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The Impact of Racial Trauma: A Crucial Conversation in Rural Education

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Coinciding with the COVID-19 pandemic and the resulting global health crisis, George Floyd's murder was broadcast on social media and popular news (The Marshall Project, 2021). While COVID-19 reports demonstrated the ways Communities of Color and rural communities were disproportionately disadvantaged in the U.S. healthcare system (Artiga et al., 2020; Centers for Disease Control and Prevention, 2021; Dandachi et al., 2021; Fortuna et al., 2020), marches and rallies for Black Lives Matter became emblematic of social discord and civic demand for social justice to upend a racist law enforcement and judicial system (Rickford, 2016). These recent examples of systemic racism are obvious and painful examples of national level issues; however, for many People of Color, everyday microaggressions and racial injustices in their communities, neighborhoods, and schools compound these national level incidents. Take, for instance, the students and families at Aledo High School in Texas where Students of Color were recently "traded" by White students in an online slave auction (Harvey, 2021). In this example, students' first-hand experience of racial trauma in their educational experience compounds the racial trauma witnessed vicariously through the media.

News media would have us believe that issues of racial injustice are an urban issue. We hear of the killings of Trayvon Martin in Sanford, Florida in 2012; Michael Brown in Ferguson, Missouri in 2014; Botham Jean in Dallas, Texas in 2018; Breonna Taylor in Louisville, Kentucky and George Floyd in Minneapolis, Minnesota, both in 2020. Though many of these events occurred in more metropolitan areas, Ahmaud Arbery in Glynn County, Georgia (and others we may never know) remind us that small towns and rural spaces are not immune. Black Lives Matter marches happening in rural spaces across the country let us know that people in rural spaces are paying attention to these issues (Simpson, 2020). People in rural spaces are having these conversations.

Unfortunately, little discussion about racial trauma exists in the rural education research literature. A search of the Education Resources Information Center (ERIC) via EBSCOHOST was performed using the search terms "racial trauma" and "rural" from the year 2010 onward. Three articles resulted from this search, none of which were focused on racial trauma in rural spaces. Additionally, a search of four rural education journals (*Theory & Practice in Rural Education, The Journal of Research in Rural Education, The Rural Educator, and The Rural Special Education Quarterly*) was performed seeking articles published between 2010 and 2020 on racial trauma (by keyword searches and review of article titles and abstracts) and resulted in no relevant articles being identified.

With the prevalence of police violence against unarmed Black people, anti-Asian and anti-Asian American violence, and other traumas perpetuated against People of Color, we argue that the lack of literature exploring the role of racial trauma in rural spaces is cause for alarm. Specifically, the exclusion of literature on racial trauma in rural spaces reinforces the notion that rural spaces are White spaces, thus perpetuating and amplifying the invisibility of Communities of Color in rural spaces. Therefore, the aim of this review of research is to synthesize the literature on racial trauma; discuss the mental health, social emotional, and academic impacts on children and adolescents; and to present practical and research considerations through a rural lens to encourage education professionals and rural research scholars to think more critically about this issue and our understanding of race in rural spaces.

Racial Diversity in Rural Spaces

The definition of rural is a much argued construct in rural research and is often described in contrast to the characteristics of urban spaces (Litcher et al., 2021; Lichter & Brown, 2011). Implicit in these definitions is the assumption of whiteness; however, many Families of Color are moving into or have always lived in these spaces and many predominantly Black, Latinx, and First Nations rural communities exist (Greenough & Nelson, 2015; Johnson & Lichter, 2019; Parker et al., 2018). Although over 75% of rural communities have

populations that are predominately White, Parker et al. (2018) indicate that 11% of rural counties in the United States are composed of a majority of non-White individuals. As of 2012, close to 90% of African Americans residing in rural areas and small towns in the United States resided in the Southern region of the country (Housing Assistance Council (HAC), 2012). Despite the existence of People of Color in rural communities, their experiences and conditions are often overlooked given their relatively small populations in comparison to predominantly White rural communities (HAC, 2012).

