the United States by crossing the Darién Gap (which Human Rights Watch has described as "one of the most treacherous migration pathways in the world"[26]). This was his first day back. The candle had been burning.

The Outsiders

The stories above—and many more like them—show whole-school communities and individuals following a common framework to welcome newcomers and work toward greater *convivencia*. First, they recognized when a member of the community felt in some way like an outsider. Then, quite simply, they did whatever it took to bring them in. Alongside what I observed as a teacher-researcher in schools throughout Medellín, it was, unexpectedly, my family's acute awareness of our own outsider status in our children's new schools that brought this lesson to life.

The first week of kindergarten in Colombia, Isaac's school had spirit week. We had very few clothes with us, certainly nothing "wacky" for Wacky Day. I walked the kids to the corner paper goods store to buy Isaac pipe cleaners to tie around his shoelaces. But was Wacky Day here the same as Wacky Day in Chicago? Isaac was anxious every day that first week, wondering how he would stick out, whether we would send him to school wearing something that would make him the laughingstock of his class. As parents, my partner and I were always one step behind the rest. What saved us was the WhatsApp group for class parents. A few generous parents befriended us and helped us navigate the culture and customs that would have otherwise left us doubtful and confused. We began to feel a little less like outsiders.

Still, the transition was hard. When my partner picked up Isaac from his new school one afternoon, he was walking around by himself, she said, kicking rocks in the dirt. Across the yard, the rest of his classmates smiled and chatted as they waited for their grown-ups. I felt guilty about how alone he and my daughter must have been feeling in school. At the same time, I felt insecure about how much to take up the school staff's time with questions about his adjustment. Isaac and Rosa were healthy, well-adjusted kids coming from an economically advantaged background. They had experienced zero trauma in their temporary transition to a new country. And still I had these doubts as a parent. When a teacher

began the routine of hugging Isaac to say goodbye when I picked him up from school, I breathed a little easier. She wasn't even his teacher, but she saw his need for connection to the community.

Meanwhile, I felt just as much like an outsider in my role as teacher-researcher. My life of privilege in the United States had acclimated me to feel comfortable in schools. I am a cisgender white male who was in Colombia as a researcher from a country with a history of power and intervention in South America.[27] Nonetheless, schools are institutions with their own in-group dynamics and unspoken expectations. From day one, the discomfort of not knowing the rules hit me like a bucket of cold water.

At Amigó, for example, I seemed to never know the schedule. I was always just short of grasping the class rotations, the timing of whole-school assemblies, and even which holidays meant a day off for students and staff. There were many times I almost found my footing, but there was always something that kept me from asking the other educators for help. In retrospect, I think I was scared to stick out. I didn't want to reveal my own ignorance. Plus, I found myself thinking their jobs were hard enough. I would feel guilty even bothering them with a question. But whenever he saw me, Principal Walter Vélez took a few moments to genuinely ask how I was doing and what I needed. His warmth and generosity made a huge difference. Back home in Chicago, my memories of Walter inspire me to reach out to my fellow coworkers, especially those who may, for reasons of language or culture, also feel like outsiders in our school community.

In Colombia, I saw the powerful role that schools have in welcoming and validating the experiences of those who are new to a place.

Of course, the real story is not how my family or I felt being new to a place. It's the experience of migrant students and families that matters. At Institución Educativa Arzobispo Tulio Botero Salazar, high up on the outskirts of Medellín, teachers and students described a school going to great lengths to systematically include Venezuelan migrant students in all aspects of their experience. There are regular induction meetings for new families. Peer tutors help students who have arrived with interrupted previous schooling. Schoolwide artistic events and talent shows are seen as opportunities to bring Colombian and Venezuelan students together. One teacher passed me her phone to show an ongoing chat she maintains with some of the Venezuelan moms in the neighborhood. "It's an outlook, an attitude that you have to have as a teacher," she told me. "Because, as they say, 'borders… we create them ourselves.'… But at the end of the day, between you and I, there's no difference between us as human beings. And I think in our school, we have achieved this understanding."[28]

Victor Acevedo, a teacher at Amigó, expressed this same sentiment during a conversation one morning in the school library. For him, it all begins with the work of liberatory educator Paulo Freire: "Freire spoke of popular education. For us, that means that we always think of inclusion, of opening our doors to the world. First and foremost, that's our educational philosophy here."[29] Victor recalled when two indigenous students moved to Moravia from a rural region, knowing little Spanish and unable to communicate with their peers or teachers. Victor has a talent for macramé; he used this hobby as an inroad to encourage the students to share their cultural textile traditions with him and others at the school. Notably, two members of the custodial staff also mentioned these students to me, sharing how they did their best to look out for the students when they first arrived.

Daniela, a college student at Universidad de Antioquia, recounted that she was the only Venezuelan student in her Colombian high school. She was at her breaking point in 10th grade when she met a teacher who intervened on her behalf. He spoke to the students in small groups and even held workshops for the community to understand the situation in Venezuela that was causing new migration patterns. "The community realized more and more that we are all different, but no one deserves to be judged or discriminated against.… He helped change the image of Venezuelans for others."[30] Daniela's story shows that welcoming new students sometimes requires finding the courage to engage in political education to challenge stereotypes and foster solidarity within the community.

At the end of each of my interviews, I always asked, "If you could send a message to US educators who are working with families and students from Colombia and Venezuela, what advice would you give them?" The answers often were the same: *Love them. Have patience with them. Try to understand what they are going through.* Looking back on my own temporary status as an outsider in Medellín, I realize that the people who most helped me and my family in Colombia were those we met through the schools. Even in our privileged position, we relied on schools to find our way. And reflecting on the experiences of students, families, and educators I met in Medellín, I see that the importance of school communities cannot be overstated.

Connections

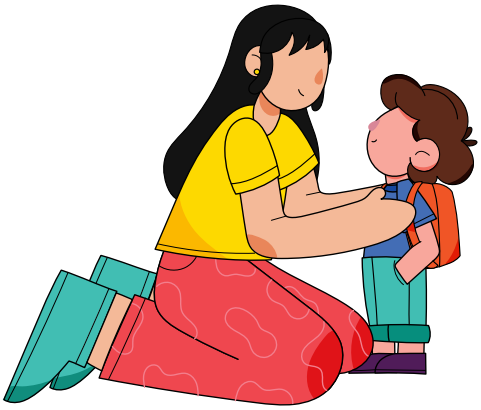
My time in Medellín helped me see what it means to lean into school-family-community connections. Since returning to Chicago, the first way I do that is by sharing my contact information through WhatsApp with new families. On day one, they have someone to whom they can direct their school questions, often the same questions I experienced during my short time as an outsider in a new country. Our school now has a WhatsApp group with Spanish-speaking families; often, families who have been here for a little while can offer guidance to families who have just arrived. Last year, our school's bilingual advisory council elected as its president a mother who has been in the country for just two years. In our work together, she and I have mobilized involvement in the school, driven school volunteer opportunities among newcomer families, and organized resources such as healthcare benefits workshops and school visits from community organizations that serve immigrant communities.

In my own work with newcomer students, I keep in mind the recommendations of the mother of a fourth-grade student at Amigó. "Welcome them, embrace them," she told me. "Show them stability. Show them love."[31] This year, we organized a bilingual career day,

where newcomer students met members of the community who also arrived in the United States as young people. Taking a page from the students at Ramírez, I gathered newcomer students and some of their US-born bilingual peers into small groups to learn from each other about Colombian, Venezuelan, and US languages and cultures. I made time for their questions during each session. In our end-of-year survey, students said that these moments of personalized interaction and support were far more meaningful and useful to them than lessons from the formal curriculum.

One of the most critical things our school administration has done to support newcomers has been to hire bilingual paraprofessionals who themselves are recent immigrants to the United States (this began before my study in Colombia and, thankfully, continued upon my return). Recent research shows the positive academic effects that bilingual paraprofessionals who speak Spanish and English can have with students who speak Spanish at home.[32] More than anyone in the building, these educators understand the mix of social, emotional, and academic support that our newcomer students need. They are the best equipped to connect with families. Shortly after I returned from Colombia, our team organized a successful orientation for newcomer families and a winter coat and boot drive. I help support the work of this team, but just as much, I learn from them about what it takes to do the work well. Given the daily emotional labor they do to provide a sense of safety and well-being to the students, one of these educators likes to remind me that she's their "mom" at school. This is what it can feel like to look out for our students and their families as fellow human beings. We can all do our part to invite outsiders in.

We should never underestimate the power of our own interventions in the lives of students and their families.



In *Pedagogy of the Oppressed*, Freire writes, "Knowledge emerges only through invention and reinvention, through the restless, impatient, continuing, hopeful inquiry human beings pursue in the world, with the world, and with each other."[33] In my ongoing pursuit of knowledge, I have benefited greatly from joining the systematic work being done by the amazing educators and organizers of the Chicago Teachers Union (CTU). By fighting for the rights of immigrants alongside longtime Chicago residents, we are stronger and more effective together.

In the summer of 2023, when thousands of migrants were arriving by bus to Chicago and sleeping for weeks on the floors of police stations, our members were some of the first into the stations to personally enroll children in schools for the upcoming school year. A network of our members has volunteered our time at "free stores," where newly arriving families can get clothes and toiletries for the whole family, plus toys and books for their kids. Meanwhile, members of our union's bilingual education committee created a welcome packet to be tailored and used by any member at any school to provide resources and guidance to newly enrolled families. Our members have spoken at roundtables with elected officials about the need for more funding and staffing to support schools that have received large numbers of new students. As we bargain for a new contract, we have sent hundreds of members to the seat of our state government in Springfield to lobby for more funding for our school budgets to meet the needs of all students in Chicago Public Schools.

