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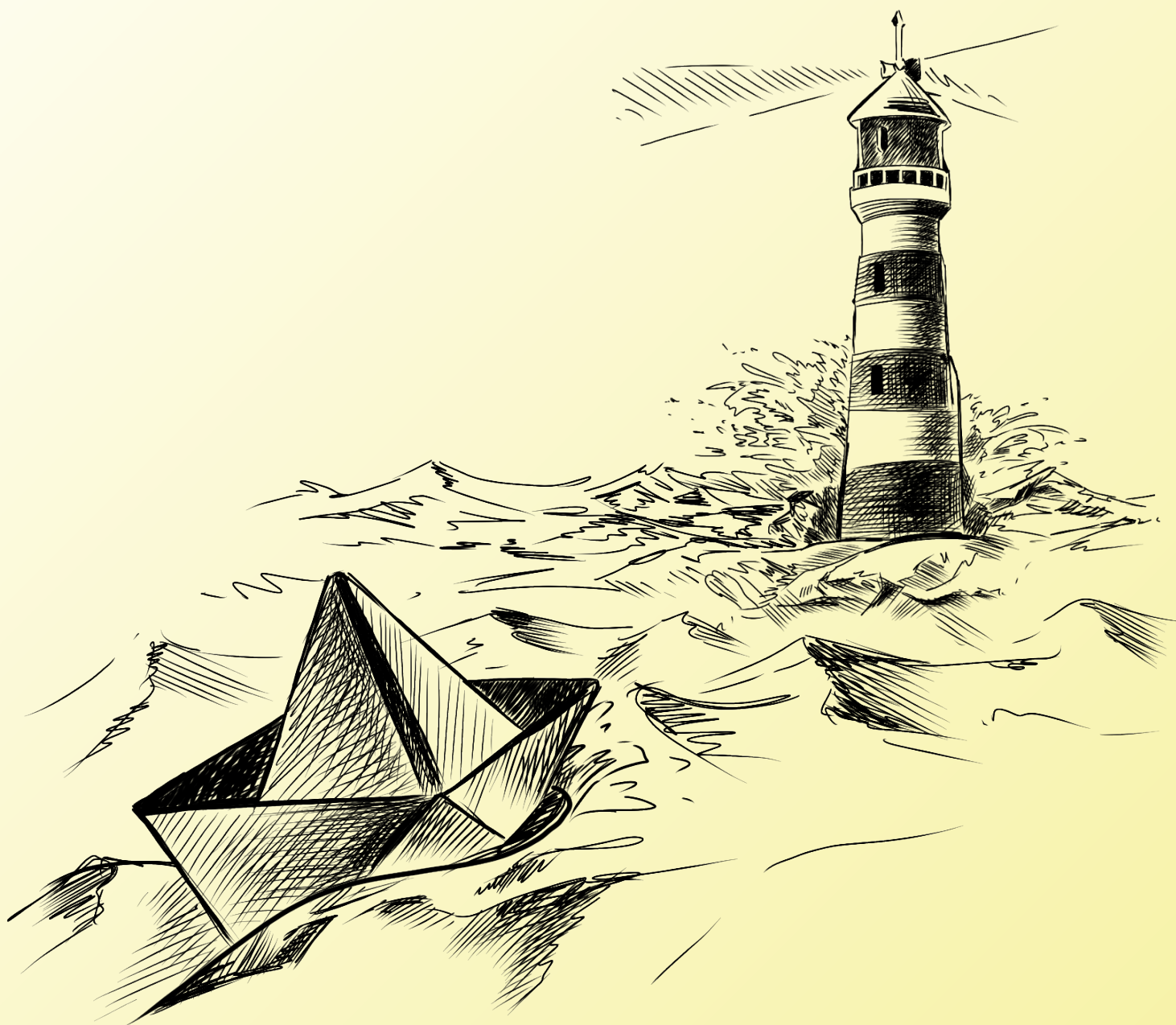
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Federal Foreign Office

TEACHING, SUPPORTING, INSPIRING:

applying a trauma-informed
approach to civic education



UDC 37.013.78 : 159.944.4

B86

Handbook

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**TEACHING, SUPPORTING, INSPIRING:
APPLYING A TRAUMA-INFORMED APPROACH TO CIVIC EDUCATION**

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The manual highlights the key aspects of the trauma-informed approach and its impact on the educational process. The team of authors offers practical strategies to support educators, trainers, and providers of civic education in working more effectively with individuals who have experienced trauma. The publication also addresses the issue of preventing burnout among civic education providers.

This publication is intended for professionals in the field of civic education and will be useful for those working with individuals affected by trauma, aiming to support their integration into society.

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Preface

The modern world poses numerous societal challenges that affect people with diverse life experiences. In times of crisis, social change, and instability, it is particularly important to consider the psychological well-being of those facing traumatic situations. In the educational sphere, this means the need to create an environment where each participant feels safe, respected, and included.

This handbook discusses a trauma-informed approach that helps adapt educational processes to the needs of participants with traumatic experiences. It presents key principles for supporting participants' well-being in academic intervention, practical guidelines for creating a safe environment, and strategies for engaging with people who have experienced discrimination, forced migration, or armed conflict.

This handbook was created as a supplement to the graphic guide [“Using a Trauma-Informed Approach in Civic Education”](#). This publication expands on the ideas described in the graphic guide in many ways. That is why we would like to thank its authors: Nazarii Boiarskyi, Volha Melnik, Vitaliy Nikanovych, Iryna Kobzeva. At the same time, these two resources can both complement each other and be used as separate standalone materials.

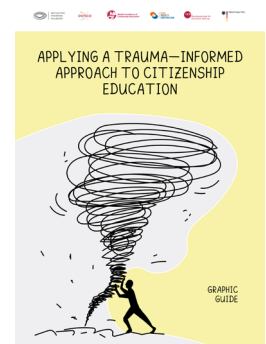
The handbook will be helpful for organizers, teachers, trainers, social workers, psychologists and other professionals involved in educational programs. We also aim to help those working with vulnerable groups to make their training not only effective but also supportive.

We would love to receive your feedback on the handbook, stories about the application of a trauma-informed approach in civic education. Email us at info@diukraine.org

May this handbook be your reliable tool for creating safe, responsive, and inclusive learning environments where everyone feels valued, heard and respected. Remember: even small changes in approach can tremendously impact people's lives.

We wish you success in your important work, inspiration and faith in the power of education as a tool for supporting and transforming society!

Sincerely, the authors' team.



The trauma-informed approach and its application in civic education



A trauma-informed approach

A trauma-informed approach is a method of work in various fields (such as education, health, social work, psychology, and law) that takes into account the impact of traumatic events on an individual and their behavior.

The main idea of the approach is that many people may have experienced traumatic situations (e.g., war, violence, forced migration, discrimination, loss of a loved one), and this can significantly affect their mental, physical, and emotional health.

Practicing a trauma-informed approach aims to increase professionals' awareness of the negative impact trauma can have on individuals and communities, as well as on their ability to feel safe and build trusting relationships with others.

It focuses on improving the availability and quality of services by creating culturally sensitive, safe environments that people trust and want to use. The approach seeks to prepare professionals to collaborate and partner with people and empower them to make informed decisions about their health and well-being.

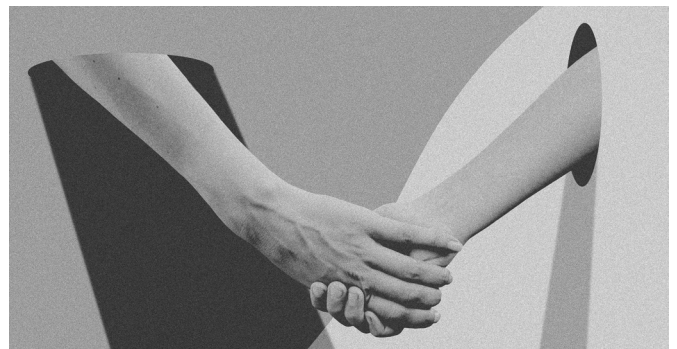
A trauma-informed approach recognizes the need to look deeper, asking, *"What does this person need?"* instead of *"What is wrong with this person?"*

By applying the values and principles of a trauma-informed approach, organizations and professionals can reduce the likelihood of re-traumatization - the re-experiencing of thoughts, feelings, or sensations experienced during a traumatic event. Re-traumatization is usually triggered by reminders of past trauma, which can be either obvious or subtle.

The goal of a trauma-informed approach is not to treat the consequences of trauma, as this is the task of specialized services and professionals. Instead, it aims to address the barriers that trauma survivors face when accessing education, health, and social services.

Six guiding principles for a trauma-informed approach:

- 1. Safety.** Civic education providers and learners feel physically and psychologically safe in the educational environment. Factors that influence feelings of safety include sexual orientation, gender identity, race, ethnicity, personal experiences of discrimination, and trauma.
- 2. Credibility and transparency.** Organizational decisions are made in a transparent manner that builds and maintains trust between civic education providers, learners, and communities. It is recognized that explicit and implicit power dynamics can affect the development of trusting relationships.
- 3. Peer Support.** The "peer-to-peer" approach and mutual assistance are part of the service delivery system and are seen as key tools for strengthening trust, ensuring safety, and enhancing the autonomy of participants.
- 4. Collaboration and interaction.** Healing occurs through relationships, shared experiences, and meaningful distribution of power. Everyone involved in the educational or social process plays an active role in implementing a trauma-informed approach. One does not have to be a therapist to have a therapeutic impact.
- 5. Empowerment, voice, and choice.** The Civic Education Provider encourages the growth of self-efficacy, fostering the development of strengths in both participants in educational activities - at the individual, interpersonal, group, and community levels - and in staff, recognizing the uniqueness of each person's experience.
- 6. Cultural, Historical, and Gender Aspects.** The Civic Education Provider develops cultural competence, actively challenges stereotypes and prejudices, offers culturally sensitive services, recognizes the impact of historical traumas, and seeks to help overcome them.



Implementing a trauma-informed approach is an ongoing process of change, both at the organizational culture level and in the individual worldview of each staff member and involved person. This process involves a paradigm shift in knowledge, attitudes, competencies, and skills that deepen and evolve over time.

Implementing a trauma-informed approach in civic education means:

1. **Recognizing** that a person's traumatic experience can affect their ability to learn, particularly their sense of safety and the development of trusting relationships in the educational process. Therefore, it is important to create a supportive environment for learners.
2. **Understanding** that civic education topics can trigger re-traumatization or situations in which participants may re-experience thoughts, feelings, or sensations related to traumatic events. Therefore, it is important to be sensitive in planning the educational process and selecting topics and materials.
3. **Considering** that civic education providers may also have traumatic experiences or experience burnout, which affects their ability to support participants and effectively conduct the educational process. Therefore, it is important to provide support and promote a healthy work environment that helps to better assist traumatized participants.