Characteristics of Rural Spaces

Rural spaces have unique characteristics that distinguish them from other settings, though every community is unique and no concept applies to every rural community. In general, rural communities often have a tight knit feel with permeable boundaries that create blurred lines between personal and professional roles for educators (Grimes, 2020). Residents of rural communities have often lived there for generations, accounting for the tight knit feel and pride in the community (Fleming et al., 2018). In a school context, this may look like everyone coming out for the Friday night football game or parents volunteering at school-wide events. Furthermore, there is a significant strength in the place-based and historical knowledge of community elders and families that have lived in a community for generations (Averill, 2003). Social capital, defined as reciprocal relationships amongst people who trust one another, is thought to be one of the greatest assets of rural communities (Grimes, 2020; Fleming et al., 2018). The knowledge and relationships can be leveraged in the efforts needed to address community issues. Additionally, schools are often seen as a central hub of the social infrastructure of rural communities, places where people can come together to discuss local challenges and or enact change related to community issues (Fleming et al., 2018). Finally, rural communities, and the people who live in them, have shown themselves to be resilient, facing and overcoming individual and systemic challenges associated with poverty, lack of mental health resources, and school consolidations, amongst other obstacles (Fleming et al., 2018).

Alongside these strengths, there are significant needs within many rural communities also. Limited resources, often attributable to economic challenges, in these locations include un- and underemployment, un- and underinsurance, food deserts, food

insecurity, lack of access to healthcare and mental health care, and limited numbers of school psychologists and social workers (Curtin & Cohen, 2015; DeWitt et al., 2020; Gardent & Reeves, 2009). Limited resources in rural places in turn create challenges for rural students, including chronic absenteeism, low educational attainment outcomes, less exposure to ethnically diverse teachers, lower high school graduation rates, lower achievement scores, and increased exposure to adverse childhood experiences (Davis & Buchanan, 2020; Lukens, 2017; Stokes & Brunzell, 2019). Each of these challenges exacerbates the impacts of individual and systemic trauma.

Defining Trauma

Briere and Scott (2014) define trauma as an event that “is extremely upsetting and at least temporarily overwhelms the individual’s internal resources and produces lasting psychological symptoms” (p.10). The Substance Abuse and Mental Health Services Administration (SAMHSA) (2014) offers another definition, stating “individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being” (p. 7). This is a notably broader definition than the definition provided in the Diagnostic and Statistical Manual of Mental Disorders (5th ed.; *DSM-5*; American Psychiatric Association, 2013), which requires that an experience involve “exposure to actual or threatened death, serious injury, or sexual violence” (p. 271), a narrow definition seen to be problematic by some since it fails to account for such traumatic experiences as neglect, psychological abuse, significant losses, or sexual abuse that do not directly involve actual violence (Briere & Scott, 2014), or the experiences that may fall under the category of racial trauma (Carter, 2007). Trauma, though sometimes viewed as having resulted from a single impactful event, is also found in the form of prolonged and repeated traumas (Briere & Scott, 2014).

Prolonged and/or repeated trauma is the framework for understanding adverse childhood experiences, also known as ACEs. A number of studies have been done on the topic of adverse childhood experiences (ACEs), a term which includes sexual, physical, and emotional abuse or neglect; the experience of witnessing domestic violence; having a

household member experience substance abuse, mental illness, or imprisonment; or of one's parents separating or divorcing before the age of 18 (Afifi et al., 2020; Atzl et al., 2019; Crandall et al., 2019; Felitti et al., 1998; Haynes et al., 2020; Oklahoma Department of Mental Health and Substance Abuse Services, n.d.; Ross et al., 2020; Schroeder et al., 2021; Shin et al., 2018; Struck et al., 2021). However, much of the ACEs research does not specifically consider rural spaces. Available research related to ACEs in rural spaces was conducted in Appalachia and found that death of a caregiver due to drug overdose, witnessing overdoses, and repeated ruptures in attachment were all unique adverse childhood experiences in that rural community (Oak Ridge Associated Universities, 2018). No matter the geographic locale, these experiences have been shown to produce a wide range of negative outcomes including health problems, poor mental health, substance abuse, poor educational and occupational outcomes, and early death (Felitti et al., 1998).