Because the truth is, just as community leaders in Medellín told me, we cannot keep taking from some to feed others. We need more bread for all. Our yearslong fight for Sustainable Community Schools, for example, has led to the creation of schools in immigrant and Black neighborhoods that are true community hubs, promoting educational equity, health, and well-being. When we fight for high-quality bilingual services for newcomer students, we don't just do so for their sake, but for nearly 90,000 English learners in Chicago who have gone without true bilingual education for far too long. When we advocate to protect access to affordable housing in our contract negotiations, this is for newcomer families and for the Black families who have been victims of housing discrimination for decades. And when our community partners help newly arrived Venezuelan families enroll for work permits, we recognize that we also need work authorization for the more than 400,000 long-term undocumented immigrants in Illinois.[34]

In our increasingly interdependent societies, where more and more people are "on the move" across the globe, our daily lives and experiences are constantly changing. This is true not just for migrants but also for all of us who welcome them into our communities. In Colombia, I saw and experienced the powerful role that schools have in welcoming and validating the experiences of those who are new to a place. It should be our goal as educators to connect with our students as fellow human beings, to go above and beyond to humanize and make connections. We should never underestimate the power of our own interventions in the lives of students and their families. And we should always be looking to systematize these efforts, just as we do in the CTU, to advocate for our students in schools and the broader community.

I look back on my student Andres and his mother Lucia with regret that it took me so long to get to know them and their circumstances. But the beauty of working in schools is that there is always another chance. Within the seasons of our profession lies the opportunity for reinvention, for renewal. And from my experience in Colombia, I find myself recommitted to the work of building the schools our students and families deserve—both for newcomers and for those who were already here. Because as Freire said, we must pursue our work together: "In the world, with the world, and with each other." ☐

For the endnotes, see aft.org/ae/winter2024-2025/lerner.

Mandated Support in Education

Protecting Children by Assisting Families

By Chelsea Prax

Ms. Hanover is Miguel's fourth-grade teacher. Over the past few months, she has become increasingly concerned about him. He often wears the same clothes, usually unwashed. Recently, he missed six days of school. And when he has come to class, she's noticed the distinct odor of marijuana.

Per the building protocol, Ms. Hanover discussed her concerns with the school social worker, Mrs. Tomas, who had heard about Miguel from another staff person as well. After school, they sat together to make a report to Child Protective Services (CPS). It was a long process, but Ms. Hanover was hopeful this would get Miguel and his family the help they needed.

The CPS hotline operator accepted the report for an investigation. Two days later, a caseworker arrived at Miguel's listed address. Miguel's mother, Carmen, was at work, so the caseworker engaged her brother, Ruben. Ruben was high and giggled as they walked around, pointing to empty beer cans: "Those are all mine, you know. Carmen hates me drinking." He did not seem to notice the dirty laundry, mostly bare cupboards, and sparse refrigerator. When asked about his parents, Miguel replied that he missed his father, but he wouldn't say any more. His younger siblings avoided the caseworker, focused instead on playing in a corner.

Following the visit, the caseworker developed a safety plan for the family with a few key tenets: Ruben must move out. Carmen needs to clean the house and fill the cupboards. She also needs to show proof that she owns some basic resources for health and safety: a crib and two car seats.

On the second visit, the caseworker found Ruben high again and was not satisfied with Carmen's attempts to fulfill the safety plan. The caseworker removed Miguel and his siblings to foster care with a CPS-approved provider and agreed to talk to Carmen's sister about completing the process to become a kinship caregiver. The caseworker told Carmen that her kids would be returned on three conditions: First, Carmen must implement the safety plan. Second, Carmen and Ruben must complete at least four sessions of a substance abuse intervention. Third, Carmen was court-ordered to complete at least four sessions of parenting classes.

Miguel disappeared from Ms. Hanover's class because his foster placement was zoned for a different school. She heard nothing more from CPS and still wonders whether her call was helpful.

Chelsea Prax, MPH, CPH, is a Black mother of two beautiful Black children and leads Children's Health and Well-Being programs for the AFT. She supports AFT affiliates in developing their own child well-being initiatives, such as around trauma-informed practices, Medicaid in schools, and leveraging the full skills of specialized instructional support personnel.

ILLUSTRATIONS BY ERIN ROBINSON

Our collective failure to support children and families is evident—the nation is riddled with food insecurity, homelessness, discrimination, lead exposure, child labor, and more. Educators are not asked to call the departments of agriculture, housing, civil rights, environmental protection, or labor. But every state requires educators to activate child welfare agencies as mandatory reporters of child abuse and neglect.[1]

Mandatory reporting is the first step in a troubling and common cascade: Poverty, reframed as "neglect," precipitates far too many reports, with roughly one-third of children enduring a CPS investigation.[2] Investigated families are monitored and coerced to change their parenting (usually without support for alleviating their poverty), with the threat of child removal if they do not comply.[3] Often, their children are taken even when they strive to comply. CPS removes thousands of children from their families, so that "on any given day, foster care rates for US children, at 563 per 100,000, exceed imprisonment rates for US adults, at 539 per 100,000."[4]

More than 50 years ago, the government began requiring mandatory reporting, despite the concerns of social workers within CPS and other activists.[5] Many of their worst fears, including an explosion in reports, a lack of personnel to handle the volume, and a shift to investigations instead of care, have come to pass.[6] Mandatory reporting is part of how CPS transformed from a problem-solving agency that supported families into one focused on investigation, surveillance, monitoring, and family regulation.[7] Each year, CPS chases millions of reports of suspected child abuse *after* signs of tragedy and at the expense of investing in prevention or effective interventions.[8] Sadly, "Increased reporting has not been associated with a reduced incidence of severe injury and abuse of children."[9]

Kids, families, and educators deserve a system that really works. Instead of mandatory reporting, we need *mandated support*, a term coined by JMACforFamilies to prioritize keeping families intact and reducing harm.[10] Mandated support in education includes both programming changes[11] and policy commitments.[12] Individual educators acting as mandated supporters practice strategies to start, strengthen, and sustain healthy, trusting connections with families. They leverage all available resources and prioritize students' bonds with their families. Just imagine what this would have meant for Miguel.

Ms. Hanover works in a district with a union-negotiated Parent-Teacher Home Visiting Project. She was trained to build authentic relationships and connect with families about their hopes and dreams. At the start of this school year, she reached out to the family of each student in her class, asking them to connect with her and the school social worker, Mrs. Tomas, at a mutually agreeable time and place. Ms. Hanover and Mrs. Tomas are compensated for every visit and always debrief together during dedicated staff meeting time.

Thanks to this program, Ms. Hanover knows that Miguel loves skateboarding at the local park when his older cousins are able to take him, struggles with fourth-grade reading but enjoys reading board books to his younger siblings, and is pretty picky about textures. Carmen shared the short list of foods he eats and clothes he wears. Ms. Hanover offered to review the school menu to try to find items that fit his needs and to follow up with cafeteria staff about possible substitutions.

During the visit, which Carmen agreed to have at her home, they also learned that Miguel's family was facing a lot of transitions. The baby was born just a few months after Miguel's father was incarcerated. In addition to their ongoing grief over his absence, Carmen returned to work earlier than she wanted. Mrs. Tomas suggested that Miguel join a bereaved student group that meets every other week. Ms. Hanover made a note to review opportunities to make "father" focused content inclusive.

Mandated supporters practice strategies to start, strengthen, and sustain healthy, trusting connections with families.

At the end of the visit, Mrs. Tomas invited the family to the upcoming orientation for the school-based health center. Since Carmen probably would not be able to attend because of work, Mrs. Tomas offered a phone call. On the scheduled call, the center's director, Mr. Pérez, explained how the health center works and encouraged the family to join. The school helped them enroll in Medicaid. Miguel's first visit to the center focused on his dental health. Later, each of his siblings got a regular checkup and pediatric vaccines.

In the third month of school, after Miguel was absent two days, Ms. Hanover reached out to his mother. Carmen was surprised; Ruben had been spending more time at the house, including to provide childcare for Miguel's siblings, but had not told her that Miguel was missing school. She texted Ruben while Ms. Hanover was still on the phone, and he admitted that he sometimes asked Miguel to stay behind with the kids on days he was feeling down.

"I'm so embarrassed," said Carmen. "I didn't know! He lost his job recently—that's been really bothering him."

Ms. Hanover asked about Miguel's cousins: "Miguel could benefit from a mentor, and we know that he works so well with them. If they agree to join the program, we could get them training and a small stipend for meeting with Miguel regularly." Carmen thought that would be great and named three cousins for the school to check out.

Two weeks later, Ms. Hanover noticed the distinct odor of marijuana trailing Miguel through the classroom. She asked Mrs. Tomas to reach out. Carmen agreed to a second visit, this time with Mr. Pérez. Ruben opened the door giggling and high. Carmen apologized for laundry all over the home and explained that her car was in the shop so she couldn't get to the laundromat. "It's getting so hard," Carmen lamented. "Ruben is almost too sad to help. I can't keep up." Mr. Pérez affirmed that he was there to help and suggested that Ruben join the health center. After bringing Carmen's youngest children to a few appointments, Ruben asked to start his second attempt at rehab, this time with a focus on depression.

Miguel's home life may not be ideal, but he's loved and cared for—and far better off than the vast majority of youth in foster care. Let's take a closer look at the challenges and harms of CPS's current policy architecture and how mandated support can improve outcomes for children and families.