Basic principles of a trauma-informed approach in civic education

- **Safe environments** for educational activities and learning processes.
- **Trust** among educational stakeholders and transparency in decision-making.
- **Support and cooperation** between all participants in the educational process.
- **Awareness** of the structure and organization of the educational process.
- **Sensitivity to re-traumatization**, including awareness of possible triggers during educational activities.
- **Cultural sensitivity** and respect for diversity.
- **Recognition of the impact of trauma** on human development and behavior, taking these factors into account at all levels of organization and delivery of educational activities.

Thus, implementing a trauma-informed approach in civic education makes the educational environment more inclusive, safe, and effective. This makes each participant feel comfortable and free in the learning process, reduces anxiety and increases engagement in the educational process.

Emotions, reactions and stressful situations



Stress

Stress is a nonspecific response of the body to external stimuli exceeding the norm, as well as the corresponding response of the nervous system. It is a defense mechanism that manifests itself on mental, physical and emotional levels and helps the body to adapt to changes.

In civic education, stress, for example, can occur in participants, teachers and organizers when they are in a challenging life situation or discussing complex topics (human rights, war, discrimination), as well as, for example, under conditions of high workload, conflict in the group or fear of public speaking.

Stress is an inherent manifestation of life and therefore, a natural part of the educational process, and plays an important role in enhancing adaptive capacity. Moderate stress can promote critical thinking and self-regulation skills. However, excessive, intense, and prolonged stress can be harmful, causing burnout, anxiety, and decreasing motivation to learn.

It is important to identify the causes of stress in a timely manner and try to eliminate them. For example, if a participant in an educational course is stressed before a discussion about military conflicts, it is important to create a safe space where he or she can express his or her thoughts without fear of judgment.

Indications of stress

Stress makes it difficult to relax and is accompanied by a wide range of emotions, such as anxiety and irritability.

Common symptoms of stress in educational program participants:

- Muscle tension (head, neck, shoulders, back) (e.g., when discussing complicated topics)
- Increased anxiety (e.g., before public speaking, debates)
- Irritability low and tolerance of other opinions (e.g., in group work)
- Decreased efficiency, difficulty concentrating
- Apathy, depression (e.g., after emotionally difficult discussions)
- Sleep disturbances (e.g., in preparation for important events (e.g., project defense)
- Appetite and digestive problems in overloaded environments (intensive courses, conferences)
- Isolation from the group and refusal to interact after a conflict

In an educational environment, prolonged stress can reduce motivation to learn, and cause emotional burnout in teachers and participants. If stress becomes persistent and interferes with engagement in the process, it is necessary to adjust the educational strategy - to introduce a trauma-informed approach, to give more time for reflection, and to provide support.

Stages of stress

The general Adaptation Syndrome includes three stages (G. Sellier, 1972) describing the body's response to stress.

Anxiety stage (a few minutes)

The first stage takes effect at the moment a stressor impacts the body and lasts for a few minutes. During the alarm reaction stage, the body initiates a primary response to the stressor-mobilizing its defense systems in an attempt to adapt to the new demands of reality.



Resistance stage (from several hours to several days)

It is followed by the second stage lasting from several hours to several days, where a person is looking for a solution to the problem or a favorable way out of the situation. During the resistance stage, the body attempts to counteract the physiological changes that occur during the anxiety reaction stage.



Стадія виснаження

If the stressful situation ends, during the resistance stage, the body returns to normal stage, and the person's psychological state normalizes. However, if the stressor persists, the body remains alert to fight its manifestations. As a result, the body depletes its adaptive capacity and stops minimizing the harmful effects of the stressor. It is at the stage of distress that a person experiences overload, psychological disorders, and signs of somatic diseases.



Short-term stress in the educational process can be useful, helping to develop emotional stability and critical thinking. However, prolonged and uncontrolled stress reduces motivation, hinders learning, and requires adjustment of approaches.

Crisis

A crisis is a serious condition caused by sudden adverse changes in life. This condition occurs when a person faces a problem that they cannot solve quickly and in the usual way.

There are two types of crises - their nature depends on the possibility of subsequent changes in a person's life.

- **The first type of crisis** is a serious upheaval but leaves a chance to return to the previous level of life.
- **The second type of crisis** is a situation that cancels previous plans and requires a person to change themselves and their outlook on life.

Encountering insurmountable obstacles, such as the loss of a loved one, job loss, or loss of health, can trigger a crisis. Crises vary in their duration and intensity.

In an educational setting, crises can occur for participants, teachers and organizers when there is a conflict of values, sensitive topics are discussed, information overload, or lack of support.

Examples of crisis situations in the context of civic education:

- A participant has been discriminated against, and during the discussion of a human rights topic experiences emotional stress and is unable to participate in the discussion.
- After forced migration, a student faces misunderstanding and isolation in the group, which leads to an identity crisis.
- The trainer faces aggressive reactions to discussing political or social topics, which creates conflict and makes the learning process ineffective, exposing the trainer's self-perception of their competencies.
- The group discusses the topic of war, where some participants have personal painful experiences which can cause post-traumatic reactions.

Categories of crises

Crises can be categorized as **internal** or **external**:

- **Internal crises** are the starting point for transformation, occurring within a person, related to the workings of their nervous system. For example, a participant in an educational program may experience an identity crisis when encountering contradictions between their values and new knowledge.
- **External crises** — caused by external traumatic events such as natural disasters, loss of loved ones, job loss or divorce. For example, a teacher who has lost their home to war has difficulty focusing on the educational process.

While these two factors can overlap, one usually dominates.

Crises are also divided into **normative** and **non-normative crisis**.

- **Normative crises** are predictable transitional periods that all people experience. They may be associated with age-related changes or important life stages (e.g., graduation from school, change of profession). In the educational process, it can be a crisis of adaptation when moving to a new level of learning.
- **Non-normative crises** are unpredictable and unique events that do not occur for everyone. For example, forced migration, discrimination, violence and loss of relatives. They are accompanied by more intense psychological reactions.

Types of crises

All crises can be categorized into three categories:

- **Developmental crises** (e.g., developmental, professional, educational).
- **Bereavement crises** (divorce, loss of a loved one, forced relocation).
- **Traumatic crisis** (a person is experiencing the aftermath of a past traumatic experience or is in a situation that has just occurred).

It is important that civic education providers recognize the likelihood of crises in the lives of educational participants. For example, a student who has lost family to war may be experiencing a traumatic crisis. If the educational process does not account for their condition, the workload may lead to emotional exhaustion. It is important to provide flexibility in learning, to give the opportunity to work at a comfortable pace, to support dialogue and consider their boundaries.

Indications of a crisis

There are several signs that indicate an approaching psychological crisis:

- **Impact on multiple areas of life** – for example, conflicts at work begin to affect personal life, health, social activity. Emotional state begins to affect physical health, appetite, sleep, and even those activities that used to bring joy – now they are perceived as unemotional and seem boring.
- **Change in relationships with others** – for example, a participant in the educational process stops interacting with classmates and becomes irritable in discussions.
- **Impact on the physical state** (psychological state begins to affect physiology) – for example, a participant in the educational process loses appetite, sleeps poorly, feels tired all the time.

Symptoms of crisis

During a crisis, emotional shifts occur, typically manifesting in three key states:

- **Depression** – apathy, indifference, frustration, fatigue, depression.
- **Destructive emotions** – anger, aggression, resentment, irritability.
- **Loneliness** – feelings of being unwanted, misunderstanding, deadlock, hopelessness.

When a person finds themselves in a crisis situation, their way of communication may change: they may suddenly become more withdrawn (start spending more time alone), or on the contrary, increase the number of contacts with other people in an attempt to find comfort and support in frequent superficial interactions.

Stages of crisis

Every crisis has its own characteristic course and stages:

1. **The initial increase in tension** - the usual and customary ways of solving the problem are activated.
2. **Further growth of tension** - the usual methods do not work, the crisis worsens.
3. **Maximum tension** - a person tries to mobilize all internal and external resources to find a solution.
4. **Anxiety and depression** - if the crisis is not solved, the person experiences a decline in strength, helplessness, despair.

The crisis can end at any stage if a solution or support emerges.

The functions of crisis include the search for new meanings, transformation of thinking, and individualization. It is important that the educational environment supports participants in the process of crisis, rather than exacerbating it. Therefore, in the context of a trauma-informed approach in civic education, it is important to:

- tailor the curriculum to the participants' condition;
- avoid pressure, triggers, toxic discussions;
- respect personal boundaries, offer alternative ways to participate;
- not forcing people to share personal stories if they are not ready.

Crisis is not always about the negatives. If the educational system supports participants, it can be a trigger for growth, awareness and adaptation. It is important to remember that everyone goes through a crisis in their own way, and our task is to create conditions for safe development in civic education.

Psychological trauma

A traumatic event is an extraordinary, sudden and unexpected event in which a person is a participant or direct witness. At the time of the event, the person believes that there is a real threat to their life, health or the life and health of loved ones. Even if it is later determined that there was no danger, the subjective perception of the threat can leave serious consequences.

Features of a traumatic event:

- Suddenness
- Lack of Similar Experience
- Duration
- Lack of control
- Grief and loss
- Constant change
- Exposure to death
- Moral uncertainty
- Scale of devastation

It is vital to remember

any reaction is a normal response to traumatic events.



Psychological trauma is a person's emotional reaction to a tragic event in their life. Unlike stress, when the body adapts and recovers over time, trauma keeps painful experiences for a long time, sometimes for life. A person may feel unable to cope with the event, and their nervous system remains in a state of tension even after the threat has disappeared.

Signs of psychological trauma

The first reaction to a traumatic event is **shock and denial**. In the long run, trauma can lead to:

- Sleep, appetite, and performance disturbances
- Prolonged depression and apathy
- Self-harm, suicidal thoughts and attempts
- Emotional instability (mood swings, outbursts of anger)
- Intrusive thoughts of trauma
- Alcohol and substance addictions
- Isolation and alienation from loved ones

The severity of symptoms depends on mental stability and support.

The severity of symptoms depends on mental stability and support. For example, it may manifest itself in the following ways:

- A student who has experienced violence may avoid discussing human rights.
- A migrant with a history of war may feel stressed when discussing migration and conflict.
- A student who has been bullied experiences a panic fear of public speaking.
- After being assaulted on the street, a person may become overly wary and struggle to interact with others.
- A student who has experienced politically motivated harassment may experience anxiety in discussions about free speech.
- A teacher working with people affected by violence or war may experience secondary traumatization.

In civic education, it is critical to be sensitive to these issues and to create a safe environment where participants can feel secure.

Signs of psychological trauma

Emotional signs:

- Increased anxiety or fear
- Frequent mood swings
- Feelings of guilt or shame
- Irritability or emotional “numbness”

Example:

After the robbery, Nadia became anxious: she constantly checks whether the doors are locked, flinches at loud noises, and is afraid to go outside at night.

