

## GUIDANCE FOR PRACTITIONERS

# Supportive School Systems for Newcomer Immigrant Youth with Trauma Exposure

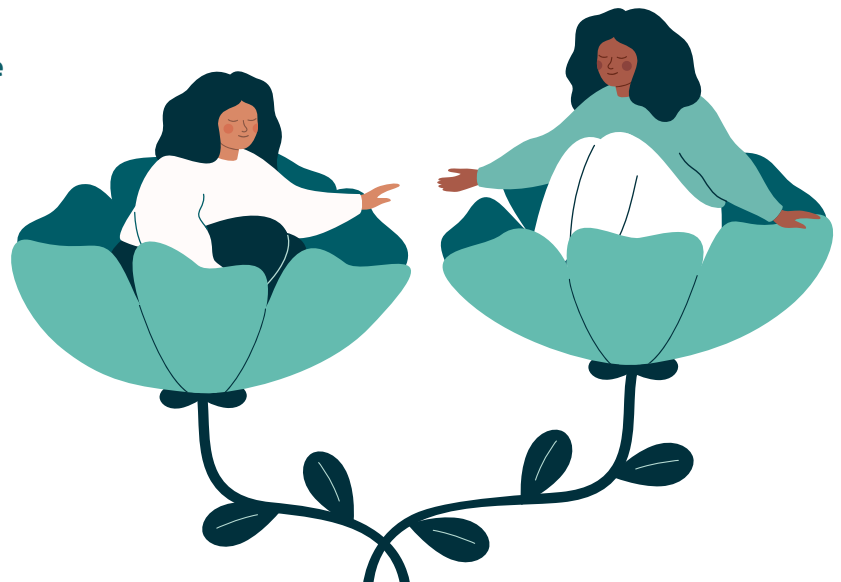
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School districts across the United States are enrolling a growing number of newly arrived immigrant students (Culbertson et al., 2021). Newcomers are very diverse, coming from different countries, cultures, and languages. They have diverse socioeconomic and legal statuses and may include refugees, asylees and asylum seekers, unaccompanied minors, undocumented youth, and others. Newcomer students and families bring a wealth of strengths and assets to recognize and draw upon in a school setting. These children and youth (as well as their families and communities) can experience tremendous adversity and stress in their journeys to the U.S. and upon arrival. Schools have the potential to create safety and belonging while supporting student and family access to effective educational experiences and community resources, including mental health services when necessary (Patel et al., 2023).

Not all immigrant youth and newcomer students arrive with trauma exposure, but school systems can support those who do in an asset-based manner. Identifying student and family strengths and community connections supports capacity for resiliency, autonomy, and leveraging cultural funds of knowledge.

**This brief provides strategies and resources focused on supporting educator knowledge regarding trauma-informed practices for newcomer immigrant youth.**



# Defining newcomer youth

Newcomer is an umbrella term encompassing a heterogeneous population of immigrant children and youth who were born outside the U.S. and have recently arrived in the country. There is no federal definition of a newcomer, although the definition of “immigrant children and youth” in Title III of the *Every Student Succeeds Act* (2015) includes students who have spent less than three full academic years in U.S. schools. Newcomers may or may not be identified as English learners and may require additional language instruction and supports to succeed in English instructional contexts (U.S. Department of Education, 2016).

Some newcomer youth have shared experiences of trauma and oppression (Castañeda et al., 2015; Cohodes et al., 2021; Sidamon-Eristoff et al., 2022)—including fleeing violence and persecution, poverty, climate disasters, and sociopolitical conflict in their countries of origin (Hiskey et al., 2016); victimization during migration (Cardoso, 2018); as well as food and housing insecurity, racial discrimination, and social exclusion in the U.S. (Chang, 2019).

## Research

Exposure to chronic or extreme stress impacts development, learning, and health. Attachment disruptions, separation of children and caregivers, chronic caregiver stress, and caregiver mental health problems can alter the brain’s structure and function, particularly if trauma exposure occurs during early childhood (Cohodes et al., 2021; Sherin & Nemeroff, 2011).

Newcomer immigrant children may live in under-resourced environments and lack adequate or secure access to food, housing, and health care (Chang, 2019). Many also face uncertainty about their legal standing in the U.S. or fears of deportation (Capps et al., 2020). This unique combination of stressors may explain, in part, why the dropout rate of immigrant children who arrive in the U.S. as adolescents is more than four times higher than that of their U.S.-born peers (Porche et al., 2011). **Educators and student support professionals can help promote a school climate that is safe and supportive of newcomers and ensure that schools are responsive to the needs of this population.**

## Practitioner strategies for supporting newcomer well-being

Research on best practices for mental health prevention and intervention with newcomer immigrant youth is limited. We have identified three recommendations for practitioners to support newcomer well-being. These recommendations are aligned with current promising developmental and trauma science-based practices.