Trauma Responses

Common responses to trauma among adults include depressive symptoms (including feelings of sadness, guilt, decreased interest in normal activities, difficulty concentrating, weight loss, fatigue, and changes in sleeping patterns), anxiety, panic attacks, dissociation, somatic symptoms, an increase in substance use, and, in extreme cases, psychosis (Briere et al., 2014). It is important to note that not only does trauma presentation take many forms depending on the individual, trauma and mental health issues also present differently in children and adolescents than in adults and may also be expressed differently in different ethnic and racial groups (Holliday-Moore, 2019). Children and adolescents do not have the same language and ability to process trauma as adults (Jernigan & Daniel, 2011). Trauma responses in children and adolescents often include social and emotional dysregulation that may manifest as behavioral problems, impulsiveness, difficulty controlling emotions, and interpersonal problems (Crosby et al., 2018). These responses may be interpreted by teachers as defiance or apathy and addressed in a way that further perpetuates the unwanted behaviors. Additionally, Carlson (1997, as cited in Carter, 2007) states that:

To the extent the person is biologically vulnerable . . . [and] is younger, the trauma is more severe (e.g., multiple, highly intense events of long duration), the social context is

unsupportive, and previous or subsequent life events are very stressful, there would be a more pronounced and long-lasting traumatic response. (p. 37)

Despite extensive research on the impact of trauma on children and adolescents, little research has been done on the impact of *racial* trauma on children and adolescents.

What is Racial Trauma?

Race-based traumatic stress, racial-incident based trauma, and racial trauma (Carter, 2007; Jernigan & Daniel, 2011; Utsey et al., 2008) are all phrases found in the research literature to label the micro and macro level impacts of experiences with racism on Persons of Color. Until recently, racism was not labeled as a form of trauma (Carter, 2007). Due to the criterion for Post-traumatic Stress Disorder (PTSD) noted previously, the objective requirements for categorizing trauma placed the subjective nature of acts of racism outside the scope of a trauma diagnosis. However, Norris (1992) stated that while the definition of a traumatic event may be somewhat restrictive according to many definitions, the idea of traumatic stress can be considered a subjective state perceived or experienced by an individual, broadening the definition of traumatic stress in such a way that acts of racism could be labeled as traumatic. A 2001 study by Loo et al. is one of the early studies that examined the connection between racism and trauma. Though the term racial trauma is not used directly in this article, the authors do pose the idea that “cumulative racism can be experienced as traumatic” (Loo et al., 2001, p. 504).

Carter's 2007 article included a heading labeled “racial trauma” in which he described various studies demonstrating a connection between reactions to race-based stress and PTSD. Carter then went on to describe what he labeled as a nonpathological designation of racial trauma, “race based traumatic stress injury” (p. 88). In this conception of racial trauma, Carter theorizes that race based traumatic stress injury can result from racial discrimination (e.g., barring access or excluding an individual), racial harassment (e.g., assumptions of criminality), and discriminatory harassment (e.g., questioning a person's qualifications), and that racial harassment and discriminatory harassment may be more harmful, particularly when the acts are subtle or ambiguous. Carter's theory emphasizes that reactions to racial trauma can be physiological, psychological, and emotional, and that these reactions often mirror those

of PTSD (i.e., avoidance, intrusion, arousal). The severity to which these reactions manifest depend on several factors, including individual characteristics (i.e., racial identity development, race salience), as well as the social context and personal support systems.