Behavioral signs:

- Avoiding places and situations that remind you of the trauma
- Insomnia or nightmares
- Increased vigilance
- Difficulty concentrating
- Alcohol or drug abuse

Example:

After the accident, Sasha has stopped driving, avoids cars, and prefers walking, even if it takes longer.

Cognitive signs:

- Intrusive trauma thoughts
- Memory issues
- Negative thoughts about self and the world
- Difficulty making decisions

Example:

After losing her job, Anya constantly replays the day of her dismissal in her mind and sees herself as a failure.

Physical symptom:

- Headaches
- Digestive issues
- Chronic fatigue
- Excessive sweating
- Muscle tension

Example:

After a divorce, Sergei complains of headaches and stomach problems. Doctors find no physical cause, but the symptoms persist.

Social change:

- Desire to isolate oneself
- Communication issues
- Loss of trust in people

Example:

After a friend's betrayal, Dasha stopped socializing with others and avoided new acquaintances.

Changes in perception:

- A feeling of unreality of what is happening
- Feeling that the world has become a dangerous place
- Loss of interest in previously favorite activities

Example:

After returning from a military conflict zone, Dima feels that he cannot fit into a peaceful life. Everything around him seems unreal and meaningless. He no longer enjoys the hobbies he used to enjoy.

These symptoms may not occur immediately after the traumatic event but after a period of time. Occasionally, they come and go, becoming stronger in stressful situations or when reminded of the trauma. If one notices several of these signs in oneself or a loved one, especially when they persist for a long time and interfere with normal life, seek help from a specialist. A psychologist can help you understand the situation and find ways to overcome the trauma, which will make life much easier. The presence of symptoms of psychological trauma does not mean weakness. It is a normal reaction to abnormal circumstances, and with the right support and help, it is possible to learn to cope with the effects of psychological trauma.

Trauma affects deeper layers of the psyche, causing a change in a person's attitude to themselves, questioning many defining theses: whether they are worthy of love, whether they are okay, whether they can be happy, whether they can trust the world and feel safe.

Psychological trauma can be manifested in such phrases and thoughts as:

- *"I don't know how to get over it"*
- *"I'm not interested in anything else"*
- *"I keep thinking about what happened and what I could have changed"*
- *"I often dream about the place where it happened"*
- *"I drink to forget, but it doesn't help anymore"*
- *"I don't feel safe anywhere"*
- *"I'm afraid it might happen again"*

Stages of psychological reaction to trauma

The psychological reaction to trauma includes three relatively independent stages, which allows us to characterize it as a process unfolding in time.

The psychological shock stage

Normally, this phase is quite short-term. It is manifested through the oppression of activity, disturbance of orientation in the environment, and disorganization of activity. A person may experience denial of what has happened - this is a protective reaction of the psyche, allowing to reduce the severity of the experience.

Stage of expressed emotional reactions

At this stage, strong fear, horror, anxiety, anger, crying, accusations are present. These emotions are intense and uncontrollable. Gradually, they may be replaced by a reaction of criticism or self-doubt - the person begins to replay the situation, asking themselves questions: *"What would have happened if..."*. This is accompanied by a painful realization of the inevitability of what has happened, recognition of one's own powerlessness and self-abuse.

This phase is critical, as there are two possible paths afterwards:

- **Recovery process** - acceptance of reality, adaptation to new circumstances, transition to the third phase.
- **Fixation on the trauma** - development of a chronic post-stress state, which requires professional help.

Adaptation and recovery phase

If the person receives support and finds resources, the process of responding, accepting reality, and adapting begins. However, if the trauma is not worked through, the person may remain in a state of emotional stagnation, losing the ability to fully participate in social and professional life.

Trauma affects all levels of human functioning - physiological, personal, interpersonal, and social. It affects not only the survivors themselves but also bystanders and their families.

Kinds of psychological trauma

Secondary (vicarious) trauma (bystander trauma)

This is a reaction to traumatic events that happened to another person. It is often seen in social workers, journalists, and teachers dealing with difficult topics.

Chronic trauma

It occurs due to prolonged exposure to traumatic events - abuse, bullying at school, living through a long war, poverty, or prolonged illness.

Acute trauma

This is a reaction to a single stressful event - such as violence, the loss of a loved one, an assault, or surviving a terrorist attack.

Shock trauma

Associated with situations that are actually life-threatening - an accident, natural disaster, military conflict.

Types of trauma

Individual trauma

This is a personal traumatic experience that affects participation in the educational process. For instance, a student who has been through an arrest for civic engagement may feel intimidated when discussing human rights.



Collective trauma

Trauma that affects large groups of people - e.g., wars, political repression, mass protests. A person does not have to directly experience a collective traumatic event to be affected on some level. Such events can create distrust of society and state institutions, which is important to consider in civic education.



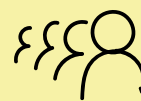
Historic trauma

This is trauma that is passed down through generations - e.g., genocides, colonization, systematic oppression. It affects the identity of groups and their social behavior.



Intergenerational trauma

Intergenerational trauma is passed down within families or communities. For example, children of refugees may experience unconscious anxiety, even if they did not personally endure war but grew up hearing their parents' stories.



Factors affecting the experience of trauma

- 1. Personality traits —**
resilience to stress and emotional maturity.
- 2. Previous experience —**
the presence of other traumas can strengthen or weaken the response.
- 3. Social support —**
access to help from friends, family, and communities.
- 4. Cultural context —**
in some cultures, discussing trauma is taboo.
- 5. Situational factors —**
availability of resources for recovery.
- 6. Age and life stage —**
children react to trauma differently than adults.

Psychological trauma is not just a reaction to stress. It can change perceptions of the world and shape fears and limitations. In civic education, it is important not to exacerbate trauma but to create space for recovery and inclusion.

Suppose the educational process takes into account the specific characteristics of the traumatic experience of its participants. In that case, it becomes a tool for social rehabilitation and support, helping people learn and overcome past experiences and find resources for the future.

The impact of trauma on the learning process in civic education



Psychological trauma is characterized by sudden behavioral shifts, extreme emotional reactions, and an "unexplained" decline in academic performance. These responses stem from self-preservation mechanisms, yet they often appear unusual or unjustified to others. This misunderstanding can lead to stigma and mislabeling of the affected individual.

A key aspect of trauma is that problematic behavior is often triggered by reminders of past experiences. These triggers can be specific cues related to the traumatic event or deeply ingrained survival responses that are difficult to change.

The more educators and trainers understand trauma's manifestations in learning environments, the better they can adapt their approach to support the unique needs of their students.

Unfortunately, we can never fully know what experiences participants in educational programs have gone through or what challenges they face outside the learning environment. The best we can do is acknowledge their reality and understand that all behaviors have underlying causes.

Here are the most common manifestations of trauma in an educational setting

- **Increased sensory sensitivity**, frequent sensory overload, intense reactions to sounds, bright lights, and touch.
- **Increased hyperactivity**, a constant state of anxiety, heightened vigilance, and nervous excitement.
- **Disproportionate emotional reactions** – sudden outbursts in response to seemingly minor events.
- **State of dissociation** – disconnection from what is happening, loss of connection with bodily sensations. A participant in an educational event might appear 'detached,' as if 'lost in thought' or completely absorbed in themselves. Sometimes, it seems like they do not notice the surrounding environment at all.
- **Increased irritability, reduced ability to tolerate frustration.**
- **Fixation on the traumatic experience** – a constant replay of painful memories or disturbing thoughts in the head, inability to "switch" to the educational process.
- **Lack of long-term planning** – the participant of the educational process perceives their actions only at the current moment and loses the ability to see their consequences.

- **Reduced cognitive flexibility** – the participant is less tolerant of change, tends to stick to routines, and avoids new experiences.
- **Declining verbal skills** – the participant speaks less than before, has more difficulty listening to information, and has difficulty understanding and processing speech.
- **Memory issues** – difficulty remembering new information, decreased ability to recall previously learned material.

Impact of trauma on executive functions

Trauma also leads to impairment of executive functions, which is expressed in the deterioration of the following skills:

- **Decision making** - the person becomes indecisive and avoids actions that require effort.
- **Information processing and classification** - difficulty in understanding new concepts, difficulty in systematizing knowledge.
- **Action planning** - difficulties in managing the learning process and completing learning tasks.
- **Abstract thinking and analysis** - reduced ability to reason and critically comprehend information.

Additional problems caused by trauma

If a person goes without psychological help for a long time, trauma can trigger secondary disorders and problem behaviors:

- **Increased impulsiveness** – a tendency to engage in risky and potentially dangerous behaviors.
- **Alcohol or substance abuse** – a desire for self-regulation through chemical stimulants.
- **Anxiety disorders** – constant anxiety about one's own safety and the well-being of loved ones.
- **Somatic symptoms** – complaints of unexplained pain, chronic tension, and the development of psychosomatic illnesses.
- **Declining academic performance** – refusal to complete academic assignments, loss of ability to concentrate on work.
- **The compulsive need for closeness** – the participant “clings” to other people, quickly becomes attached, becomes overly dependent on others.
- **Obsessive thoughts of death** – constant reflection on the meaning of life and fear of the future.

- **Depressive states** – sudden mood swings, anger, apathy, outbursts of aggression.
- **Oppositional behavior** – non-cooperation, ignoring instructions from the teacher.
- **Aggression** – irritation towards peers, conflict behavior in the group.

Experiencing trauma leads to intense and persistent fear that encompasses all areas of a person's life. In addition, feelings of shame, guilt, anger and helplessness are prevalent. Reactions to trauma vary according to age.



Psychological and behavioral consequences of trauma in young children

In early childhood, traumatic changes in brain structure and function can negatively affect intellectual development and emotion regulation, increasing fear or anxiety and decreasing feelings of safety.

For young children who have experienced trauma, the following is characteristic:

- psychological stress, expressed through enhanced physiological and sensory reactions (changes in habitual diet, sleep and wakefulness patterns, activity levels; reactions to touch and change of location);
- passiveness, quiet behavior, increased agitation;
- fear, especially fear of separation and new situations;
- inability to appropriately assess the threat and ask for protection, especially if the abuser is a parent or significant adult;

- regressive behavior (babbling, involuntary urination, whining, etc.);
- pronounced fear response;
- intense fear, nightmares, outbursts of aggression;
- guilt due to a poor understanding of cause and effect or magical thinking.

Children do not have conscious memories of trauma experienced in infancy or early childhood (before they learn to speak). However, the memory of the trauma remains in the emotional memory. For this reason, physical or emotional reminders of traumatic events can cause mental flashbacks, nightmares, and other anxiety reactions. As the child develops speech, the first conscious memories of events are formed, so traumas experienced at this stage may be remembered, although these memories are still fragmented.