Child Protective Services Doesn't Live Up to Its Name

Since the 1960s, CPS's work on child abuse has depended on mandatory reporting.[13] And since the 1970s, one federal law—the Child Abuse Prevention and Treatment Act—has been a major reason states require school personnel to be mandatory reporters.[14] Educators are among the most active mandatory reporters in the country, submitting about one in five reports overall,[15] yet they have some of the lowest substantiation rates. Just 10 percent of the time, CPS agrees that an educator's referral is for a true victim of child abuse or neglect.[16] Clearly, educators need more and different tools to meaningfully address student issues for at least the 9 in 10 times that CPS will not robustly engage. This is an incredible invitation to adopt mandated support—but first, let's continue to unpack current challenges.

Mandatory reporting does not have a great track record at school. It can interfere with effective family engagement and drive away the very families educators intend to help.[17] After a report, system-involved families are less likely to trust educators and schools, which are seen as regulating agents, leaving families feeling unsure where to turn.[18] Research in New Zealand has even found that mandatory reporting can deter students from disclosing abuse or attending school.[19]

After a report is made, CPS determines whether or not it will follow up. About half of reported families are selected for further investigation;[20] the rest are maintained on a sort of "watch list"[21] and usually receive no services or support.[22] An investigation is often traumatic, intrusive, and costly.[23] CPS workers, sometimes alongside police, scrutinize every aspect of a family's home and circumstances, including furniture, food, underwear drawers, and children's disrobed bodies.[24] Investigations are a big part of how CPS workers' roles changed in the 1970s from collaborative problem-solvers who may coordinate temporary childcare for a single parent undergoing surgery or housing assistance for a mother of four, to detectives who monitor a parent's progress.[25]

A caseworker's impressions during an investigation are used to label children either *victims* or *nonvictims*, and to establish next steps, which can include requiring training or counseling, changes to household routines, and family separation. CPS almost exclusively engages with low-income people. However, child welfare programming does not address many problems of poverty, such as help with food insecurity or housing instability. Instead, it focuses on parenting, such as a parent's expectations of their child, capacity to empathize, and use of punishment.[26] In fact,

Poverty, reframed as "neglect," precipitates far too many reports to CPS, with roughly one-third of children enduring a CPS investigation.

while poverty is clearly associated with CPS engagement[27] and poverty reduction may reduce CPS engagement,[28] CPS workers are trained to assess and change parents' behavior much more than they are prepared to change what informs, guides, and influences that behavior. For example, a 250-page federal toolkit for CPS caseworkers barely mentions poverty alleviation programs like housing vouchers, emergency rental assistance, nutrition support, or healthcare coverage.[29] In the words of a former caseworker, "CPS seemed only to manipulate, divide, or subtract. CPS could derail a life.... The remedial pathways we took often created more complications for families."[30]

One in five victims is removed from their home, as are 1.4 percent of nonvictims.[31] To what end? Many young people fare worse in government placements than they do with their families.[32] After entering foster care, some evidence indicates that children are more likely to experience sexual abuse, physical abuse, homelessness, and lack of access to healthcare than they did at home.[33] So

it is no surprise that family separation leads to some of the same poor educational outcomes as child abuse: poor attendance and low academic engagement and attainment.[34]

From subjective definitions of "abuse" and "neglect" to reporting, investigation, and family separation, CPS's work is at high risk of bias.[35] For example, 53 percent of Black children in the United States will be subjected to a CPS investigation before the age of 18.[36] They are therefore more likely than white children to enter and stay in the system and then face multiple, compounding traumatic events.[37] It is absurd to suggest that *every other* Black family abuses their children—but that doesn't mean that most or even many CPS caseworkers, hotline operators, or mandatory reporters harbor racist intent. Rather, this eye-popping number highlights the fact that Black families (and other families of color) are more exposed to harm and less protected from it.

Even if we could eliminate all bias from CPS, the current system would still fall short of its charge to uphold child welfare and improve safety. Researchers have found significantly higher risks of adverse health behaviors, mental illness, difficulty in school, and unhappiness among youth involved with CPS; they concluded, "we found no evidence that contact with the child welfare system improves child outcomes. Rather, CPS contact was associated with worse mental health and developmental outcomes."[38]

Further complicating matters, the child welfare workforce is overwhelmed by high caseloads due to inadequate funding and short staffing, as well as compassion fatigue and secondary trauma. A study in Ohio found that more than half of caseworkers met the criteria for posttraumatic stress disorder.[39] Not surprisingly, turnover is very high—estimated at 30 percent nationally (and much higher in some state agencies)[40]—and children's outcomes are worse when they have multiple caseworkers.[41] One researcher predicts that "the harm to families will continue and likely become more pronounced as the workforce continues to suffer."[42]

Mandated Support Focuses on What Works

Mandated support is a set of values, strategies, and policies that focus on a single goal: meeting kids' needs. Mandated support champions more ethical options and more effective tactics, including "real, concrete, material community support built on trust and care, not surveillance."[43] Because increasing children's connections to caring, supportive adults reduces the risk of abuse,[44] mandated supporters practice strategies to start healthy relationships, strengthen impactful bonds, and sustain trusting connections. They

- *Embed healing gestures into every interaction* with students and families as a solid foundation to build and reinforce relationships based on partnership, honesty, trust, and shared decision-making.[45]
- *Communicate the limits of confidentiality*. Talking with students or families about state requirements for mandatory reporting can sound like this: "Before we get started, I want to remind everyone that if at any point I have information about something that immediately and directly challenges student safety, I must share that information with appropriate authorities."
- *Support student privacy*. Communication and collaboration in deliberate teams is often essential to meeting complex and ever-changing student needs—but it does not require educators to become "trauma detectives" or to overshare students' personal stories.[46] Access to detailed and personalized student data should be limited to those who require it. Mandated supporters prepare colleagues who do not need detailed information with the basics necessary for helpful action. They conscientiously and nonjudgmentally consider disclosures, observations, and formal records.

Mandated supporters value family preservation and share power with families through communication and education. They leverage all available resources to bring material support to struggling families without government intervention, monitoring, or punishment.[47] More specifically, they

- *Raise awareness of local resources among all families*. Mandated supporters promote community wellness and combat stigma by making access to information universal. Proactive efforts to connect families to what they need can include a schoolwide flier campaign about summer meal sites; introductions to school-based health center staff at a relevant assembly; adding a list of helpful numbers to back-to-school messaging for all families; committing to translation services so that all key information is available in families' first languages; and embedding information about how trauma impacts bodies, brains, and behaviors into classroom instruction.
- *Collaborate to address the needs of those at elevated risk*. Multi-tiered systems of support call for informed assessments of student behavior, struggles, and known risk factors to connect students with additional support in a targeted area. Every school

Researchers have found higher risks of adverse health behaviors, mental illness, difficulty in school, and unhappiness among youth involved with CPS.

can benefit from a clear assessment of the skills and strengths of relevant school partners, programs, and staff, including professionals who work in counseling, family engagement, food service, nursing, psychology, social work, speech-language pathology, and therapy. Ideally, all schools would have a labor-management committee representative, a wraparound services coordinator, or other capable point person who knows what's available and helps streamline access for families.

- *Consider CPS consultations*. When a child is not in imminent danger, mandated supporters try to leverage CPS as a resource rather than as a regulator. Consultation calls to CPS are conducted before making a report. Such calls should be anonymized by withholding the names of the student, caregivers, and involved staff. Furthermore, consultations may provide more flexibility to share information about the whole child as well as family assets. A consultation might sound like this: "I'm calling because I work with a family whose child ___ (risks or challenges). This child also ___ (strengths). In my work and my colleagues' work with this family, we have observed ___ (assets and protective factors). I do not believe this child is in imminent danger with their family. I am concerned that ___ (unmet needs or unresolved issues). What supports and resources can you recommend to better promote this child's well-being? Also, I am a mandatory reporter in our state. Does this need to be formally reported?"
- *Make caregivers their first call and listen to families' concerns, responding with empathy, warmth, and understanding*. Mandatory reporting lends educators significant power over families. CPS can transform this power into harm. If, after exhausting other options, mandatory supporters are moving toward a report, they involve the family.[48] They communicate with caregivers about situations that could lead to a report, as

Past and Present

The Trauma of Family Separation

Family separation has a long, sordid history in the United States, with debilitating effects.[1] Removed children show increased trauma responses, including elevated rates of academic challenges, substance abuse, and mental illness.[2] Rather than being a low-risk intervention, separating children from their families is "universally negative"[3] and may have worse effects than neglect or doing nothing.[4]

For 400 years, family separation has been justified by rhetoric that poses certain parents—mainly parents of color—as undesirable, inferior, and morally suspect.[5] The story begins with the slave economy and African people torn from their homes and forced to go to the Americas. Amid the horrors of bondage, enslaved people honored familial connections and expected women to prioritize motherhood over freedom.[6] But enslavers would sell, or threaten to sell, children to keep mothers working.[7] Moreover, they used family separation as a punishment and deliberately severed the bonds that undergirded resistance efforts.[8] Although enslavement ended more than 150 years ago, today the government continues to disproportionately intervene in Black families: every fourth report to CPS is about a Black child and one in five children in foster care is Black.[9]

Starting in the early 1800s, the federal government targeted Indigenous families for separation to advance assimilation into the dominant white culture.[10] At military-style boarding schools, Indigenous children faced labor exploitation, sexual and physical violence, and humiliation.[11] By combining "all the harmful aspects associated with separation,"[12] boarding schools severed students from their communities, traditional practices, and first languages.[13] Recent research found that boarding school students—and their descendants—have had poorer physical, mental, emotional, and general health outcomes than Indigenous families without a relationship to boarding schools.[14] Indigenous activists shocked the nation in the 1960s and '70s with stories of families torn apart by removal. They catalyzed the 1978 Indian Child Welfare Act, but the legislation has failed to achieve its aims: Indigenous parents are up to four times more likely than non-Indigenous parents to have their children placed in foster homes.[15]

Poor, immigrant children were also targeted in the mid-19th century for removal and placement with "good, Christian families"[16] to assimilate and learn skills for good citizenship. Upon arrival to rural destination communities, the youth were often treated like human cargo on an auction block and expected to perform child labor. Sponsoring charities finally ended this "orphan train" movement (a misnomer since the majority of the children had parents) following stories of widespread trauma and abuse and a cultural shift that expanded the social concept of whiteness to include Catholic families. Deemed white, these families were more likely to be given aid than torn apart.[17]

Mental disability has been a justification for separating families since the nation's inception.[18] Grafted onto European values of community order, America's early response to disability was isolated confinement; if a family could not furnish an adequate attic or basement for the task, asylums, workhouses, and prisons served the public interest.[19] Over the next 200 years, these institutions grew in size and by reputation for their brutal handling of residents.[20] In the 20th century, once eugenics fell out of favor, the United States moved to zealous termination of parental rights in families with a mentally disabled caregiver.[21] Today, parental disability accounts for one in every five child removals by CPS.[22] Furthermore, nearly one-third of children removed by CPS have a disability.[23] Human Rights Watch has raised serious concerns about how low-income parents are punished with child removal when they struggle to access quality care for their disabled kids, as well as the ways that institutionalization and family separation thwart disabled children's development.[24]

Aren't 400 years of family separation and child trauma enough?