Other researchers have defined racial trauma as “the events of danger related to real or perceived experience of racial discrimination. These include threats of harm and injury, humiliating and shaming events, and witnessing harm to other POCI [People of Color and Indigenous individuals] due to real or perceived racism” (Comas-Díaz et al., 2019, p. 1). As this definition points out, a child’s sense of safety can be shaken by witnessing a traumatic event happening to a loved one, just as if the event happened to them personally, because that child’s sense of safety is linked to the perceived safety of the significant other in their life (Saleem et al., 2020). Moreover, the use of social media has made it even easier for Black children in America to see instances of racism and discrimination perpetuated against other Black people; the trauma is compounded by the ability to watch these events re-occur repeatedly (Staggers-Hakim, 2016). Grinage (2019) discusses the continuous nature of racial trauma, stating:

There must be an acknowledgment of the unrelenting production of trauma for the racially oppressed...the individual or group experiencing racial trauma cannot hope to entirely shed themselves of this trauma, since new traumas emerge and accumulate. This means that mourning is *endless*. (p. 232)

Students are put in a position to cope and attempt to heal amid continual experiences of racial trauma. Grinage (2019) also points out that racial trauma is often addressed in ways that fail to acknowledge racism as the source of racial trauma and that pathologize these experiences rather than empowering students and seeking systemic change. Grinage goes on to posit that this failure results in a deficit perspective on experiences of racism and may further negative impacts on the individuals affected by these experiences. He suggests that rather than pathologize the individuals who encounter racism that responsibility be placed on educational institutions that may allow and perpetuate racial trauma (Grinage, 2019).

Historical and Generational Racial Trauma

Racial trauma should not only be considered in the context of current events, but also in the context

of historical oppressions that underlie generational trauma. Kira (2001) discussed two types of group trauma that are transmitted from generation to generation: historical trauma and multigenerational transmission of structural violence. He defines historical trauma as “a collective complex trauma as it is inflicted on a group of people that have specific group identity or affiliation to ethnicity, color, national origin, or religion” and multigenerational transmission of structural violence as “the effects of the structure or social violence created by generating deprived social structures or classes” (Kira, 2001, p. 80). Both types of trauma pass from one generation to another, creating a predisposed vulnerability to other types of trauma that an individual may encounter (Kira, 2001). Examples of historical or generational trauma include the Holocaust, slavery of American Blacks, and the oppression and genocide of Indigenous peoples in North America (Kira, 2001; Kirmayer et al., 2014).

Though there is a paucity of data available regarding the prevalence of racial trauma in rural spaces, there are significant populations and Communities of Color in rural spaces. Rural spaces are too often misconceived as White spaces and, with limited mental health resources available in these spaces to address racial trauma, rural Communities of Color are doubly marginalized. In other words, the continued lack of attention to racial trauma in rural spaces serves not only to perpetuate the monolithic myth of rural Whiteness but to deny the very existence of racialized histories and modern experiences of racial trauma in rural communities. Beginning these conversations will require understanding both historical and current racial contexts, and perhaps, even more so, recognizing and grappling with the impacts of racial trauma on children and adolescents.

Impact of Racial Trauma on Children and Adolescents

Research on the impact of racism and discrimination on Youth of Color provides some insight into the mental health, social emotional, and academic impacts of racial trauma. Understanding the responses that children and adolescents may potentially experience in response to racial trauma provide a different lens through which to consider student behaviors.

Mental Health. Individual traumas, which are already more prevalent among Black youth, are

exacerbated by racial trauma (Metzger et al., 2021; Saleem et al., 2020). Utsey et al. (2008) in their quantitative study of 215 African American college students, found that experiences of racism were a significantly more powerful predictor of psychological distress than stressful life events. Research evidence links racism to depressive symptoms and diagnoses of major depressive disorder across the developmental life span across multiple racial and ethnic groups (Brondolo et al., 2016). Mental health studies indicate that racial and ethnic discrimination is linked to such outcomes as anxiety, depression, anger, shame, low self-esteem, low self-worth, difficulty with psychological adjustment, and negative views and beliefs about oneself and others (Brondolo et al., 2016; Carter, 2007; Pascoe & Richman, 2009; Priest et al., 2013).

For youth and adolescents in rural communities who are already experiencing poverty, family stressors, or community stressors, simultaneous experiences of discrimination and racism in the school setting compound the intensity of incidents of racial trauma (Carter, 2007).