Psychological and behavioral consequences of trauma in school-age children

In school-aged children, trauma negatively affects the development of areas of the brain that are responsible for managing fears, coping with problems and aggression, focusing on learning and problem-solving, and controlling impulses and managing physical responses to threats.

As a result of trauma, children may:

- experience sleeping problems that impair their attention and concentration during the day;
- have difficulty learning;
- have trouble controlling reactions to fear stimuli;
- exhibit fluctuations in behavior, from docile and compliant to aggressive;
- experience unwanted, intrusive thoughts and images;
- experience intense, specific fears related to the original threat;
- reliving the traumatic event, accompanied by thoughts of how it could have been prevented or changed;
- experiencing dramatic changes in behavior, from shy and withdrawn to extremely aggressive;
- experiencing fear of repeated overwhelming events, resulting in a change in previously preferred behavior patterns;
- thinking about revenge;
- experiencing trust issues and an inability to ask for adult protection.

Psychological and behavioral consequences of trauma in adolescents

In adolescents, trauma can affect the development of the prefrontal cortex, an area of the brain responsible for anticipating the consequences of behavior, accurately assessing threat and safety, and performing executive functions (regulating, predicting, planning, and working toward long-term goals). In addition, due to changes in dopamine levels, adolescents tend to engage in more risky behaviors.

As a result of all of these changes, adolescents who have experienced trauma have an increased likelihood of:

- reckless, risky and self-destructive behavior;
- poor academic performance and underachievement;
- “poor” choices;
- involvement in criminal activity with risk of violence;
- difficulty sleeping associated with studying, using electronic devices, or partying late;
- self-harm;
- overestimating or underestimating the threat;
- trust issues;
- re-victimization, especially in cases of chronic or complex trauma;
- abuse of illicit substances as a coping strategy for stress.

In addition, adolescents who have experienced trauma may feel weak, weird, and immature. Adolescents are often embarrassed by anxiety attacks or marked physical reactions. An acute sense of their peculiarity or uniqueness is also common. At the same time, they feel alone in their pain and suffering. Adolescents are prone to anxiety attacks, anger, and tend to experience their helplessness. Low self-esteem and depression are not uncommon.

Psychological and behavioral consequences of trauma in adults

As for adults who have suffered trauma, they are characterized by the following:

- physical weakness and manifestations of unexplained fatigue, frequent headaches, gastrointestinal problems, decreased appetite or constant hunger;
- feeling irritable and depressed, increased irritability and vulnerability, tearfulness, pessimism, loss of a sense of humor, self-pity, loss of meaning, lack of interest in others, depression;
- abuse of bad habits;
- decreased efficiency, inability to relax and distract from problems, fidgeting;
- suspiciousness and loss of trust in others;
- compulsive habits;
- inability to concentrate on work, memory problems, reduced speed of thought process, frequent mistakes;
- devaluation of one's activities and achievements.

Therefore, trauma has a significant impact on the learning process at any age, impairing concentration, memory, communication and executive functions. However, these changes often go unnoticed or are misinterpreted, which can stigmatize participants and worsen their condition.

Thus, the learning process implies that initially there is something you do not know. Some authors describe this unknown as a crucial experience for participants in the educational process. At the same time, for trauma survivors, this uncertainty is overwhelming and frightening, which can hinder the learning process or, in extreme cases, make the process impossible. In this regard, it should be remembered that knowledge is transmitted by the educator/trainer, and the learning process is based on the relationship between the educator/trainer and the participants in the educational process. Without trust, this process is extremely difficult.

It is essential for civic education providers to promote sensitivity to the manifestations of trauma. Understanding how exactly it affects the behavior, emotions, and cognitive abilities of participants allows for the adaptation of the educational process and the creation of a safe environment for learning.

An educational environment built on the principles of a trauma-informed approach becomes not only a place of learning, but also a space for recovery and growth. Therefore, it is important for civic education providers not only to deliver knowledge, but also to be attentive to the condition of their participants, helping them not only to learn, but also to adapt, develop emotional resilience and gradually live their traumatic experiences.

Salutogenic approach and recovery of resource state



The Salutogenic Approach is a principle of engagement based on maintaining the mental health of a person who has been exposed to a traumatic event. It focuses on recovery from trauma, preserving well-being, and utilizing a person's inner resources.

The term was first introduced in 1979 by medical sociologist Aaron Antonovsky in his book *Health, Stress and Coping*. Antonovsky developed the theory that perceptions of life have a significant impact on health: people who are able to find meaning and recognize the controllability of their lives find it easier to cope with stressful situations.

Based on this theory, a number of authors propose the development of **salutogenic strategies** focused on:

- Creating common life perceptions in communities and their active participation in decision-making (meaningfulness).
- Developing mental models of change and desired outcomes (comprehensibility).
- Identifying life challenges (stressors, problems) and the resources needed to overcome them (manageability).

Other researchers have adapted the salutogenic approach for application in different spheres - education, health care, social initiatives - as well as for work with vulnerable groups such as children, migrants, people with chronic diseases.

Types of salutogenic interventions

Alvarez and associates conducted a study of the salutogenic interventions impact on health and identified four types of interventions:

- 1. Individual interventions** - include health education programs, psychological counseling, and psychotherapy (cognitive-behavioral therapy, psychodynamic therapy, occupational therapy). Used when working with mental health, chronic illness, HIV.
- 2. Group interventions** – implemented in small groups with common problems. These may include support groups, therapeutic training, health education, and work with social aspects (e.g., building trust in the community).
- 3. Mixed interventions** – a combination of individual and group work. Most often used in programs aimed at managing chronic pain, improving functionality, and reducing dependence on medications.

4. Multisectoral interventions – implemented by multidisciplinary teams and focused not only on individuals but also on the environment (e.g., improving urban infrastructure, social entrepreneurship, health policy reform).

Alvarez's study found that 85% of salutogenic interventions lead to positive change without causing negative consequences.

Thus, the salutogenic approach is not just a measurement of resilience, but a holistic concept that integrates different theories, methods and strategies to develop internal resilience and human well-being.

Salutogenic Approach in Civic Education

Implementing a salutogenic approach in civic education allows to:

- Develop skills to overcome difficult situations.
- Strengthen the participants' psychological resilience
- Form a resource state for active civic participation even in crisis conditions.

In the 1990s, Israeli scholar Mouli Lahad developed the BASIC Ph model of psychological coping by studying what strategies help people adapt to traumatic events. He identified six main channels of adaptation that determine what resources a person uses to cope with a crisis situation.

BASIC Ph model

BASIC Ph is an abbreviation for six English words.

1. **Belief and values** - life philosophy, moral values, mission. It is not only religious beliefs, but also social and political values, the understanding of the meaning of life and one's role in society.
2. **Affect and emotion** – expressing feelings through conversation, art, writing, using self-regulation techniques, recognizing one's emotional reactions.
3. **Social** – support from family, friends, coworkers, belonging to a community, feeling important in a group.
4. **Imagination** – creative thinking, using imagination to overcome difficulties, the ability to dream and find unconventional solutions.
5. **Cognition and thought** – logical analysis, planning, reflection, critical thinking, ability to strategize behavior in complex situations.

6. Physiology and activities – extensive use of bodily sensations, sports, dance, meditation to restore inner balance.

Therefore, due to individual characteristics and environmental conditions, a person develops a specific set of coping strategies in adulthood, each of which relies on one of the six channels of the BASIC Ph model.

Some people may use emotions or imagination more frequently, while physical activity remains on the periphery of their coping strategies, and vice versa. In other words, some channels may be hyperactivated while others may be barely utilized. Under normal circumstances, this does not create serious problems, but when the life situation becomes a crisis, the usual strategies may stop working.

Often, a crisis occurs because of fixation on one and the same way of coping with stress. A person continues to use habitual methods, even if they do not lead to a result, remaining in an emotional deadlock. This “stagnation” in coping strategies can lead to increased stress and feelings of helplessness.

At the primary level of coping, it is important to teach a person a variety of ways to adapt, helping them to develop flexibility and the ability to switch between different strategies.

In reality, people rarely use only one coping channel; in most cases, they rely on 3-4 key strategies. However, recognizing and developing all six elements of the BASIC Ph model significantly increases resilience to stress and contributes to more effective coping with life's challenges.

Application of the BASIC Ph model in civic education

Belief and values

- Debates and discussions on human rights, democracy, civic responsibility.
- Reflection on personal values and formation of one's own mission.
- Stories of people who have overcome difficulties as a source of inspiration.

Affect and emotion

- Role-playing to recognize emotional reactions.
- Visits to memorials, thematic exhibitions.
- Group reflection, journal entries.
- Training in self-regulation techniques.

Social

- Team assignments and group work.
- Mentoring and mentoring programs.
- Organization of informal communication and networking initiatives.

Imagination

- Use of visualization techniques.
- Creative assignments (collages, theatrical productions).
- Interactive games, art-therapeutic practices.

Cognition and thought

- Analytical assignments and research projects.
- Planning of civic initiatives.
- Use of interactive educational technologies (Mentimeter, Kahoot!).

Physiology and activities

- Mindful movement practices (yoga, breathing exercises).
- Theater training, dance, sports games.
- Physical active games and energizers.

Thereby, the use of the BASIC Ph model in civic education helps not only to improve the educational process, but also to strengthen the psychological resilience of participants, providing meaningful, understandable and manageable interaction with the world.

The salutogenic approach allows people not only to overcome crises, but also to use difficult life situations as a resource for development. Incorporating its principles into educational programs helps strengthen civic engagement, build supportive communities, and develop sustainable adaptation strategies.

Creation of a safe educational environment



Trauma takes away a person's sense of control and power over their own life. The basic principle of recovery is to regain a sense of safety, stability and the ability to control what is happening.

In working with trauma, safety is key! Without proper safety, there can be no effective education and recovery. Any work with them will be ineffective unless the educational participant feels sufficiently safe.

The time it takes to reach this state depends on the depth and severity of the traumatic experience.

One of the most important life environments in which a person's development takes place is the educational space. Its psychological quality plays a key role in maintaining the mental health of the participants of the educational process, and is also a necessary condition for successful learning.

In recent decades, the area of studies - "psychological safety in education" - has been developed. Gradually the attention of scientists has shifted from emergency psychological aid in crisis situations to the creation of a psychologically safe educational environment as a factor contributing to the positive development of personality.

Approaches to Creating Safe Environments in Civic Education

1. Revising the approach to learning

- Moving away from a directive, disciplinary approach - focus on positive interaction, support and consideration of individual needs of participants.
- Creating a comfortable educational environment focused on identifying the actual needs of participants, activating their personal resources and supporting their environment.

2. Establishing a safe space

- A sense of security - the learning space should be perceived by the participants as safe and one that is guided by clear rules.
- Building a team of like-minded people - involving all participants in the educational environment, including administration and technical staff.
- Mental health support - educational programs should promote the emotional well-being of participants and staff.