–C. P.

For the endnotes, see aft.org/ae/winter2024-2025/prax_sb.

well as their rights in potential next steps. When they make a report, they highlight the family's protective factors and confirm that the call operator can accurately repeat back details. They also inform the family that they are willing to act as a character witness to speak about their strengths.

It Will Take a Village

The truth is that most schools are not designed or resourced for mandated support. Most school districts do not employ specialized instructional support personnel—such as school counselors, nurses, psychologists, and social workers—at anywhere near the staffing levels required to meet students' growing needs.[49] Despite increasing interest and political commitments, only 5 percent of the nation's public schools are estimated to have the robust partnerships with families and community-driven wraparound services that comprise a community school[50] and thus provide the prevention infrastructure necessary for mandated support.[51]

Given these challenges, it's fair to ask difficult questions about how to make mandated support more than an idea: What if the situation needs immediate intervention? What if families do not accept support? What if I can't find the supports the family needs? What about my colleagues who are more concerned with compliance than with compassion? If the barriers to supporting are insurmountable, then keep the last two practices listed above in mind: consider a CPS consultation and, if reporting is necessary, make the report with the family.

We cannot "individual behavior" our way out of the structural problem of child maltreatment. Some of the most effective approaches to addressing child abuse are systemic changes: creating new, community-driven social environments;[52] tackling poverty;[53] and increasing family-educator connections through home visitation.[54] To start building toward a mandated support system, team up with union siblings and bargain for the common good. This contract negotiation approach focuses on what your community needs for human dignity, and it can sometimes improve educators' working conditions. AFT affiliates have used this framework to win contract language to better support families. For example,

- The Saint Paul Federation of Educators negotiated to adopt the national Parent Teacher Home Visits project model in 2010.[55] According to the collective bargaining agreement, educators who volunteer to participate receive four hours of training and meet at least eight families per year through visits that are "relation-based, focused on the hopes and dreams of the family."[56] Then, they document their visits and attend debriefs to inform collaboration with colleagues and increase family engagement. They also receive modest stipends.
- Educators in Boston observed that some people in their community—including students with disabilities, English language learners, and others who faced additional challenges during the COVID-19 pandemic—were struggling with homelessness. In 2022, the Boston Teachers Union negotiated a new partnership with the city and Boston Public Schools to address housing security. A resulting $50 million pilot program concentrates on housing 4,000 families, and the contract codifies a shared goal to eliminate student homelessness in five years.[57]

Mandated support is a set of values, strategies, and policies that focus on a single goal: meeting kids' needs.

Mandated support is not only the work of the education sector. We're fighting to upend poverty, transform structural oppression, and eliminate the scourge of child abuse. It won't be easy. But if we continue to require reporting of the slightest suspicion, to conflate poverty with neglect, to funnel marginalized families into government surveillance, and to remove children from their families, we're pursuing more problems than solutions.[58] We must rely on thoughtful, rigorous public health and social science research to guide how we build the world that children and families deserve. And we must make it simple to get—and give—support. □

For the endnotes, see aft.org/ae/winter2024-2025/prax.

Prepare to Become a Mandated Supporter

Join the AFT for graduate-level professional learning on student trauma to review and practice mandated supporters' essential skills. Participants review contemporary high-quality research in diverse academic traditions on how adversity can impact children's developing brains, bodies, and behaviors. They practice distinguishing between traumatic events, experiences, and effects; analyze student cases for opportunities for effective intervention; and collaborate with peers to develop strategies for a variety of situations. Visit go.aft.org/v63 to learn more about the union's student trauma course and other professional development options for educators.

–C. P.

Betrayed No More

How Morally Centered Schools Reduce Educators' and Students' Distress

By Wendy Dean and Rachel Schaffer

For too many educators, the idea of a morally centered school may seem like a fantasy—or be so novel a concept that it is hard to grasp. In this article, we describe such schools, which truly serve students' best interests by following a set of shared professional values, and how educators and their unions can help create them. But first, let's take a look at how things currently stand. The following four scenarios are drawn from interviews we conducted with 13 educators in five states. Although we have changed individuals' names and some key details, the fundamental truth of each educator's predicament remains clear.

Betrayal of Trust

One fall day at a Midwestern elementary school, Jane threatened to use a sharp object as a weapon against another student, Sally, as they were standing in line before school. Other students saw the incident and reported to their teachers that they felt unsafe.

Terry, a midcareer teacher, followed the district protocol: they accompanied Jane to the office, reported the incident, and expected that (per the policy) Jane's parents would be contacted and the school counselor would engage Jane in a series of sessions to help her apologize to Sally and change her behavior (along with determining if there were any underlying issues to address). Terry assured Sally that Jane would face consequences and that she and the other students were safe. Terry made those promises based on the clear district policies and procedures that were in place to maintain a safe environment in exactly this situation.

That day, though, all administrators and counselors were busy: addressing more severe behavior issues, gathering reading data for district meetings, filling out forms for state funding requirements, and addressing that day's substitute shortages. Because the school is under-staffed, no one called either Jane's or Sally's parents or rendered any consequences. Describing the situation, Terry cringed as they recalled their inadvertent "betrayal of [Sally's] trust because the principal was too busy."[1] They had assured Sally that Jane would be held accountable for her actions, and yet Jane returned to class within an hour. Terry summed up their despair: "Public education is falling apart, or it's being torn apart. I don't know what to hope for except maybe that we can piece it back together."[2]

Wendy Dean is a psychiatrist and cofounder of Moral Injury of Healthcare. She has published widely on occupational distress in healthcare and its impact on patients and is a coauthor of If I Betray These Words: Moral Injury in Medicine and Why It's So Hard for Clinicians to Put Patients First. *Rachel Schaffer has taught elementary school since 2014. She is a teacher leader working to elevate educators' voices and enhance public education for all students.*

ILLUSTRATIONS BY GABY D'ALESSANDRO

Partisan Polarization

Alex, a teacher in the Deep South, has felt in recent years as if his state school board has been working against educators. After adopting partisan state school board elections several years ago, voters have seemed to care more about the candidate's party than their expertise in education. As Alex explained, "I was a state delegate at the party convention a few years ago. Candidates for the state school board called me daily. I remember when one of them launched into talking about their platform: getting groomers out of education, supporting vouchers, parents' rights.… The usual extremist conservative talking points. When I shared that I am, in fact, a teacher, the candidate hesitated for only a moment before continuing to bash my profession. I asked for any proof of her claims, and she could not offer anything. Just 'I hear from people.' That's it. And she won the race."[3]

Before partisan school board elections, Alex believes candidates were held more accountable for their claims, agendas, and disparaging comments. Now, there are extremists who have become accustomed to questioning the morality of educators. "I am working day in and day out to help students succeed," Alex said. To "have a member of the school board echo some talking point from conservative rhetoric, it feels like I am swimming upstream. Constantly. Against a waterfall. It's exhausting."[4]

Scores Before Students

An elementary educator in the Mountain West, Blake, calculated that she had lost at least 24 instructional hours each year to administering tests and that students had lost dozens of hours of developmentally necessary play time (recess) in their district's push to meet benchmarks. Students may not be ready to learn certain material, but instead of taking time to build foundational knowledge, teachers must adhere to the district pacing guide. When this happens, Blake says, "students lose trust in you. I think students come in hopeful, with all this [implicit] trust in you. You build your [classroom] culture, you say, 'Oh, we're going to do this this year and you do this and then…!' But when they fail on an interim test and you have no time to help them, I think that they lose faith in grown-ups being there to help them succeed. I see it in their eyes—they just stop engaging. That's real."[5]

Structural Determinants of Education

Jalen worked for many years at an elementary school in a historically redlined* part of her district that was still severely under-resourced. She constantly felt pressure to get higher test scores, but her young students regularly came to school unprepared to learn because they were hungry and felt unsafe due to passing gang members in the neighborhood on the way to school. In addition, most were English language learners. The district pressured Jalen to increase student performance, particularly in math, but she knew that the curriculum was simply inaccessible to many of her students. When students performed poorly, they became anxious. Administrators, heedless of underlying challenges or Jalen's keen awareness of test scores, consistently reminded her how few of her students were proficient in math. Jalen said, "I can't do this to kids anymore. I can't teach a curriculum that doesn't meet their needs and then test them and tell them they're failing."[6]

Moral injury stems from broken trust, values conflicts, and unresolved miscommunications—like devoting time to test prep instead of joyful learning.