Social-Emotional Wellbeing. As children and adolescents experience race-related trauma through the media or in school and community contexts, they may internalize these ideas, damaging their self-esteem and leading to experiences of depression, anxiety, and other mental health challenges (Brondolo et al., 2016; Priest et al., 2013). Moreover, students may develop hostility, cultural mistrust, and beliefs that the world is an unjust place (Brondolo et al., 2016). However, Tawa et al. (2012) noted that the impact on self-esteem experienced by individuals from racial minorities differs based upon the type of perceived racism they experience. Tawa et al. differentiated between perceived interpersonal racism and perceived structural racism, with the former including internalized “beliefs about personal or group deficits as a basis for mistreatment” and the latter involving “the perception of the U.S. racial social structure as inherently biased against all racial minority groups and as privileging White Americans” (2012, p. 350). They concluded that though interpersonal racism did correlate to lower personal self-esteem, structural racism actually had a correlation to higher collective self-esteem (Tawa et al., 2012).

Trauma responses such as heightened awareness in social situations (social threat and avoiding confirmation of negative stereotypes) also show up for people who experience race-related trauma or

discriminatory experiences (Brondolo et al., 2016). These heightened levels of awareness may make it more difficult to engage in constructive interpersonal interactions with peers, teachers, and other school personnel, and may contribute to increased intra- and inter-personal stressors (Brondolo et al., 2016). Though more research is needed to support causal relationships between these factors, current research indicates that negative cognitive schemas (i.e., mental pictures based on past experiences) contribute to the mental health impairments experienced by individuals who face racial trauma.

A quantitative study performed by Fisher et al. (2000) examined the impact that racial discrimination has on the distress levels of adolescents. The results of this study indicate that Black and Latinx youths experience a higher level of institutional and educational discriminatory distress than Asian and White students. Minority students reported that “racial biases led others to perceive them as dangerous or not smart” (p. 687), leading Fisher et al. to argue that discrimination occurring in educational spaces negatively impacted minoritized students’ self-esteem.

Academic. Some researchers have found that race-based discrimination is associated with Students of Color developing negative cognitive schemas that affect their reactions to stressful events and that “intensify appraisals of threat and harm in situations relevant to achievement” (Brondolo et al., 2016, p.112). Additionally, mental energy must be exerted in assessing the intentions of the perpetrator before determining a course of action. Having to expend mental energy to determine a speaker’s intentions during live face-to-face interracial interactions has been shown to reduce both Black and Latino research participants’ capacity for working memory and cognitive flexibility (Murphy et al., 2013). Though the participants in Murphy et al.’s (2013) study were undergraduate college students, it stands to reason that children and adolescents who are still in the process of developing their cognitive skills and identity would experience higher levels of cognitive difficulties and personal uncertainty in interracial interactions where subtle racial bias is displayed. These effects can be mitigated by receiving instructions that promote positive interracial interactions (Trawalter & Richeson, 2006).

Bair and Steele (2010) found that Black participants experienced depletion in interracial encounters, regardless of whether racism was involved, and that the levels of self-control depletion

were greater for those for whom their racial identity was central to their understanding of self following an encounter with a White partner who espoused racist views. Bair and Steele's (2010) findings suggest that simply *listening* to a White peer expressing controversial views can result in self-regulatory depletion for minoritized students. This research study is particularly impactful when considering students in K-12 who may overhear peers and/or teachers make statements that are perceived to be racist, but in which they lack the power to respond due to the threat (perceived or real) of disciplinary consequences or fear of retribution from other students or from their teachers. Rather than having the power to address these incidents of racial trauma, students are forced to internalize their emotions and reactions, which contributes to negative academic and social/emotional outcomes.