3. Engagement and support strategies

- Building trust - working with participants should go beyond the transfer of knowledge to include listening to their life circumstances and experiences.
- Building a sense of belonging - creating an educational space where everyone is respected, accepted and supported.
- Discussing important issues together - engaging participants in decision-making, developing responsibility and self-advocacy skills.

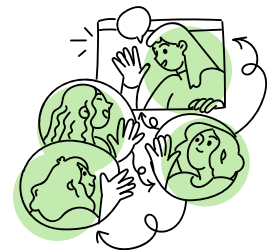
4. Developing choice and responsibility skills

- Providing choice - allowing participants to choose the format of the training increases motivation and promotes autonomy.
- Circle of trust - regular meetings (e.g. "shearing") help to create an atmosphere of openness and mutual respect.



5. Individual approach and recognition of the uniqueness of each participant

- Respect for individual needs - recognizing the strengths and weaknesses of each participant in the educational process.
- Using a variety of teaching methods - creating an inclusive educational environment that takes into account the characteristics of each individual.
- Creating a supportive educational environment as a comfortable space - the educational environment should help each participant to feel valued and develop as a person.



6. Adjusting the educational process in a crisis

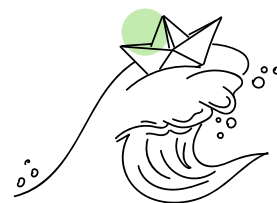
- Emotional support - providing a safe environment in which participants can openly express their feelings.
- Flexible approach - varied forms of learning and adaptation of the learning process to individual needs.
- Structuring the learning process - creating a sense of stability and predictability, especially in complex situations.

7. Integrating life skills and risk communication

- Developing skills in non-violent conflict resolution, effective interpersonal communication, prevention of mental illness and safety in daily life.
- Awareness of contemporary risks - programs must address real threats and challenges, especially in crisis situations.

8. Partnerships to strengthen the educational environment

- Community involvement - collaboration with parents, youth organizations, local initiatives.
- Supporting non-formal education - implementation of community projects aimed at creating an inclusive educational environment.



Examples of creating a safer environment

Various methods of a trauma-informed approach help create an educational environment in which participants feel safe and comfortable.

1. Verbal techniques

- Request permission for physical contact - even if the work involves body contact (it is important to consider nonverbal cues: a person may formally say "yes" but express discomfort with their body).
- Explain to participants in advance what is expected of them - for example, give details about the process of the exercise and the time it will take to complete the tasks.
- Avoid directive commands - it is better to offer options instead of rigid instructions ("Let's try...", "How about this?").
- Avoid making assumptions about the participant's internal state - instead of "Do you feel well?" it is better to ask: "How do you feel?".

2. Physical components of the interaction

- Do not stand behind the person unless necessary (if it is important, explain why it is needed).
- Sit next to the person if the participant is in a sitting or lying position to avoid a dominant position.

- Avoid positioning the person with their back to the group - especially if exercises involving bending or turning are required.
- Avoid unwanted touching - especially on the face, head and sensitive areas.

3. Space organization

- Ensure good lighting and ventilation - avoid dim or overly bright light.
- Adhere to an open door policy - participants should be able to leave the session at any time without explanation.
- Provide access to water, tea - having small facilities helps to create a comfortable atmosphere.
- Cover mirrors or windows if necessary - especially if external factors may cause anxiety.
- Avoid harsh odors and loud noises - as they can provoke stress reactions.

It is not possible to fully anticipate all possible triggers, but it is possible to strive to make the educational environment as gentle and safe as possible.

It is important to follow the following strategy: a safe teacher/trainer is a safe participant.

As the educator/trainer gets to know the participant better and builds a closer relationship with them, the educator/trainer is increasingly capable of noticing the participant's needs that they may not voice. It also helps the educator/trainer to recognize the first signs of a participant's growing anxiety or distress before overwhelming feelings take over and lead to a "fight or flight" response. It also gives the educator/trainer the opportunity to take preventative measures, to reduce participant tension and stress. In the longer term, this can be useful in developing safe strategies to reduce tension.

Empathy, calmness and self-control of the teacher/trainer, their ability to control their own emotional reactions play a key role in this case. Other important aspects are posture, gestures, facial expression and tone of voice. It is crucial that the non-verbal cues of the educator/trainer (often not fully realized) convey a sense of safety. A participant in the educational process can perceive the teacher/trainer at different levels of perception, to calm down and learn to cope with tension.

Therefore, it is important that the educator/trainer is constantly prepared to work on their inner balance, sense of safety and psychophysical state.

We will inevitably make mistakes because everyone is different and it is impossible to anticipate all their needs. However, the key rules are openness, humanity and willingness to dialogue.

It is important to strive not for authoritarian control, but for a supportive relationship where participants can feel heard, accepted and protected. This approach not only enhances the effectiveness of the educational process, but also contributes to the recovery and development of participants who have experienced traumatic experiences.

Identifying the participants' needs



A need – is a state of a person's demand for what is necessary for the maintenance and development of his/her life activity and society as a whole. It is the difference (gap) between what is and what should be.

According to the theory of needs of the American scientist Abraham Maslow, there are **five main categories of needs**:

- **Physiological** – basic needs necessary for survival: food, drink, clothing, shelter, the ability to live with family.
- **Safety** – the need for stability and protection of self and immediate environment: home security, health insurance, job, financial reserves.
- **Social** – the need for communication, belonging to a group, friendship, love.
- **Respect and recognition** – the need for respect and recognition from society.
- **Self-actualization and self-expression** – the desire for self-development, realization of potential.



Analysis of Learning Needs

On the one hand, needs analysis helps to identify the knowledge, skills, and abilities participants need to achieve educational goals; on the other hand, it helps to identify the necessary conditions that civic education providers need to provide in order for educational participants to focus on learning.

A trauma-informed approach involves understanding that participants may have experience of psychological trauma. This requires special attention to their emotional and cognitive needs.

Identifying needs in this context is critical because it allows to:

- Create a safe environment that supports recovery and psychological well-being.
- Identify participants' basic needs such as feeling safe, emotional support, availability of resources, and adapted materials.
- Prevent re-traumatization and increase motivation to learn.

Common approaches and tools for identifying needs

- **Questionnaires and surveys** – structured surveys help to identify general and specific needs of participants. Surveys can cover topics of comfort in the learning environment, experiences, expectations and specific learning needs.
- **One-on-one interviews** – talking with participants allows for a deeper understanding of their experiences and current needs. In a trusting environment, participants are more willing to share their experiences and challenges, allowing the approach to be customized to their unique needs.
- **Focus groups** are a discussion method that helps participants share their opinions and needs, as well as find support among those with similar experiences. This is especially helpful in building a sense of belonging and support.
- **Participant observation** – pre-training observation helps to identify participants' true needs in a familiar environment. During the training, it helps to assess comfort and engagement levels, especially if participants find it difficult to express their needs directly.

Needs assessment stages

1. **The preliminary stage** – informing the community about the process, creating working structures, identifying target groups, developing research goals and objectives, identifying necessary resources, developing the research methodology and schedule, and piloting the tools.
2. **Conducting the needs assessment** – collecting data according to the developed methodology: analyzing the situation of the target group, mapping social services, surveying target groups and experts, conducting focus groups and interviews.

- 3. Analyzing the collected data, preparing a report and making recommendations** – statistical processing and analysis of primary data in accordance with the methodology. Devising indicators, identifying factors, analyzing responses according to variables to identify key social phenomena.
- 4. Results dissemination at the community level** – organizing focus groups, round tables, public hearings, publishing reports to familiarize the community with the results of the research. This promotes awareness of social problems, changes in attitudes towards vulnerable groups and possible assistance in problem solving.
- 5. Development of a Strategic Plan for Community-Level Social Services** – this stage is not a mandatory part of the research, but is a natural follow-up to it. It expresses the sustainability of the needs assessment and allows for effective implementation of the recommendations into the service delivery system.

In the sections below, we examine the key characteristics of forced migrants, people with experience of armed conflict and people with experienced discrimination, based on the experience of the author's team who have worked with survivors of traumatic events in different contexts. Of course, the analysis of these groups can be much more detailed and variable depending on the specific context, region and social environment. However, the observations presented below will help to better understand the basic needs of these participants and create an educational environment conducive to their inclusion and development.

Specific needs of forced migrants

- These participants may need an increased level of security and predictability of life in a new place.
- It is important for these participants to understand the rules, structure and content of the curriculum, as well as their rights and responsibilities.
- They often have a need for resources in their native language, customized resources, and an understanding of and respect for the political and cultural sensitivities of their group.



Specific needs of people with experience of armed conflict

- These participants may have trouble trusting and need a respectful approach without pressure.
- They particularly need a supportive educational environment where they feel in control of the situation.
- There may be a need for flexibility in the educational process, ensuring regular breaks and support in managing stress.
- Also acceptance by others is important for this group, the development of social ties, and the fulfillment of needs for communication, affection, care for others and attention to self.



Specific needs of people with discrimination experience

- These participants need empathy and support to regain a sense of self worth and safety.
- It is important to create a space where their experiences are recognized and respected and where they can freely express their thoughts and feelings.
- When working with these participants, it is important to be sensitive to their needs for support related to self-esteem and to avoid situations that may provoke distressing or traumatic associations.

Who benefits from conducting a needs assessment?

Target groups –

the research identifies their real needs and develops recommendations to address them.

Service provider organizations –

the findings help to modify and improve educational and social programs for greater effectiveness.

Local authorities –

by identifying needs, the authorities can better plan the development of social services and budget allocation.

Non-governmental organizations –

with the results of the needs assessment, they will be able to more accurately target their activities and more effectively seek financial resources.

The whole community –

the research raises people's awareness of their community's strengths and weaknesses, enabling them to guide future actions and participate in the development of solutions.

Needs assessment is not a one-time mechanism - it must be done regularly because people's needs change due to social, economic, and political factors.

Regular needs assessments allow for the creation of educational programs that truly meet the needs of the target audience, as well as contribute to the effectiveness of social and educational initiatives.

Do no harm principle in civic education



The “do no harm principle” (*Latin: Primum non nocere*) is a concept that originated in medicine and is no less relevant to education. This principle implies the creation of an educational environment that not only does not harm participants, but also contributes to their development and well-being.

The principle requires providers of civic education to be aware of the possible consequences of each educational step, especially when discussing complex and sensitive topics. It is important not only to impart knowledge, but also to do so in a way that does not harm the psychological state of the participants, their worldview and perception of reality.

The principle includes protection from psychological violence in the learning process, matching the content and methods of training to the age and other individual characteristics of the group, as well as managing the atmosphere during the educational process. The principle requires the civic education provider to be able to adapt to the audience, recognize sensitivities and select appropriate methods and materials that enrich knowledge and build skills without jeopardizing the emotional state of the participants.

Components of the principle

Safe and comfortable educational space

Includes physical safety (no violence, no traumatic situations) and psychological comfort (mutual support, empathy, no traumatizing factors).