After years of feeling like she was failing her students, Jalen moved to one of the highest socioeconomic status schools in the same district. Her first year, she won a district award for students' high scores in math—not because her teaching was different, but because the students came to school well prepared and were growing up in a safe, supportive neighborhood.

* * *

What do these examples have in common? They are all situations that contribute to not only burnout but also moral injury. Burnout is no doubt familiar to all educators, but moral injury may not be. Let's examine each—and how they are related.

Burnout

Occupational distress, including educator distress, has been characterized as burnout for the last half century. Burnout often refers to that feeling of being overwhelmed and exhausted—and unable to do or be enough, no matter how hard one tries. But the concept of burnout is fraught with problems, beginning with a lack of definition discipline. One 2018 study reviewed 182 research papers and found at least 142 definitions for meeting overall burnout or burnout subscale criteria.[7] So, although there is much discussion of "burnout," it may not all be about the same thing. Secondly, many scholars and people in the workforce object to the label, rejecting its implication of individual frailty. And finally, there is often a qualitative dissonance with what workers feel.

It is time to rethink teacher distress to get to better solutions. As one workplace expert recently pointed out, "We tend to think of burnout as an individual problem, solvable by 'learning to say no,' more yoga, better breathing techniques, practicing resilience—the self-help list goes on. But … applying personal, band-aid solutions to an epic and rapidly evolving workplace phenomenon may be harming, not helping, the battle."[8]

Moral Injury

Moral injury was first defined by a psychiatrist working with combat veterans from the Vietnam War. Originally conceived as "betrayal by a legitimate authority in a high-stakes situation,"[9] it was later expanded to connote a transgression of one's deeply held moral beliefs[10]—for example, that all children deserve to feel safe and welcome at school, even if they are undocumented migrants or don't identify with the sex they were assigned at birth. These two elements—betrayal and transgression—are often viewed as

*To learn about redlining, see "Suppressed History: The Intentional Segregation of America's Cities" in the Spring 2021 issue of *American Educator*: aft.org/ae/spring2021/rothstein.

the external and internal sources of moral injury, respectively, but it may be more helpful to view them as having a stimulus and response relationship: a betrayal to which one acquiesces, resulting in transgression of one's moral beliefs. In teaching, those beliefs are grounded in a commitment to meeting students' needs.[11] As the opening vignettes make clear, teachers are deeply committed to their students—but as constraints increase on their ability to teach in ways that will help their students thrive, the situation is becoming untenable. For one educator, "Becoming a teacher to help students, only to be forced to participate in a system that fails them at every turn, creates moral injury."[12] Another teacher said that he "could not participate in a system that requires me to ignore student needs (recess and play) in the name of better scores."[13]

Labeling educators' appropriate distress a "mental health" issue, rather than a workplace issue that causes moral injury, fragilizes the professional workforce.

Distinguishing moral injury from burnout helps us better understand each. Burnout arises from demand-resource mismatches or operational challenges—like excessive class size, too much administrative burden, or too little lesson prep time. Moral injury stems from relational ruptures of broken trust, values conflicts, and unresolved miscommunications—like devoting instructional time to test preparation instead of joyful learning. Burnout and moral injury are best viewed as independent drivers of distress, though they often co-occur.[14] Early data suggest they occur concurrently often enough that when one is present, the other should be queried.[15]

Moral injury is not an easily compartmentalized experience—making it difficult to study—and research on job impacts is embryonic (even within the military, where the phenomenon has been studied for three decades). Based on our understanding of this limited literature and our experience studying moral injury in healthcare and education, we posit that impacts on students and teacher job performance may include disengagement, errors of judgment with student discipline or curriculum, reduced effectiveness in the classroom and in collaborative work, and lower perceived agency. This is an area in urgent need of empirical study.

But even without a clear understanding of the impact of moral injury, awareness of moral injury and how it differs from other conditions is crucial. In discussions of workplace well-being, concerning trends have emerged related to (1) folding distress of all types into the encompassing category of "mental health" and then (2) "reducing the stigma" of that mental health issue. We find this concerning because pathologizing a normal response (frustration, anger, withdrawal) to an abnormal situation (betrayal) harms individuals and weakens systems. Labeling educators' appropriate distress a "mental health" issue, rather than a workplace issue that causes moral injury, fragilizes the professional workforce. Similarly, focusing on "reducing the stigma" of what is actually moral injury effectively lets education systems off the hook for creating the conditions that elicit these normal—albeit unideal—responses to problematic environments. "Stigma" shifts the problem and the responsibility for fixing it onto society, rather than holding the systems that created those conditions responsible for improving them. While mental health care and supportive well-being programs should be viewed as baseline conditions for the difficult work of being an educator, moral injury won't be fully addressed or solved in a therapist's office; it depends on reshaping education systems into supportive, empowering, resilient environments and reshaping our society to value working families.

The Roots of Teacher Distress

Teaching in the United States has always been very hard work for too little pay. Today's teaching crisis is about more than these longstanding problems, though. Some of today's distress has roots in the financial crisis of 2008 and the resulting state budget shortfalls, pink slips, unfilled positions, larger class sizes, and student distress. As of the 2020–21 school year, most state education budgets had not recovered: 39 states still devoted "a smaller share of their economies to their K–12 schools than they did before the 2007–09 recession."[16] Not surprisingly, college students have been shying away from the profession in part because of instability and low wages.[17]

Similar to what happened in healthcare, the pandemic highlighted and magnified challenges in the US education system. At the onset of the pandemic in March 2020, 36 percent of K–12 workers reported feeling burned out, compared with 28 percent of other workers.[18] When education pivoted to online learning, most schools "lacked teacher training, appropriate software, laptops, [and] universal internet access and, in many cases, students lacked stability and a supportive adult at home to help."[19] In the 2021–22 school year, teachers were scrambling to make up missed learning while juggling the challenges of hybrid learning. By 2022, 44 percent of K–12 workers—and 52 percent of teachers*—felt burned out, compared with 30 percent of all workers.[21]

Across the country, the stressors of the pandemic—illness, deaths, job loss, economic insecurity, rising inequality, frustration

*Another study found a similar gap but higher overall percentages in 2022, with 59 percent of teachers and 44 percent of working adults feeling burned out.[20]

with mitigation strategies, and fear of the unknown—led to dissatisfaction with public services and created conditions for social unrest.[22] Public schools are among the most proximate and accessible representations of government in communities, and they are often the most immediate arena in which tensions play out. As Alex's story highlighted, local and state school boards became a flashpoint as parents unleashed their frustrations about pandemic fallout in a barrage of partisan politics and occasional threats of violence.[23] Book bans and attacks on mask mandates, teaching honest history, social and emotional learning, and equity policies all filtered into the classroom—pulling educators' energy and attention from meeting students' needs. What already felt like an imperfect compromise about what and how they were teaching became a nearly impossible minefield of obstacles (many entirely fabricated, like claims of teaching the law school concept of critical race theory to children), promulgated by those without education expertise. And all of this piled on top of the longstanding lack of action on real problems regarding school and neighborhood safety, instructional time stolen for high-stakes testing (and general disregard for teachers' expertise), and families' needs for affordable, good-quality housing, healthcare, childcare, and nutritious food.

Moral injury won't be solved in a therapist's office; it depends on reshaping education systems into supportive, empowering, resilient environments.

The United States is at an education crossroads. As of July 2024, just over 400,000 teaching positions—one in eight nationally—either were filled by teachers who are not fully certified or were unfilled.[24] Appropriately, effectively, and quickly addressing teacher distress is essential.

Solutions

Getting solutions right is what professional workforces deserve. But a word of caution is required. Frequently, organizational leaders are themselves overwhelmed by obligations and suffering from moral injury and burnout. Less frequently, they think no one will notice a half-hearted effort if they message it just right. In either case, they may *carewash* (a derivative of the term *whitewash*) by dissembling their words or actions, trying to put a positive spin on a broken promise, stated claim, or unmet standard. The workforce quickly parses such discrepancies, eroding psychological safety and inciting cynicism. As one author put it, "carewashing, whether it's used to create a falsely positive brand for the employer or is simply the result of tone-deaf leaders, inevitably leads to erosion of trust in leadership as well as a reduction in employee engagement, job satisfaction, and well-being—and eventually, to employee turnover."[25] One teacher in the Mountain West stated, "They'll send out a weekly email saying 'Have a Coke' or 'Make sure you're taking walks' and 'just take a break.'… My version of self-care would be for you to listen to me and for you to collaborate with me."[26]

Instead of carewashing, educators deserve *morally centered organizations*. A year ago, 50 moral injury scholars and leaders shared what they believed represents a "non-morally injurious" workplace.[27] Those experts recommended organizations with cultures predominated by a values-based framework that balances compliance-centric rules with an internalized set of shared professional values, encouraging intuitive decisions that are "right" for serving students' best interests. Organizations with cultures that inspire people to excel at teaching, and operational environments that facilitate their doing so, are places where educators thrive. In such settings, teachers are free to exercise their accumulated training and wisdom as recognized professionals in their areas of expertise.

Morally centered organizations, moreover, accept their role in managing and mitigating the risks of moral harm. Leadership recognizes that human activities will at times result in unavoidable moral challenges and accepts that they can—and must—minimize avoidable moral challenges, like administrative encroachment on teachers' decision-making (such as whether to spend additional time building foundational skills rather than adhering to district pacing, or how to conduct classroom debates and to define the scope of content to be considered).