Racial Trauma and Education

Research shows that schools represent contexts where Black children and adolescents are particularly vulnerable to racial discrimination and where they experience racial trauma on both individual and systemic levels (Jernigan & Daniel, 2011). Black children attend schools that are over-policed and under-resourced (Whitaker et al., 2019), and Black students, particularly Black females, are less likely to be recommended for Advanced Placement courses (Francis et al., 2019). Dixson et al. (2016) indicated that racialized educational inequities are found in such practices as “tracking, ability grouping, and advanced placement and honors courses, as well as special education and to a certain extent ESL programs” (pp. 197-198). These experiences reverberate in the minds of students. Fisher et al. (2000) found that Black and Hispanic youths thought racial bias was behind perceptions of them as less intelligent and as dangerous, while reporting that their race was responsible for them being discouraged from taking advanced courses, being wrongfully disciplined, and receiving lower grades.

Moreover, although the diversity of the students in our schools continues to increase, the diversity of the education profession—including administrators, teachers, and school counselors—continues to lag. Vera et al. (2016) found that only 17.5% of educators were People of Color, though over 45% of students in prekindergarten through 12th grade were non-White. If we are to continue to meet the needs of the diversifying student body across this country, and in rural spaces in particular, K-12 education

professionals must act, both personally and professionally.

Discussion

Trauma in general, and racial trauma specifically, has been shown to negatively impact students' mental health and educational outcomes. Studies indicate that racial and ethnic discrimination is linked to such mental health outcomes as anxiety, depression, anger, shame, low self-esteem, low self-worth, difficulty with psychological adjustment, and negative views and beliefs about oneself and others (Brondolo et al., 2016; Pascoe & Richman, 2009; Priest et al., 2013). These mental health outcomes directly impact students' educational outcomes. Additionally, these experiences of racial trauma create school environments that feel unwelcoming and lead to experiences of marginalization for Students of Color. These experiences may be even more pronounced for Students of Color in rural communities, particularly in predominantly White rural communities where Students of Color may be small in number. To address these issues, we are calling on education professionals and rural education researchers to act. Beginning conversations about a topic can often be the hardest part of creating change, but the negative academic and social emotional outcomes of racial trauma compel us to move forward. Therefore, we offer practical and research considerations for starting these crucial conversations in rural educational spaces.

Practical Considerations in Rural Spaces

There are many nuances to rural educational spaces and communities that should be considered as we engage in conversations on racial trauma. One of the most prominent considerations is the small, tight knit community context. From a strengths-perspective, having a tight knit community where people are interconnected can mean initiating conversations where people are open to hear and listen to others' concerns because they see this approach as best for the entire community. School leaders, teachers, school counselors, families, and community members are all dependent upon one another and take responsibility for the well-being of each other. If one person or group is hurting, the entire community comes together to support those who are hurting. The conversations can become spaces for healing and reconciliation rather than disengagement and separation. Activities such as the personal identity wheel and social identity wheel

(University of Michigan, 2021) offer opportunities for students to learn more about their own identities as well as those of their classmates, expanding connections within the community and creating a sense of belonging for marginalized students. Guides around facilitating difficult conversations about race (e.g. Sue, 2015) can also be a useful starting point for classroom teachers or community leaders interested in facilitating dialogue to continue building on the relationships within the community.

On a more systemic level, school communities in rural spaces tend to have more success with change that starts within the community rather than from a top down approach (Fleming et al., 2018). Therefore, working collaboratively with the school community (i.e. teachers, families, community leaders) to give them a sense of ownership in the process can be integral to beginning these conversations. The school community can work together to examine strengths, understand barriers, and develop action plans with next steps. A community needs assessment or asset map can be a helpful tool for supporting these initiatives, and beginning with recognizing strengths in the community can spur change and encourage people to keep working when conversations become more difficult (Fleming et al., 2018).