Empathy and open dialog

Implemented through creating an atmosphere in which participants feel heard, respected and can freely express their thoughts and feelings without fear of judgment from other participants, facilitators and organizers.

Openness to different points of view

Civic education should take into account and respect the different perspectives and cultural backgrounds of the participants, without imposing certain views and ensuring freedom of choice in discussing topics.

Personalized approach

Adapting learning to the needs, abilities and characteristics of each participant. This includes variation in learning trajectories, allowing everyone to achieve educational goals in a way that is comfortable for them.

Professionalism of civic education providers

Teachers and trainers should be prepared to support participants in the learning process and, if necessary, to mobilize additional professionals or refer participants to appropriate support services.

Why is the principle important?

- Preserves the mental health of participants, especially when discussing difficult and controversial topics that may cause anxiety, stress or feelings of depression.
- Enhances the effectiveness of learning, because in a safe and comfortable environment, participants better absorb information, are more motivated and, as a result, more easily transfer the acquired knowledge into real life.
- Prevents negative social consequences that the educational process may cause, especially if the content of the program contradicts the political, cultural or social beliefs of the participants and their environment.

When it comes to working with people in difficult circumstances or experiencing serious trauma, the do no harm principle is of paramount importance. In these cases, it must be adhered to particularly strictly, as an improper approach can exacerbate the stress of the participants and lead to re-traumatization.

The do-no-harm principle is an integral part of civic education, as it creates a safe space for learning, free dialog and self-expression.

Avoiding retraumatization



People who have experienced trauma (including those with PTSD) are characterized by recurrent and spontaneous memories of the traumatic event(s) in which they re-experience the traumatic experience over and over again. These memories are accompanied by intense feelings of fear or terror. The memories may take the form of visual images, sounds (e.g., gunshots), smell (e.g., the odor of the assailant), or other sensations. They may return in the form of intrusive memories, nightmares or, in severe cases, so-called flashbacks - involuntary recurring memories accompanied by illusions or hallucinations. During flashbacks, a person may believe for a moment that they have gone back to the time of the traumatic event, re-experiencing it and acting accordingly. Thus, re-traumatization occurs when a person re-experiences a previously traumatic event consciously or unconsciously. It may be triggered by circumstances that remind one of the original trauma, such as smells, physical space, lighting, images, sounds, or certain memories.

From the moment of trauma, the person lives in a constant state of threat. Stress, anxiety, fatigue, and anger are things they may experience almost every day. This leads to inevitable psychological pain. He may also experience retraumatization, but it is avoidable.

Participants in educational activities can be offered ways to **independently avoid re-traumatization, such as:**

Be in control

One of the best ways to deal with re-traumatization is to control your daily routine. For example, taking walks, relaxing, calling a loved one, or listening to revitalizing or soothing music can help reduce anxiety.

Let go of catastrophic thinking

Catastrophizing and focusing on "What if?" questions can cause negative emotions and increased anxiety. There is no real benefit to obsessive worrying.

Avoid triggers

Triggers are what a person is most sensitive to, what bothers and distresses them. It is what destabilizes his mental state. You should avoid discussing certain topics that cause emotional pain and avoid reliving negative emotions.

Limit your media presence

Limiting the consumption of informational content helps in controlling anxiety levels. Choose a few reliable sources of information, read the news no more than 2-3 times a day. It is helpful to turn off push notifications on your phone from time to time to minimize news flow and avoid overload.

Spend time with loved ones and practice appreciation

Spending time with loved ones and practicing appreciation can also help reduce stress levels. Talking with family and friends, discussing how you feel, and expressing gratitude for simple but important things (food, home, schooling, work) promote emotional balance.

Talk to a mental health professional

If you are feeling depressed and experiencing re-traumatization, it is important to seek support from a mental health professional. A licensed professional can offer individualized anxiety management strategies.

Recognizing Triggers

A trigger is a stimulus that reminds a person of the trauma, causing intense stress, panic, and flashbacks, causing the person to relive the traumatic event. For example, for a combat participant or witness with PTSD, the sound of fireworks may act as a trigger, reminding them of explosions and bombings, which plunge them into painful flashbacks. A person who was bitten by a dog as a child may emotionally revert to a state of fear each time they see the same breed of dog and feel the urge to run away. A child who has been bullied may react acutely to words he or she has been teased with in the past.

When a person faces a trigger, their body reacts just as it would in a real stressful situation - it is as if they are in a moment of trauma. The sympathetic nervous system is activated, triggering a self-defense mechanism that includes three possible reactions: fight, flight, or freeze. The body releases the stress hormones adrenaline and cortisol. The heart rate increases, the lungs expand, and the digestive and immune systems are suppressed because they are not a priority in a survival situation.

Blood drains from the prefrontal cortex, the part of the brain responsible for planning, decision-making, emotional regulation, and volitional control, and flows to the primitive structures responsible for the survival situation.

As a result, the ability to control emotions, use logic to analyze the situation, make decisions and overcome stress is suppressed. A person experiences severe anxiety, gives in to impulses - to run away, to yell, to attack. So the trigger can become the cause of a panic attack or nervous breakdown.

And the reaction may seem disproportionately violent compared to the magnitude of the trigger. But the point is that the trigger causes the person to mentally relive the actual trauma, at which point they lose touch with reality. For example, for a participant in an educational event who experienced the trauma of rejection as a child, a missed call or unanswered message during the event may trigger panic because it emotionally throws them back to their childhood where they were abandoned by their parents.

Triggers are very individualized and there are many types of triggers. What will be a trigger for one person may go unnoticed for another. However, literally anything can be a trigger.

Types of Triggers:

- **Emotional trigger** – causes feelings of fear, anxiety, sadness or irritation.
- **Behavioral triggers** – can lead to the repetition of undesirable habits, such as smoking or overeating in a stressful situation.
- **Cognitive trigger** – promotes automatic thoughts that can distort perceptions of reality.

To put it simply, a trigger is a “button” that, when pressed, triggers a reflex response. A person may or may not realize the trigger mechanism itself, but the effect is quite powerful and sometimes unexpected.

Trigger examples:

- A specific time: time of day, time of year, anniversary of the trauma or loss of a loved one;
- The place in which the traumatic event occurred;
- Sensory stimuli: loud noises or screaming, taste of food the person ate shortly before the incident, odor, physical sensations associated with the trauma;
- Harassment or unwanted touching;
- Reading or watching content that reminds one of the traumatic event (movie violence, news photos and videos);

- Situations, such as a crowded place, a person running;
- Words, such as those the person has heard from abusive parents;
- Situations where the person is laughed at, rejected or ignored;
- Emotions such as stress, anger, loneliness;
- Physical pain;
- Argument.

When a person encounters a trigger, they are no longer present in the moment or in control of the situation: the trigger makes them act automatically, obey an involuntary impulse, and behave in a certain way.

The first step to regaining control is to try to take a brief moment between the impulse arising from the trigger event and your reaction.

Recognize the impulse, make a choice about how to behave, and only then act. Marshall Goldsmith, in his book *Triggers*, describes this as moving from a *Trigger → Reaction* pattern to a *Trigger → Impulse, Awareness, Choice → Behavior pattern*.

Trigger state and its signs:

- **Changes in behavior:** sudden outbursts of crying, avoidance of certain topics or situations, deterioration in academic performance, concentration problems, social isolation.
- **Physical symptoms:** headaches, abdominal pain, muscle tension, hand tremors, flushing, sweating, tremors.
- **Emotional symptoms:** a sudden outburst of emotions: fear, anger, sadness, irritation.
- **Verbal symptoms:** comments on past traumatic experiences, expressions of fear, anxiety, or worries.

It is important to understand that a trigger is not a synonym for weakness, but a normal mechanism embedded in the human psyche for protection and survival. It helps to react quickly to potentially dangerous situations. The problem arises when a trigger response is set off by a “false alarm” or if it is so strong that it interferes with daily life.

Avoiding triggers while teaching

It is essential to keep in mind that participants in the educational process may have different experiences and levels of sensitivity to certain topics. Therefore, the teacher/trainer must be flexible and sensitive to the individual differences of each participant in order to create the most comfortable and safe environment possible.

Individualized approach

The teacher/trainer needs to take into account the individual needs and emotional state of the participants. To this end, it is crucial to create an atmosphere of trust and support where participants can talk openly about their experiences, fears and possible triggers. The opportunity to share their emotions in a safe environment helps to reduce anxiety and promotes better comprehension of the training material. It is important to give participants the right to choose whether they want to participate in specific educational activities or discussions without pressure or coercion.

Changing topics and content

Before starting educational sessions, the teacher/trainer should carefully analyze resources and topics to identify potential triggers in advance. If a particular topic is likely to provoke negative reactions, it is important to adapt its presentation to minimize possible risks. In some instances, for participants who find it difficult to discuss certain issues, alternative assignments can be offered to allow the material to be worked through in a less emotionally charged manner.

The teacher/trainer should also be prepared for the fact that trigger reactions may occur unexpectedly, and it is important to be able to react quickly to the situation, offering participants the opportunity to temporarily withdraw from the discussion or change the format of the lesson, to perform self-soothing techniques. Openness to dialogue, flexibility in approach and empathy will help to avoid retraumatization and create an educational environment conducive to safe learning and personal growth of participants.

Psychological first aid



Just as it is important that civic education providers know how to administer first aid, it is essential that they have psychological first aid skills. In today's world, especially during times of armed conflict, political crises, natural and social upheaval, education participants may find themselves in the midst of a newly experienced or current severe crisis event. The use of psychological first aid can prevent problems from escalating and becoming chronic.

Psychological first aid (PFA) – is a set of measures of universal support and practical help to neighbors who are suffering and need support.

Generally, PFA consists of:

- fostering a sense of safety, connection with others, calm and hope;
- providing access to social, physical and emotional support;
- building confidence in the ability to help oneself and others.

The PFA includes the following aspects:

- the unobtrusive provision of practical help and support;
- assessment of needs and problems;
- helping to meet immediate needs (e.g. comfort in the educational environment, availability of water, breaks, silence, safe spaces);
- being able to listen to people, but without forcing them to talk;
- being able to comfort and help the person to calm down;
- helping to connect with appropriate support services (e.g. psychological, social or legal support);
- protection from further harm, including preventing retraumatization in the educational setting.

Which is not PFA

- It is not assistance provided only by professionals. PFA can also be provided by educators and coaches who have been trained.
- It is not professional psychological counseling. Its purpose is to create support, not to work on the trauma in depth.
- It is not a forced conversation. A person should not be forced to share their experiences, but it is important to give them the opportunity to be heard.
- This is not a detailed dissection of the traumatic experience. It is important to help the person regain a sense of safety, not to analyze the traumatic events.