Finally, morally healthy organizations welcome internal feedback as essential to continued, aligned growth and have the courage to stand up to external pressures from boards, legislators, or regulators that threaten to increase the risk of moral injury to their workforce.

Union Voice

Teaching has long been a heavily unionized profession, which helps give a collective voice to a predominantly female workforce[28] at risk for disempowerment. That's crucial for mitigating moral injury because "betrayal by a legitimate authority" puts the individual seeking mitigation in the difficult position of calling out the missteps of those in power. It takes rare courage to do that; for most, the stakes are too high, so they stay quiet. In contrast, adding to a collective voice empowers teachers. While unions typically have the strongest protections for worker voices and the most leverage at the workplace, additional formalized bodies for speaking collectively include professional societies (like associations dedicated to

Educators deserve to have their voices heard, their calls for adequate resources heeded, their expertise respected, and their safety protected.

subject-matter teaching and institutional leadership groups such as the faculty senate). Ideally, all groups representing educators would band together to win the resources and conditions their students need.

How does one advocate for mitigating moral injury at the bargaining table? The following points may be useful to consider or adapt.

1. The organization must conduct audits of key performance metrics related to working conditions, such as job satisfaction surveys, retention interviews, exit interviews, and absenteeism and turnover data. Whether or not the organization conducts such audits, the union should also conduct retention and exit interviews and gather information on educator job satisfaction.
   - Yearly updates to action plans addressing the findings should be developed in collaboration with workforce representatives.
2. The organization must invest in measuring not only burnout but also moral injury.[29] The results must be shared with the workforce in a timely way. With or without the organization's support, the union can measure burnout and moral injury and share its findings with staff and management.
   - Risk and management strategies for moral injury must be communicated freely with the workforce and must be informed by input from educators and staff.
3. Related to moral injury is the workforce's physical and psychological safety, which the organization must assess, also sharing results in a timely way. Again, the union can do this with or without the organization's help.
   - In school environments that educators and staff deem safe, plans to review safety could be developed annually. In unsafe environments, collaboratively developing, acting on, and updating safety plans should be a top priority. As an extension of psychological safety, and to ensure whistleblowers have appropriate support and recourse in the event of retaliation, the union should inquire about whistleblower experiences when speaking up and ensure adequate resources are available for educators. (In states or districts that are not union friendly, the union may also want to involve a disinterested third party.)
4. The organization must ensure adequate mechanisms are in place to empower workers at all levels to discuss moral and ethical dilemmas in the workplace. This, of course, is another key duty the union can take on when the organization does not (yet) recognize its importance.
   - The union may want to establish a committee to determine what mechanisms make the workforce comfortable with such discussions, then bring its recommendations to management.
5. Processes for developing solutions to prevent avoidable moral injury risks and mitigate unavoidable risks must have meaningful engagement from all levels of the workforce (e.g., through labor-management partnerships or other similar mechanisms). Solutions development must be appropriately resourced to support strategy development, implementation, and sustainment.
   - Ideally, the community would also be fully engaged in addressing moral injury. Whether creating a community school,* voting to increase funding for schools, or advocating for legislative changes, the community is essential for meeting students' needs and thus addressing educators' challenges.

The occupational distress described by the teachers whose concerns open this article, sadly, reflects the moral injury that is all too common in education. These educators knew what their students needed. They had the education, experience, and expertise to provide it. But constraints outside their control prevented them from teaching in their students' best interests. This was more than being asked to do too much with too little. It was breaking their promise to the students entrusted to them every day.

We can and must do better. Our students deserve excellent schools where they learn joyfully, solve problems collaboratively, and experience the wonders of the world—and their local communities—through a rich, well-rounded curriculum. And our teachers and school staff deserve to have their voices heard, their calls for adequate resources heeded, their expertise respected, and their safety protected. Together, we can fight for morally centered organizations where all these conditions are met—giving students, families, and educators the freedom to thrive. ☐

For the endnotes, see aft.org/ae/winter2024-2025/dean_schaffer.

*For several articles on community schools, see *American Educator*'s subject index: aft.org/ae/subject-index#community-schools.

Supporting Educator and Student Well-Being

With dire staffing and resource shortages, rising school violence, extremists' attempts to ban books and narrow curriculum, and increasing numbers of students with mental health and behavioral challenges, many educators feel exhausted and undervalued. They—and their students—need well-being supports like never before. Share My Lesson has devoted several resources to help educators prioritize their well-being and infuse joy into their classrooms.

Fill Your Own Cup First

To best support students' social and emotional needs, educators must first care for their own. That's why SML added five new, for-credit wellness webinars in 2024 to help educators prioritize self-care. Two of the courses focus on better understanding educator stress and the need for a dedicated well-being routine. In "Be Healthfully Present: Supporting Your Own Well-Being," educators learn to assess their occupational health and quality of life, understand the unique hazards of working in education and their impact on well-being, and identify health-promoting ways to cope with stress and trauma. In "Holistic Approach to Self-Care: Creating a Personal Wellness Plan," AFT national trainer Katherine Dorman shows how to create a personal self-care routine that addresses the physical, psychological, emotional, and spiritual dimensions of well-being and empowers educators to thrive. All five wellness webinars are available at go.aft.org/goe, and more will be added soon.

For a fun way to kickstart your self-care routine right where you are, check out SML's "Self-Care Wellness Bingo Card," complete with practical activities—including "spend 10 minutes journaling," "practice positive affirmations," and "disconnect from work emails after hours"—that prioritize educator well-being.

Infusing Joy into Classroom Spaces

Educators can support students' well-being through classroom and curriculum strategies that help students express their emotions and positively engage with each other and their learning. With "5 Ways to Spark Joy in the Classroom," SML partner Proof Positive: Autism Wellbeing Alliance gives ways to foster a joyful classroom environment, which enhances student engagement and builds resilience. Strategies include brain breaks with exercises to reduce stress and recharge students and educators, and a "joy jar" of simple activities for anyone who needs a positivity boost.

In "Make It Awkward: Connecting with Students and Finding Joy," frequent SML contributor Amber Chandler writes about the importance of establishing caring relationships with students. Through connecting in small ways—using silly conversation starters, creating a classroom board highlighting students' favorite activities, and celebrating and validating their accomplishments—educators can create opportunities for joy and normalize students expressing their emotions.

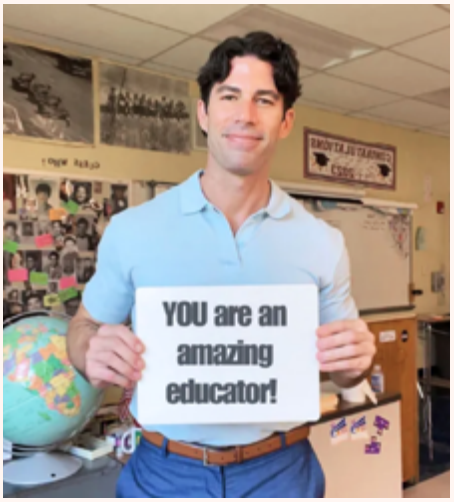
"A Trusted Space: Where Healing Happens, Resilience Grows, and Learning Happens Naturally" stresses that educators must be emotionally healthy and supported to catalyze emotional health and academic success in students. In this webinar, SML partner All It Takes shares resources to help educators begin with their own well-being and then create a classroom atmosphere where students feel heard, safe, and seen, and experience positive interactions with peers and teachers that enable learning.

Remember: You Are an Amazing Educator

A Post-it note written by a "challenging" student changed history teacher Nicholas Ferroni's career, giving him the encouragement to stay in the classroom just as he was feeling so burned out and exhausted that he was considering leaving. In the webinar "You Are an Amazing Educator," Ferroni draws on two decades of teaching experience to share tips on deepening relationships with students, building a positive classroom environment, helping students navigate social-emotional issues, and preventing burnout. Most importantly, Ferroni reflects on the past few years—the hardest of many educators' careers—and offers the encouraging message he drew from that Post-it note: "You matter to your students, and you're doing an amazing job."

Do you have resources you'd like to share? SML makes it easy! And if you have ideas or requests, reach out to content@sharemylesson.com.