## Learn about traumatic stress and its effects on student learning

All educators, school-based mental health providers, and student support professionals should have a foundational understanding of the **key symptoms of traumatic stress**. These include:

- Intrusive memories
- Intense distress with exposure to trauma-related reminders
- Persistent negative feelings
- Distorted beliefs about oneself, others, or the world
- Physical pain or illness
- Hypervigilance
- Problems with concentration

Some symptoms, such as frequent somatic pain, inattention, and aggression, are often misinterpreted by adults as intentional misbehavior that elicits disciplinary action rather than compassionate understanding and support.

Children may experience challenges in discussing their problems at school, possibly due to language barriers, prior experiences of harm by school personnel in other countries, insufficient relationship-building between school staff members and students or families, or lack of trust in institutions. Educators should be conscious and aware of traumatic stress symptoms to foster environments conducive to student well-being.

Resources for training and professional development include:

- [The National Child Traumatic Stress Network's Creating, Supporting, and Sustaining Trauma-Informed Schools: A System Framework](#)
- [The National Child Traumatic Stress Network's Trauma-Informed Resource for Strengthening Family-School Partnerships](#)
- [National Child Traumatic Stress Network's fact sheet on Understanding Refugee Trauma: For School Personnel](#)

Practitioners are encouraged to **learn about the regions and cultures from which their newcomer students come**, seeking to understand their cultural assets and values, education systems in their countries of origin, push and pull factors that may have motivated migration, common migration experiences from those areas, and their current stressors.

## Use universal trauma-responsive instructional practices

To support the assets of newcomers and help them effectively navigate learning and build resiliency, educators can use instructional practices that are responsive to culture, language, and trauma. A universal trauma-responsive approach assumes that any child may have been exposed to trauma. The approach strives to create an environment where all children are supported in a warm and nurturing environment.

In a classroom, this may involve:

- Building warm and attuned relationships with students
- Using nonthreatening verbal and nonverbal communication
- Ensuring physical safety
- Creating predictable routines
- Dedicating time for informal and supportive student-teacher check-ins
- Providing students with choices and empowering them to exercise autonomy
- Being mindful of difficult or potentially triggering discussions (e.g., related to war, violence, natural disasters)
- Diffusing conflict and modeling self-regulation
- Preventing and addressing discrimination and bullying
- Teaching social and emotional awareness and explicit problem-solving skills

Implementing and modeling these strategies in a newcomer's home language when possible is beneficial, and integrating students' and families' cultural practices and honoring their values is especially important.

Educators can read about additional trauma-responsive practices in:

- [Transforming Education's Trauma-Informed SEL Toolkit; Chapter 4 of IES's Newcomer Toolkit](#) (pp. 5–7)
- [National Child Traumatic Stress Network's Child Trauma Toolkit for Educators](#)
- [Calmer Classrooms: A Guide to Working with Traumatized Children](#)

## **Collaborate with school-based mental health professionals to provide culturally and linguistically responsive supports and services**

While universal trauma-responsive practices are designed to be used with all students, some newcomer students need more targeted or intensive mental health supports and interventions. Teachers may be among the first adults to recognize mental health symptoms in newcomer youth (who may themselves be unaware of these symptoms or how to access help). Therefore, it is important for educators and school-based mental health professionals to collaborate in establishing procedures for referring children to higher levels of care when needed. Some students will need intensive, individualized mental health services that may not be available in the school setting. School-based mental health professionals should be mindful in modifying and adapting evidence-based practices based on the identities and needs of refugee and asylum-seeking youth.

Additional resources for mental health supports and interventions include:

- [The National Child Traumatic Stress Network's refugee trauma resource library](#)
- [Bridging Refugee Youth & Children's Services' \(BRYCS\) website](#)

Schools can create communities of safety and belonging for newcomer students and their families. To provide this, educators need to develop the knowledge to recognize and skills to address trauma to effectively meet student needs through trauma-informed classroom practices. Teachers may be among the first adults to interact with newcomers and can collaborate with other professionals to ensure that students receive the culturally and linguistically responsive supports and services that they need.

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