When and Who Needs PFA

PSA is for people who are under stress as a result of a recent or current crisis event. However, not every person who has experienced a crisis needs or is ready to receive SPT. It is important to respect people's choices and not to impose help on those who do not want it at the moment.

Some people may need more help than PSA. In these cases, it is helpful to be able to recognize the limits of one's capacity and to involve professionals (medical professionals, psychologists, social workers).

People who need urgent professional help:

- having severe physical injuries that require emergency medical attention;
- suffering from a disturbed mental state that does not allow them to take care of themselves or others;
- showing significant signs of suicidal risk or aggression;
- demonstrating disorientation, severe anxiety, panic attacks.

While people may need help and support long after a crisis event, PSA is designed to support those who have just been affected by it. You can provide PSA when you first come into contact with people in distress. This is usually at the time of or immediately after the event, but sometimes a few days or weeks later, depending on how long the event lasted and how traumatic it was.

PFA can be provided in any reasonably safe place - either at the scene of an accident in the case of a single incident, or in places where victims are being assisted, such as health facilities, shelters and refugee camps, schools, or food or other aid distribution points. Ideally, try to provide PFA where you can talk to the person without being interrupted by others.

Crisis situations are often chaotic and there is an urgent need to act. However, before getting to the scene where the crisis event has occurred, try to get accurate information about the situation. Get answers to the questions listed below:

1. Crisis Situation

- What happened?
- When and where did it happen?
- What is the estimated number of affected individuals, and who are they?

2. Available care and support

- Who is responsible for meeting basic needs: providing emergency medical care, distributing food and water, providing shelter, tracing family members?
- Where and how can people get support?
- Who else is providing assistance? Is the local community involved in the response?

3. Security threats

- Has the crisis event ended or is it still ongoing - e.g. earthquake aftershocks, escalation of armed conflict?
- What are the dangers: militants, mines, destroyed infrastructure?
- Are there areas that should be avoided for security reasons (e.g. with a clear physical risk present) or where you are not allowed access?

Answering these important preparatory questions will help you understand the situation so that you can more effectively deliver the PFA and know how to keep yourself safe.

The three basic principles of PFA are to observe, listen and guide

These principles will help you to properly assess the crisis situation and ensure your safety at the scene, find your approach to the victims, understand what they need and direct them to where they can get practical help and information.

Observe

In a crisis situation, conditions can change rapidly. The situation at the scene is often different from the information previously received. Thus, it is important to take some time - at least a few minutes - to assess the situation before offering assistance.

Check safety conditions

If you find yourself in a crisis situation suddenly, with no time to prepare, take a moment to look around. These few minutes will help you stay calm, avoid putting yourself in danger, and think before acting. If you are not sure it is safe to be in the midst of a crisis, stay outside and try to get help for those in need.

Check if there are people who need emergency medical care or special care and protection

Remember, you can only give first aid if you have received special training. Try to get help for people who need special support (children, elderly people, people with disabilities, etc.) or refer them to help points.

Check if there are people in severe distress

Analyze if there are people on site who are experiencing acute stress reactions - aggressive, appear depressed, unable to move or in shock - who need PFA and how to help them. Not only the injured person may need help, but also companions who are physically (perhaps at first sight) unharmed, as well as witnesses to the incident, such as bystanders. Do not leave people with severe stress reactions alone, provide support, be there for them until their condition improves or until you are able to enlist the help of professionals.

Listen

How you communicate with someone who is distressed is very important. By remaining calm and showing understanding, you help the person being affected to feel safe, protected, understood, respected and properly cared for. People who have been through a stressful situation may want to tell you what happened to them. However, it is important not to force them to talk about their experiences. It may be important to them that you remain close to them, albeit silently. Tell them you will be around in case they need help or support, offer practical help such as food or a glass of water.

Build rapport

Introduce yourself - say who you are and what your role is. Let the person know that you are here to help, or that help will arrive soon, that you have taken care of it.

Make sure the person feels safe

It is best to have the conversation in a safe, isolated place.

Inform the person about confidentiality**Ask how to help**

While some needs may be obvious, such as clothing, nevertheless, always ask survivors what they need and what their concerns are.

Ask the person if they want to talk about what they have been through, their concerns and feelings

Listen to them carefully, try to reassure them by telling them that their reactions are normal, and make sure they are not left alone. If they don't want to talk, just stay close by.

Ask if there is someone who can take care of them or someone to talk to at home**Referral**

Referring people to a place where they will receive practical help is one of the main aims of the PFA. Remember that PFA is often a one-off intervention and you may only be with the affected person for a short time. They must apply their own coping skills to further their recovery. Help people to help themselves and regain control of the situation.

Basic needs

Such as shelter, food, water and sanitation. Immediately after a crisis event, try to help survivors meet their basic needs such as food, water, shelter and sanitation. Find out what is specifically needed: medical care, clothing or infant feeding devices (nipples, bottles), medical care for injuries or chronic illnesses. People under stress are overwhelmed by anxiety and fear. Help them analyze their immediate needs, identify their highest priority needs, and address them. Being able to address at least some of the issues gives a person a sense of control over the situation and strengthens their ability to cope.

Clear and accurate information about the incident and available help services

Provide information about the event, where and how to get specific help. People experiencing a crisis situation want accurate information:

- a) about what happened;
- b) about their loved ones or other survivors;
- c) about their safety;
- d) about their rights;
- e) about how they can get help and basic necessities.

Try to direct them to where they can get affordable help

It can be difficult to get accurate information in the immediate aftermath of a crisis event, and the situation may change. It may not be possible to answer all questions at once, but if possible, try to find out where and when you can get reliable information about the current situation, security information, assistance available, and the whereabouts and condition of the missing or injured. If assistance (medical, tracing, shelter, food distribution) is being provided on the ground, make sure people know about it and can access it. Ensure that vulnerable people are also aware of the assistance being provided.

Communicating with family members, with friends and getting social support

Help to get in touch with loved ones. Experience shows that people who receive timely social support cope better after a crisis. Therefore, helping people to connect with loved ones is an important part of providing PFA. Help family members to stay together and children to stay with their parents and loved ones, or give them the opportunity to contact friends and relatives who can support them, for example by phone. If it is clear to you from the person's words that they could benefit from a religious ritual or support from clergy, help them contact their spiritual community. Bring the survivors together so they can help each other. For example, ask the person to help take care of the elderly or help lonely people connect with others in the community.

Feedback

Agree on how you will keep in touch (by phone, visits, group meetings), agree on a meeting schedule if needed. Exchange contact details and record where the survivor is currently located, whether their location will change, and if so, how to find them.

Calming and support techniques in civic education



Stress mobilizes the body's resources, but at the same time, prolonged external stress leads to exhaustion, reduced resistance, frequent illnesses and mental disorders. Consequently, relaxation and stress management skills are increasingly important.

When we are in the midst of an anxiety, flashback or panic attack, our frontal lobes stubbornly refuse to work. We feel like it's just impossible to focus or think clearly about anything, and sometimes our thoughts rush by so fast and turn into such a mess that it's simply impossible to keep track of them. We start to feel like everything around us is a blur, or when someone has been talking to us for a few minutes, we suddenly realize that we have no idea what they are talking about.

Sometimes we feel paralyzed or frozen, unable to make even the slightest movement or utter a word. This can also happen to us when we experience emotions that are too intense, such as feelings of abandonment, resentment, hopelessness, fear or hopelessness.

All of these can also happen during a civic education event. As providers of civic education, you can help and support the participants in your event. To do this, it pays to know basic calming and supportive techniques to offer them to those they can help.

Visualizing pleasant images

Being able to fantasize can be a great way to relax. Try to get comfortable and take a moment to immerse yourself in the ideas below:

- Can you imagine a summer meadow and a light breeze ruffling the grasses and flowers?
- Can you imagine clouds floating, shimmering in the rays of the dawn sun?
- Can you imagine yourself in a hammock in a secluded corner of the garden?
- Can you picture the shore of a reservoir on a clear day, imagine the sounds of waves crashing on the shore?
- Can you imagine stroking a kitten's soft fur?

It will be useful to keep track of your feelings after the exercise, as well as to imagine those scenes that you associate with peace and harmony (in addition to the suggested list). There are no criteria for the correctness of the exercise, because imagination is a manifestation of individuality.

Breathing exercises

Breathing is usually an unconscious process. In times of stress, breathing itself becomes more rapid, which accelerates the heart rate, increases blood pressure and can trigger an anxiety attack.

- **Mobilizing breathing:** take a deep breath (about 4 seconds), hold your breath for 2 seconds, and then exhale vigorously, loudly and briefly (2 seconds).
- **Calming breathing:** inhale slowly through your nose (4 sec), pause for 2 seconds, and then exhale for 8 seconds.

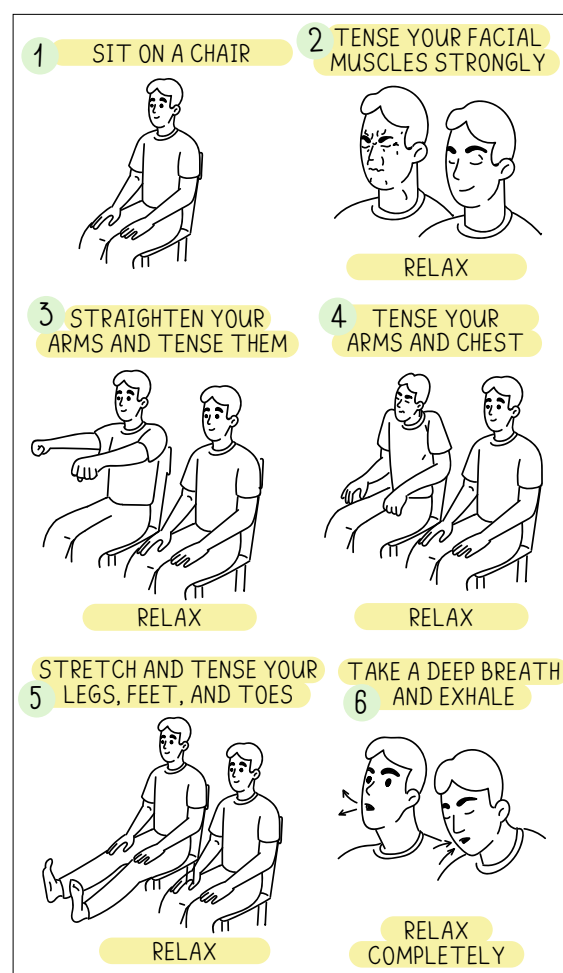
Creative Expression

Find ways to express your feelings through creativity. Try drawing or coloring, sculpting with plasticine or clay, writing poems or stories, playing a musical instrument or singing. This exercise does not imply a perfect result, it's the process that counts.

One of the effective ways to combat stress is arbitrary dance movements to your favorite music. Together with energy, worries, fears and excitement are released.