–THE SHARE MY LESSON TEAM



Recommended Resources

Be Healthfully Present: Supporting Your Own Well-Being
go.aft.org/i62

Holistic Approach to Self-Care: Creating a Personal Wellness Plan
go.aft.org/rqm

Self-Care Wellness Bingo Card
go.aft.org/xqk

5 Ways to Spark Joy in the Classroom
go.aft.org/nth

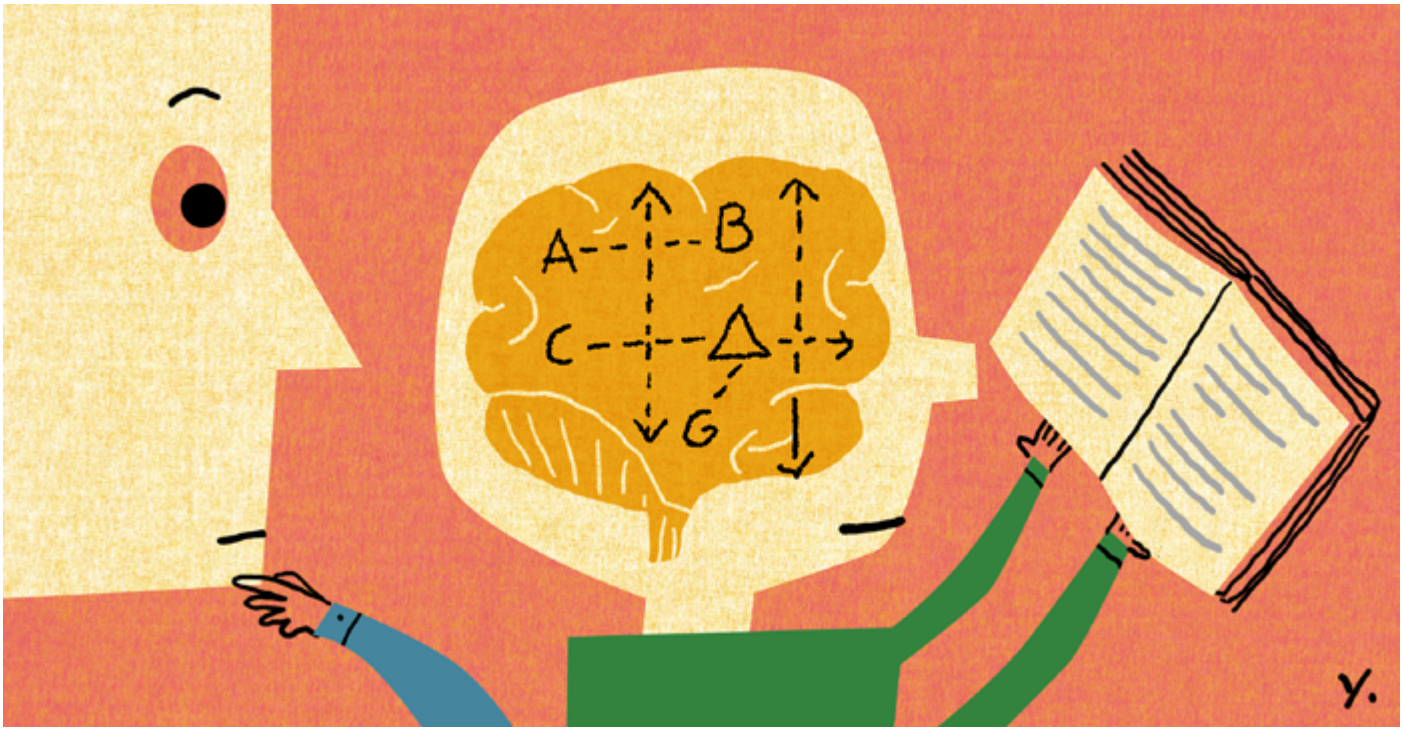
Make It Awkward: Connecting with Students and Finding Joy
go.aft.org/2lr

A Trusted Space: Where Healing Happens, Resilience Grows, and Learning Happens Naturally
go.aft.org/330cb5

Your Reminder: You Are an Amazing Educator
go.aft.org/jw0

Rethinking Reading

Differentiating Comprehension from the Components of Reading



By Hugh W. Catts and Alan G. Kamhi

"How can this be?" This was the response of principal Jane Avery when she saw her school's most recent third-grade reading scores. Three years ago, she worked with her primary grade teachers to adopt and implement a new reading curriculum. This curriculum was based on the "science of reading" and included systematic and explicit instruction in phonics. Ms. Avery expected that the curriculum would lead to greatly improved scores on the state reading exam. She was shocked to see only a small improvement.

Ms. Avery is not alone in her expectations. Many others have seen the recent emphasis on the science of reading as the answer to America's "reading crisis." This view is highlighted by journalist Nicholas Kristof in his article, "Two-Thirds of Kids Struggle to Read, and We Know How to Fix It."[1] He argues that neuroscience and behavioral studies demonstrate that explicit instruction in phonics is critical for most children to learn to read, and that the limited inclusion of this instruction has led to a large portion of children performing below the proficient level on state and national assessments of reading.

Indeed, researchers have made significant progress in our understanding of how children learn to read, and this work is having an impact on education policy and practice. Grassroots efforts and other advocacy have led to the vast majority of states adopting policies designed to improve the reading outcomes of all children, including those who struggle to read.[2] Whereas these policies consider various aspects of reading, much of their emphasis has been on developing *word reading* accuracy and fluency through explicit instruction in phonics. Of course, word reading is critical to reading achievement, but reading involves much more than recognizing the words on the page. Students must also comprehend what they read. Research within the science of reading has investigated what is involved in comprehension and how children learn to understand what they read. Some of the findings from this research have been incorporated into educational policy, but not all that is known from research has been implemented in the classroom or included in public policy.

Many educators view comprehension as a component of reading and one of the pillars of reading instruction. This view is an outgrowth of the report from the National Reading Panel (NRP).[3] This panel was commissioned by Congress in 1998 to examine research on reading instruction. Initially, the panel divided this

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ILLUSTRATIONS BY JAMES YANG

research into work on alphabetics, fluency, and comprehension. In the report, alphabetics was further divided into phonological awareness and phonics, and comprehension was divided into vocabulary and text comprehension. Over time, these components, along with fluency, became known as the *big five* or the *five pillars* of reading instruction. Today, much of reading instruction in the United States is guided by this component model of reading. In fact, a recent report by the Albert Shanker Institute on reading reform indicated that 34 states included reference to the five pillars of reading instruction in their state legislation.[4]

Whereas the component model proved to be useful for reviewing research in the NRP report, it has significant limitations for guiding instruction. One limitation is that it can give the impression that the five components are independent and can be taught individually. This was not the intent of the NRP. The panel divided research into the individual components to examine whether each component contributed to learning to read independent of the others. In practice, however, the components are generally best taught together in an integrated fashion. That is, phonological awareness is best taught in the context of phonics, and vocabulary in the context of comprehending a text.

A more significant limitation is that including comprehension (and vocabulary) along with other components gives the impression that comprehension is skill based and similar in complexity and malleability to the other components. The model also implies that like phonics, comprehension can be explicitly taught, and once acquired, can be applied to all texts. But comprehension is not a skill or set of skills; rather, it is a complex multidimensional ability. In fact, reading comprehension is one of the most complex activities that we engage in on a regular basis, and our ability to do so is dependent upon a wide range of knowledge and skills.[5] These include relevant background knowledge and reasoning abilities. Also, like listening comprehension, it is dependent on well-developed language abilities, including not only vocabulary knowledge but also an understanding of grammar and text-level structures (e.g., pronoun referencing and story structure). In addition, it is influenced by the nature of the text being read (e.g., its topic, complexity, and cohesion) and the purpose of reading (e.g., to study for a test or evaluate an opinion piece). Finally, it is acquired not in a few short years, but over one's lifetime. For these reasons, comprehension needs to be differentiated from skill-based components of reading and treated as the complex behavior it is.

Redefining Reading

The idea of differentiating comprehension from the other components of reading was suggested over 15 years ago by Alan Kamhi (the second author).[6] He argued that many assessments of reading conflated word reading accuracy and fluency with comprehension, which could lead to misconceptions about why children performed poorly on reading tests. Was it due to their inability to accurately or fluently read words, their inability to comprehend, or both? To address this problem, he argued that reading should be viewed narrowly as just word recognition. This narrow view of reading would include the components of phonological awareness, phonics, and fluency. Comprehension (and vocabulary) in this view is treated as a separate and distinct cognitive process and ability. In a companion article, Hugh Catts (the first author) argued that adopting a narrow view of reading leads to a broader view of comprehension, one that goes beyond skill-based notions and recognizes the similarity of reading and listening comprehension.[7]

In proposing and advocating for this narrow view, we had no expectations that it would be widely accepted by educators or policymakers because the skill-based approach to comprehension has long been entrenched in the research and educational communities. In recent years, however, there have been significant advancements in the science of how to teach and assess comprehension that are beginning to impact educational practices. At the forefront is the movement toward providing integrated comprehension and knowledge instruction within content-rich literacy curricula. In these curricula, which are often implemented during English language arts (ELA) class time, students are taught the appropriate strategies (i.e., ways of thinking), vocabulary, and language needed to understand texts on subject-specific topics drawn from science, history, and the arts as well as more traditional ELA content. This instruction is also combined with oral discussions, hands-on activities, and writing opportunities with the goal of facilitating literacy and increasing knowledge. This is similar to the broad view of comprehension that we had advocated for in our earlier papers.

Knowledge lays the foundation for building our understanding of text and provides an anchor for holding new information in memory.

The focus on knowledge is important because of the critical role it plays in comprehension (both reading and listening comprehension).[8] Knowledge lays the foundation for building our understanding of text (or speech) and provides an anchor for holding new information in memory. It also helps us determine the specific meanings of words in context (e.g., *pitcher* as person or object) and allows us to make inferences and fill in details that are not explicitly stated in the text. In addition, with increased knowledge, students tend to have more interest in a topic and to be more motivated to read about it.[9] But despite the importance of knowledge, it has typically been neglected in comprehension instruction, which has focused primarily on teaching domain-general reading strategies and general vocabulary.[10] While this instruction has been shown to be effective in some controlled studies,[11] educators have over-relied on it, and it has not led to expected improvement on state and national tests of reading. Why? These tests rely heavily on knowledge, so students with limited knowledge of the topics chosen by test developers are at a great disadvantage on these assessments.[12]

Researchers who have recognized the importance of knowledge have begun to examine the effectiveness of content-rich

literacy instruction in the classroom.[13] Systematic reviews of this research show that content-rich literacy programs successfully increase vocabulary and content knowledge, as well as performance on standardized tests of reading comprehension.[14] In response to this research and related advocacy, commercial ELA content-rich literacy programs (e.g., Core Knowledge Language Arts and EL Education) are being adopted in schools across the country.* These programs teach literacy within units focused on various content areas. They also include word reading instruction or supplement their programs with standalone word reading programs. Whereas these ELA programs teach a variety of topics in science and social studies, they are not considered to be a substitute for science, social studies, or other disciplinary instruction that is intended for content blocks. Also, it is not uncommon for a publisher to offer both an ELA content-rich literacy program and fully developed disciplinary instruction in science and/or social studies. Unfortunately, there is typically not enough time in the school day for both, and disciplinary instruction in content blocks is often left out of the primary grades in favor of ELA literacy curricula.[15]

Given these developments, one might ask why schools need both an ELA content-rich literacy curriculum and disciplinary instruction in content blocks. ELA content-rich literacy programs do systematically build knowledge in content areas, but because of their more limited scope, they cannot develop broad and deep knowledge bases over time as well as disciplinary instruction can. So, why not integrate literacy instruction within disciplinary instructional blocks? Although it would be a major conceptual shift for our nation's elementary schools and would require a complete revamping of curricula, teacher preparation, and professional development, this seems feasible in the primary grades where the same teacher is responsible for both disciplinary and ELA instruction. It would also provide more time in the school day for disciplinary instruction that has been reduced to accommodate ELA instruction.