On the other hand, the generational, tight-knit community can become a barrier to beginning these conversations about racial trauma. Families may hold specific beliefs or grudges about one another based on past history and trauma, leading to resistance towards change. Additionally, families and students may fear retribution for speaking up and sharing their experiences in a place where connections are vital and, in some places, limited. Students may fear being ostracized by those same individuals who perpetuate instances of racial trauma (J. Kelly, personal communication, October 15, 2021), or may choose to remain friends with these individuals because their friend group is already limited (C. Heasley, personal communication, October 15, 2021). This connection to the oppressor may, in turn, lead to internalized racism that continues to perpetuate racial trauma and negative mental health outcomes. Additionally, students who experience racial trauma from other students or teachers and administrators have limited educational options, especially in communities where schools may be consolidated or there is only one school for all grade levels. In this case, students who have experienced racial trauma are forced to continue seeing and interacting with their perpetrators due to the small community dynamic. Finally, school

professionals must consider confidentiality to protect those who are sharing these experiences. While it is important that students' stories are known to make them feel seen and heard, we must also ensure that they are safe, both physically and emotionally, in the school building. Sharing collective narratives of students rather than individual student stories may be one way to bring issues around racial trauma to the attention of school stakeholders without breaking the confidentiality of a student.

How do school mental health professionals and administrators balance supporting students experiencing racial trauma while educating those who have caused harm? School professionals can use these opportunities to begin conversations on a school-wide level employing resources such as those from Learning for Justice (Southern Poverty Law Center, 2021) or the American School Counselor Association's Standards in Practice: Eliminating Racism and Bias in Schools (n.d.). Since school counselors often wear many hats in the school community and are trained in areas such as mental health support, group facilitation, multicultural competence, and school climate, they are uniquely positioned to begin and/or support conversations around racial trauma.

Another rural contextual factor for consideration is that of limited mental health resources. Schools may be the only place that students are able to access mental health support in a timely fashion when instances of racial trauma occur. School counselors can be a crucial role model in beginning these conversations. The American School Counselor Association's (ASCA) (2016) Ethical Standards state that school counselors are to be leaders and advocates who use consultation and collaboration skills to address issues of inequity and bias. ASCA calls on school counselors to use data to identify and challenge achievement and opportunity gaps, such as disparities in placement in gifted courses and use of exclusionary discipline practices. Each of these issues have been shown to impact the academic success of Students of Color. Moreover, ASCA's Ethical Standards state that school counselors are responsible for continued multicultural and social justice advocacy awareness, knowledge, and skills, and that they use this awareness to promote cultural competence that provides a more inclusive school environment. While limited mental health resources certainly places more pressure on school mental health professionals to actively assess their own levels of cultural awareness to ensure they are able to support their students, it also provides space for

creative and/or place-based interventions to address instances of racial trauma. School counselors can work through a multi-tiered system of support to take a whole school approach to addressing racial trauma. At Tier 1 school counselors might provide classroom lessons focused on social-emotional learning concepts such as self- and other- awareness, empathy and civil discourse (Eva, 2017). At Tier 2 school counselors can provide small groups where Students of Color and White students can explore their racial and ethnic identity development (Malott et al., 2010). Finally, at Tier 3 school counselors can provide individual counseling and support to students who have experienced racial trauma. School counselors might also consider providing wraparound services through the use of mentoring or connecting students with relevant community organizations or church-affiliated support groups. Of course, confidentiality must be a top priority in making these decisions about referral resources. Additionally, school counselors can consider collaborating with other school mental health professionals, teachers, bus drivers, janitorial staff, and community organizations to provide support to students. Again, engaging the entire school community can serve as an asset in rural communities to encourage these critical conversations. Moreover, by providing a comprehensive school counseling program, school counselors can reach *all* students to begin conversations about racial trauma.

Practical considerations, such as the sense of community and limited mental health resources, create both strengths and barriers for beginning conversations around racial trauma. Whichever approach is taken, we must ensure that our practice does not continue to re-traumatize students and families. By assessing the strengths and barriers, education professionals in rural communities can work to begin addressing the root causes of racial trauma in their communities and create spaces of belonging for all students.

Research Considerations in Rural Spaces

In addition to practitioners, researchers can also play a vital role in beginning conversations about racial trauma. Research can serve as an engine for sharing and explaining the experiences of various groups, can provide interventions to address identified issues in communities, and can even move people towards action and change. One key consideration when conducting research in general, and particularly in rural spaces, is protecting the

confidentiality of participants. The small town, tight knit connectedness of rural spaces in general, and the small number of People of Color in some rural spaces, create an environment in which protecting identities is a paramount ethical concern.