Muscle relaxation

The effect of exercises - in calming and getting rid of tension. For example, progressive muscle relaxation according to Jacobson.



Grounding

This technique will help you release tension, shift your attention from obsessive thoughts and calm down, that is, shift your focus from anxious thoughts to reality.



NAME:

 THINGS THAT YOU SEE 5 THINGS THAT SURROUNDING YOU	 4 THINGS YOU CAN TOUCH	 3 THINGS YOU CAN HEAR	 2 THINGS YOU CAN SMELL	 SOMETHING YOU CAN 1 TASTE
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Cognitive Loads (Distract Your Brain)

- Play the “Categories” game with yourself: choose a category, such as color, animals, food, and try to name at least 10 objects from that category. You can also use the alphabet and try to name objects from that category for each letter of the alphabet, starting with A, B, C, etc
- Choose a shape (triangle, circle, square) and try to find all the objects of that shape around you. You can do the same with colors - for example, find all the green objects in the room.

Four Elements Complex Technique (EMDR Self-Help)

- **«Earth»** will help you feel safe and secure. To do this, put both feet on the ground, feel the support of the chair you are sitting on, and concentrate on the things around you. Body techniques can also be used.
- **«Air»** helps you focus with a breathing exercise. For example, you can use “phone breathing”: take your smartphone and exhale by running your finger along the long side of the screen. Turn the phone around, pause and inhale, moving your finger along the short side. Do this a few times. If there is no phone, you can look at something rectangular - a door or window.

- **«Water»** will allow you to switch to relaxation. During stress, there is often a feeling of dryness in the mouth, so you need to stimulate the production of saliva, for example, by imagining the taste of lemon and moving the tongue. In this way, digestion is activated, which in turn promotes relaxation.
- **«Fire»** will finally set the mood for positive feelings. Imagine a pleasant image or a safe place, find positive feelings within yourself and move towards this light source.

Keep a journal

Devote 10-15 minutes a day to writing down your thoughts and feelings. You can:

- describe the events of the day and your reactions to them;
- write down fears and anxieties;
- note moments when you felt strong or calm.

Keeping a diary regularly allows you to track your progress in therapy and see recurring patterns of behavior that need adjustment.

Creating a “safe place”

Imagine a place where you feel completely protected and at peace. This can be a very real or imaginary place. Describe it in detail: what you see, hear, feel, smell. Practice visualizing this place every day so that you can easily refer to this image in times of stress.

The results will be better if you have experience of practicing these exercises regularly.

Proficiency in calming and supportive techniques enables civic education providers to not only maintain their inner balance, but also to effectively help students cope with emotional stress.

The use of grounding techniques, breathing practices, cognitive loads, and creative expression in the educational process can help reduce participants' stress levels, increase their concentration, and increase their motivation to learn. A teacher/trainer who can recognize signs of anxiety, stress, or panic attacks in participants can offer simple and effective exercises in a timely manner, allowing educational participants to regain control of their emotions and continue learning in a comfortable environment.

In addition, visualization techniques, journaling, and relaxation exercises can be incorporated into the learning process as a warm-up or closing element, helping to build trust and enhance learning. The use of such techniques is especially important in armed conflicts, political crises and other unstable situations, when participants in educational programs need additional psychological support.

Thus, mastery of these tools not only makes the educational process more accessible and inclusive, but also allows teachers/trainers to act as support figures who help participants not only to learn, but also to master the emotional regulation skills that are so necessary in the modern world.

Emotional Burnout Among Civil Education Providers



Working in civic education with trauma survivors is emotionally and psychologically stressful and can lead to burnout. The term was introduced by American psychiatrist H. J. Freidenberg in 1974. J. Freidenberg in 1974. **Emotional burnout syndrome** is a physical, emotional and mental exhaustion in which productivity in work is impaired, fatigue, insomnia and increased susceptibility to illness.

People who work in helping professions are more often exposed to the syndrome: doctors, social workers, psychologists, career counselors, HR-specialists, teachers (including providers of civic education). Professionals in these professions are constantly confronted with, and to varying degrees involved in, the negative experiences of their clients and patients. People who choose a job with a lot of communication are more likely to be in a situation of long-term stress due to the need to constantly control themselves.

The reasons leading to the syndrome in civic education providers are many. The main cause of burnout is emotional overload caused by the relationship between the provider and participants of the educational process. The danger of such relationships is that professionals deal with other people's problems that carry a negative emotional charge. Such a situation is experienced as a long-lasting stress and manifests itself in a change of attitude towards oneself and others to a negative one.

The onset and development of burnout is strongly influenced by the characteristics of our reactions to stress, as well as:

- **Emotional engagement.** When interacting with trauma survivors, civic education providers feel a deep emotional engagement.
- **Constant situational control.** Ensuring the safety of event participants, high levels of empathy, and controlling one's reactions create additional stress.
- **Exceeded expectations and high levels of responsibility.** Civic education providers often take on too much, expecting to be able to solve or alleviate many of the participants' problems.
- **Lack of support and resources.** Lack of support as well as administrative overload can add to the strain.

Symptoms of emotional burnout

Emotional burnout syndrome has a wide symptomatology. Five groups of symptoms are distinguished:

- 1) **Emotional:** pessimism, cynicism, irritability, anxiety

- 2) Physical:** exhaustion, insomnia, pressure spikes, rapid fatigue.
- 3) Behavioral:** recycling, lack of appetite, bad habits, frequent injuries.
- 4) Cognitive:** decreased interest in ideas, apathy, preference for patterns, formality.
- 5) Social:** decreased interest in hobbies, deteriorating relationships with loved ones, feelings of isolation.

Phases of burnout

Burnout develops gradually and goes through several phases:

Stress phase

Realization of psychologically traumatic moments of professional activity. General irritability increases, dissatisfaction with oneself, profession, position and functions begin. A feeling of despair, anxiety appears.

Phase of resistance

The emotions economy is switched on - selective emotional response in working contacts, depending on the mood. There is a desire to justify the lack of emotional inclusion or negative attitudes toward participants and partners.

Exhaustion phase

There is a drop in overall energy tone and weakening of the nervous system.

The consequences of emotional burnout can be devastating: personality deformation with a change in the system of values can begin. However, its occurrence can and should be prevented. The main goal of preventing and overcoming the syndrome is to increase the level of stress resistance. For this purpose it is important to accumulate and timely use resources.

Each of us has its own amount of resources, which is spent when we meet with stress. The resources include: optimism, feeling of control over the situation, communication skills, self-efficacy. On the contrary, perfectionism, negative attitude to oneself and others, low self-esteem, devaluation of achievements increase susceptibility to stress and take away strength in the fight against it.

How to avoid burnout and maintain mental balance

Development of self-reflection and mindfulness skills

Regular reflection helps to monitor one's own emotions and states (keeping a diary, allocating time for daily analysis of thoughts and emotions).

Protecting personal boundaries

Clear personal boundaries help to avoid transferring participants' emotional tensions onto themselves.

Regular rest and recovery

Physical and mental rest is important to maintain balance. This can be accomplished through breathing exercises, meditation, and physical activity.

Peer support and participation in intervision and/or supervision

Working with a supervisor or participating in support groups can help reduce emotional stress, make it possible to discuss difficult situations with peers, and gain an objective perspective.

Focusing on accomplishments rather than difficulties

Recognizing your own successes (e.g., keeping an achievement diary) helps you see the positive results of your work and not dwell on difficulties.

Taking care of physical health

Regular exercise, healthy sleep and proper nutrition builds resilience to stress and increases energy levels.

Conscious work on emotional reactions

If a topic evokes a strong emotional response, it is important to take short breaks and practice stabilization techniques, such as breathing exercises.

Providers of civic education should be informed about the causes, consequences and signs of emotional burnout from the moment they are introduced to the profession. It is preferred that this information should be provided regularly, which will help to minimize the risk of burnout.

The most effective is the prevention of emotional burnout at early stages. In case of severe burnout, the employee should give up work for some time and have a full rest. It is desirable to seek support from a specialist: a psychologist or psychotherapist.

The following conditions of activity organization can be preventive measures to prevent emotional burnout:

- A specialist should not stay alone with his professional or personal problem for a long time; he should always have an opportunity to ask for help, advice and assistance from colleagues.
- The general friendly atmosphere of support and mutual understanding within the team is important.
- Burnout is prevented by constant awareness of the work process, participation in it and development of professional qualities.
- Creation and implementation of training programs for overcoming burnout and development programs aimed at raising awareness, unlocking the creative potential of the employee and increasing their self-esteem.

It is important for civic education providers to learn how to deal positively with events in their lives in order to reduce the risk of emotional burnout. This requires focusing on the outcome, paying attention to what benefits can be gained and what can be learned from the situation, rather than feeling helpless and looking for blame.

There is also another way to protect yourself from emotional burnout - communication. However, it is important that the communication is sincere and emotionally rich, so that a person feels support and protection from the interlocutor. Empty and uninteresting communication will not only not change the situation, but may even aggravate it.

Self-care as part of the work of teachers/trainers helps prevent burnout, maintain motivation and job satisfaction, and increases the effectiveness of civic education providers when interacting with trauma survivors.

Emotional burnout is a serious problem, especially for civic education providers who work with people who have experienced trauma. However, it can be prevented through mindfulness in managing stress, building personal boundaries, developing self-reflection skills, and taking care of one's physical and emotional health. Taking care of yourself as part of your professional life helps you stay motivated, satisfied and effective in your interactions with participants in educational programs.

Afterword

A trauma-informed approach in civic education is not simply a set of techniques and guidelines, but a fundamental philosophy of learning based on understanding the impact of trauma on the individual and creating an environment conducive to recovery and development.

In this toolkit, we have reviewed key aspects of the trauma-informed approach, its impact on the educational process, and offered practical strategies to help teachers, trainers, and civic education providers work more effectively with people who have had traumatic experiences.

Putting this knowledge into practice requires flexibility, mindfulness, and continuous self-improvement. It is important to realize that each participant in the educational process is unique, and therefore there are no one-size-fits-all solutions. However, the principles of trust, caring, and respect for personal boundaries must always be prioritized.

This resource is not an end point, but an invitation for further exploration, reflection and development. We hope that the recommendations provided will help you not only to build effective educational strategies, but also to make your contribution to civic education deeper and more meaningful. Ultimately, it is only in an atmosphere of support, respect and understanding that we can create the conditions for sustainable positive change at both the individual and societal levels.

May your work bring not only knowledge, but also a sense of security, hope, and opportunities for growth to all who need it.

Respectfully,
authors' team

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Psychological trauma is not a diagnosis but a lens through which we can view the experiences of individuals involved in the educational process. It is essential to see people who have endured traumatic events through this lens rather than assigning them additional labels or stereotypes. Using this perspective leads to transformation not only in learners but also in ourselves.

Trauma-informed practices serve as lenses that help better adapt the learning process. They provide a starting point for making education more inclusive for all participants.