Integrating comprehension within disciplinary instruction would actually give attention to the primary purpose of comprehension in schools, which is learning. Taking a content-based approach to comprehension instruction allows the teacher to focus on knowledge acquisition using teacher-directed and student-driven discourse, multimedia presentations, and written materials, all of which involve comprehension. Children would still be taught how to best understand what they read, but this would be done in the context of learning. Of course, the purpose of reading in school goes beyond knowledge acquisition and includes learning to enjoy and appreciate literature. But there is no reason to think that comprehension could not be taught purposively in such a context as well, especially if children's literature were carved out as its own discipline.

James Kim, director of the READS Lab at Harvard University, and his colleagues have recently provided some support for this learning-based approach to comprehension instruction. They developed a content-rich literacy curriculum, Model of Reading Engagement (MORE), that was initially implemented within ELA in the primary grades. But subsequently they moved to delivering their curriculum within the supplemental science and social studies content blocks with the intent to both improve literacy and build domain knowledge and vocabulary across grades. They view knowledge as a tree in which different branches represent different aspects of knowledge, each involving increasingly focused topics. Their curriculum is designed to lay a foundation of knowledge (e.g., scientific study of the natural world) and then transfer this knowledge to more specific but thematically related topics (e.g., how paleontologists study the fossils of dinosaurs and their extinction) in subsequent lessons. In doing so, vocabulary learned in one unit builds on that from previous units and supports vocabulary in future units. In a recent study, approximately 2,800 children in grades 1–3 across 30 elementary schools in North Carolina received the MORE curriculum.[16] Results showed that the children participating in the MORE curriculum outperformed a control group on science vocabulary across grades and at the end of grade 3 demonstrated significantly better reading comprehension on science texts and on the state's standardized reading test (which has texts on a variety of topics). Furthermore, gains on the state's standardized reading test were sustained through the end of grade 4 (which was the highest grade assessed in this study).

Assessing Comprehension

Separating comprehension from the other components of reading (alphabetics and fluency) also has relevance for the assessment of reading. Differentiating assessment of word reading and comprehension was one of the primary reasons for introducing the narrow view of reading in the first place. Since *reading* may refer to one's ability to recognize or decode words or one's understanding of printed texts, it can be especially confusing to interpret students' poor performance on high-stakes reading tests that assess word recognition and reading comprehension. Poor performance could be due to difficulties in word recognition, comprehension, or both. Even if educators do not embrace the narrow view of reading, it is essential that their reading assessments differentiate word reading and comprehension. This differentiation is necessary for providing effective instruction and intervention based on their students' specific word recognition and comprehension abilities.

Reliable and valid tests of word reading (and phonological awareness) are widely available. These can also be supplemented with standardized oral reading fluency measures. Educators and policymakers in other countries have gone further and mandated tests of word reading for early identification of difficulties. For example, educators in the United Kingdom and Australia use the "phonics screening check," a brief assessment of decoding skills using pseudo-words. Students who do not perform well on this screening are provided with additional support and instruction to

*The Knowledge Matters Campaign offers details on content-rich curricula at knowledgematterscampaign.org/explore-curricula.

improve their decoding skills. Given the decentralized education system in the United States, it is unlikely that a specific assessment of pseudo-word reading could be instituted widely in this country. But progress monitoring tools of word decoding, sight word reading, and oral reading fluency are widely available and in frequent use. Careful attention to the results of these measures, along with those from standardized assessments, could identify students who have problems in alphabetics and/or word reading fluency alone or in combination with difficulties in comprehension.

Because of its complexity, assessing comprehension is a much more difficult task than measuring word reading. There are numerous standardized tests of reading comprehension—and these assessments can lead to very different scores for the same student. For example, one study showed that, on average, students scoring below the 10th percentile on one comprehension measure had only a 43 percent chance of being below the 10th percentile on each of three other comprehension measures.[17] Whereas this finding is likely the result of a number of factors, it is at least partially due to the *domain-specific* nature of comprehension. That is, these tests contain passages on various topics, and one's knowledge of these topics can have a significant impact on one's comprehension. If a child knows a lot about a specific topic, such as trains, and very little about another topic, such as sloths, then that child's reading comprehension will be better with texts on trains than with texts on sloths. As a result, it is difficult to reduce comprehension to a single score because it is not a single ability—it's a domain-specific ability.

Concerns surrounding knowledge have led to the proposal that comprehension is best assessed in the context of content that has been taught. This approach has been implemented in a small number of districts in Louisiana as part of the Every Student Succeeds Act assessment pilot program. This program allows states, with approval by the US Department of Education, to pilot new and innovative assessments in lieu of current state exams. In these Louisiana districts, a multiyear pilot project uses a new humanities assessment that draws from texts and topics that are included in the state's recommended curriculum.[18] The assessments measure what students have learned about humanities as well as how proficient they are in reading and writing about the topic.[19] Unfortunately, the program was interrupted by the pandemic and progress has been slowed further by limited adoption beyond the initial districts. A primary reason for the limited adoption is districts' unwillingness to participate in a project that only involves selected grades.[20]

Despite the implementation challenges, there are significant advantages of content-aligned assessments of reading comprehension over traditional domain-general assessments. Primary among these is that students are given the opportunity to acquire relevant background knowledge prior to assessment. This is particularly important for disadvantaged students who often lack the knowledge required by high-stakes reading assessments. Teachers also benefit because they can embed specific curricular content into their literacy instruction—and they can prepare students for the test by teaching important academic content, not drilling children in test prep. An assessment that is matched to the curriculum also places direct attention on learning. Students have the opportunity to learn from content-rich curricula and to be assessed based on what they have learned. This is obviously much better than being tested with *domain-general* measures of comprehension (i.e., texts on a wide variety of unpredictable topics) that don't necessarily assess the content that is actually taught in the classroom.

In conclusion, one might ask: Would students perform better on high-stakes tests of reading if we differentiated comprehension from other skill-based aspects of reading, taught it in content-rich curricula, and assessed it in content-aligned assessments? As mentioned above, there is a growing body of evidence showing that content-rich literacy instruction leads to improved performance on standardized tests of comprehension. But is this what we really want to know? Should we not be asking how much students have learned about science, social studies, and other subjects from what they read and how well can they write and talk about this knowledge? If we could show strong performance on such measures, wouldn't our current high-stakes reading tests be irrelevant?

Content-rich literacy programs increase vocabulary and knowledge, as well as performance on standardized tests of reading comprehension.

We recognize that widespread replacement of domain-general high-stakes assessments of comprehension with content-aligned assessments is unlikely to happen in the near future. There are many significant challenges to overcome, including the effort and expense of creating assessments that are aligned with various content areas across multiple grades. As was discovered in Louisiana, this is difficult to do even one grade at a time. Content-aligned assessments would also need to accommodate flexibility in curricular choice, either by using publisher-designed assessments specifically aligned with the curriculum or by having educators create assessments that match the content taught in the classroom. In addition, new regulations or mandates would need to be enacted at the state and federal levels to allow for the adoption of content-aligned assessments. While successfully meeting these challenges in the near future seems quite unlikely, we are hopeful that a growing number of administrators and educators will recognize the limitations of high-stakes assessments of reading that conflate word reading with comprehension, and that this recognition will cause them to place more value on content-aligned measures of reading and learning. If this occurs, educators like Ms. Avery should be pleasantly surprised by how well their students are learning from what they read. ☐

For the endnotes, see aft.org/ae/winter2024-2025/catts_kamhi.

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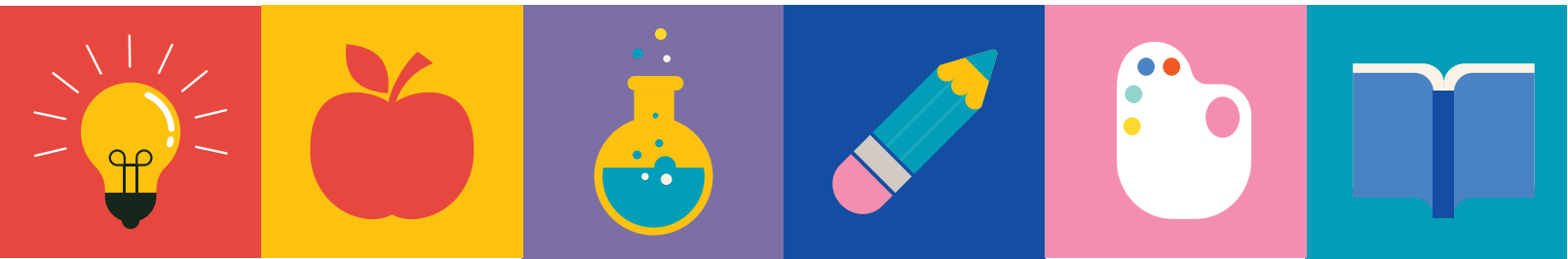
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