Additionally, this ethical mandate seems especially important if we are researching the experiences of K-12 students who have been traumatized. Therefore, it is imperative that rural researchers intentionally consider how they will protect individuals with whom they conduct research. Composing collective narratives that integrate the experiences of multiple participants in qualitative methodologies in addition to using pseudonyms, doing research across rural communities, and using quantitative methods (like survey research) where respondents' data can be submitted anonymously can all serve as means for protecting the identities of those in rural communities involved in research. Additionally, rather than using research approaches that attempt to hide the identity of participants, using action-oriented approaches such as Youth Participatory Action Research (Rodriguez & Brown, 2009) can empower participants to share their own stories. Qualitative research is often told through the interpretation of the researcher; however, through action research we can hear the experiences of students and educators in their own voice.

Second, we challenge rural education scholars to consider intersecting identities in their research. Simply acknowledging various demographic variables without critically questioning who is and is not included in the research can no longer be the status quo. Researchers must take time to consider the ways in which the experiences of individuals from rural communities are similar or different based on identities such as race, gender, sexual orientation, and ability status, among others. How do these identities influence the ways in which individuals react to traumatic experiences, and the options they can see (or not see) for redress for wrongdoings? In doing so, rural education researchers honor the diversity of rural communities, decreasing the sense of invisibility of People of Color in rural communities and creating more nuanced conversations around this topic.

Finally, in addition to considering individual's intersecting identities, racial trauma pushes rural researchers to bring a more systemic lens to their research. Traditional trauma diagnoses have focused on the individual rather than larger systemic issues at play. Racial trauma begs researchers to think beyond the individual in the conversations created in their research. Questions such as "how has and does

history play a role in the experiences of Students of Color in rural communities?” or “how do education systems continue to perpetuate racial trauma in rural spaces?” move beyond the individual student to consider the student-within-context. We encourage rural researchers to not only consider the individual responses to racial trauma detailed above, but to interrogate how education and community systems have and do respond when instances of racial trauma occur in rural communities. By doing so, rural scholars will encourage a broader conversation as we move forward.

Questions that we would advocate rural education researchers consider to advance conversations about racial trauma include the following:

- What are the unique indicators of racial trauma in rural spaces? How are these different from and similar to experiences of students in other geographic locales?
- What are the experiences of Students of Color in predominantly White rural communities in relation to racial trauma? In predominantly Black rural communities? How are these similar and different?
- What are the experiences of educators and mental health providers in rural communities who support students who have experienced racial trauma?
- How do White students respond when incidents of racial trauma occur in their school community?
- What is the impact of generational racial trauma in a rural educational setting?
- What place-based interventions and/or trauma-informed practices have been used to address trauma in a rural context? How can these interventions be adapted to address

racial trauma specifically?

- Are there approaches that have been implemented in other settings that are equally as effective in, or that can be adapted to fit, rural contexts?

We believe that these questions provide a starting point for understanding what is happening for students in rural communities as it relates to racial trauma, which can then lead to the creation of interventions to address racial trauma and the root causes of racial trauma.

Conclusion

Current events coupled with the lack of research on the topic of racial trauma in rural spaces indicates an urgent need for rural researchers and practitioners to begin exploring this issue. We hope this manuscript will serve as a starting point for further conversation and work. We also do not aim to position rural spaces and communities as more racist or more problematic than anywhere else. Rather, it is our attempt to disrupt and decenter whiteness in rural spaces with regard to racial trauma. Even in rural schools that may be predominantly White, racialized murders matter. In rural schools with very few non-White students, the lives of People of Color still matter. All rural students need to learn about systemic racism, racial trauma, implicit biases, stereotype threat, and micro- and macro-aggressions. We must learn effective ways to fully accept others and to heal from historical, political, and racial histories that continue to affect the wellbeing of *all* children. Rural Students of Color must have the opportunity to be seen and for their experiences related to racial trauma to not be limited to urban-centric news and social media. We must tell their stories also. Racial justice can start at schools--all schools, including rural ones.

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