



## **Teaching with Trauma: Trigger Warnings, Feminism, and Disability Pedagogy**

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#### **Abstract**

*Recently, a heated debate has risen in Academia following numerous student initiatives petitioning for the formal incorporation of trigger warnings in course syllabi. When contextualized within the intersecting politics of disability and feminist pedagogies, a number of fundamental contentions within this debate become apparent. First, grave misunderstandings remain regarding practices of accommodation and the possibility of establishing the classroom as a "safe space." Second, resistance within the academy toward understanding trauma as a pedagogical issue illustrates a failure to consider experiences of, and responses to trauma as issues of disability (in)justice. Through an exploration of these contentions, it becomes evident that the conflicting approaches to trauma in the classroom demand the praxis of a more integrated, collaborative "Feminist Disability Studies Pedagogy" (FDSP). When approached through this hybrid pedagogy, the conversation shifts from whether we should use trigger warnings, to why trauma itself is an imperative social justice issue within our classrooms.*

My thinking about trauma in the classroom did not begin when students at Oberlin College first petitioned for the incorporation of trigger warnings in class syllabi, or when *Slate* proclaimed 2013 "the year of the trigger warning" (Flaherty, Marcotte). Nor did the depth of my consideration reach any new height with J. Halberstam's sensationalized post on the subject.<sup>1</sup> For some, these things ushered in an exciting debate about emotional labor, academic freedom, and/or neoliberal ideologies in higher education. As articulated thus far, this "debate"

about trauma in the classroom has been for the able-bodied among us. Whether or not we consider the affect and effects of trauma on pedagogy is a choice only for those whose lives are not already shaped by trauma. For us, there is no choice; our experiences of trauma shape how we move through the world. The consideration of trauma in our classroom is not a question of pedagogy or academic labor. It is not about academic freedom, the latest administration of neoliberal policy, or even a debate at all. Teaching with trauma is our daily life. We do it everyday, because we have to if we want to survive in the academy.

Rather than rehashing the overly determined supporting and opposing sides of the debate, this essay will contextualize the discourse surrounding trigger warnings within the intersecting politics of disability and feminist pedagogies. When analyzed in this way, it becomes apparent that three fundamental misunderstandings routinely impede the debate and limit the possibility of meaningful exchange. First, misuses of the words "trauma" and "trigger" have led to serious misinterpretations of both the psychosomatic experience of trauma and the embodiment of its corresponding affect. As with other disabilities, the lack of accurate public knowledge and understanding about the lived experiences of trauma has led to yet another ill-conceived conversation about us, without us. Second, trigger warnings highlight the seemingly conflicted preferences of disability and feminist pedagogies. Disability pedagogues call for trigger warnings as a practice of accommodation, while feminist pedagogues argue that the possibility of the classroom as a "safe space" is always already fraught. However, this perceived conflict highlights another misunderstanding: the conflation of access with safety. Finally, popular response to these student initiatives have become entrenched in, and structured by, these first two misunderstandings. This reflects a final misunderstanding about what students are actually requesting: recognition of their lived experiences and institutional support regarding how those experiences influence their education.

Through an analysis of these three misunderstandings, I contend that in order to fully comprehend the significance of trauma in the classroom, and to ethically respond to the question of using trigger warnings as a teaching tool, we must approach this conversation through a "feminist disability studies pedagogy" (FDSP). Introduced by Kristina Knoll in a 2009 *Feminist Teacher* article, this pedagogy approaches questions of access not merely as means of inclusion, but rather as analyses of systems of power and oppression (Knoll 122). When the trigger warning debate is approached this way, the conversation shifts from whether we should use them, to why trauma itself is an imperative social justice issue within our classrooms. As scholars, activists, and pedagogues, this debate presents itself as an opportunity to reconsider and reimagine the interrelated experiences of trauma and disability in the classroom. The classroom ultimately stands as a site where theory meets practice, and as such a place where our material realities meet our theoretical ambitions. Thus, nothing less than a fully integrated and collaborative feminist disability approach to trauma in the classroom will be sufficient for supporting all our students.

## Trauma Culture, Trauma Confusion

The first misunderstanding that structures the trigger warning debate is the serious misuse of the words 'trigger' and 'trauma,' and their relationships to disability. These conflation and the consequent public response to trigger warnings reflect larger patterns of indifference and discrimination toward disability. Indeed, they rely on many of the same arguments used in previous debates about disability and education.<sup>6</sup> In this section, I argue that the pervasive misconstruction of trauma is rooted in ableist logics, and as such the institutionalized responses stemming from such reasoning only further perpetuate ableist structures of inequality. To challenge or resist these forces, we must first incorporate the effects of trauma into our understanding as a mental disability, and then work to approach trauma through what Alison Kafer terms "a political/relational" model of disability. When social responses to the affects of trauma are appropriately understood as dis-abling, the contours of the debate extend beyond the specifics of trigger warnings toward broader considerations of accessibility in the classroom.

For the purposes of this paper, I conceptualize trauma as a disabling affective structure. In popular, and even clinical discourse, focus is typically given to the event that produces the state of psychosomatic distress.<sup>7</sup> I am, however, focusing on the affect itself, not the event, since not everyone who lives through a traumatic event(s) consequently experiences an affective shift. Moreover, while it would be problematic to completely collapse the traumatized bodymind and the disabled bodymind, there are undeniable overlaps in both subjective embodiments. Leading trauma theorist Cathy Caruth defines trauma generally as "the response to an unexpected or overwhelming violent event or events that are not fully grasped as they occur, but return later in repeated flashbacks, nightmares, and other repetitive phenomena" (91). Similarly, psychoanalyst Avgi Saketopoulou describes the experience of "being triggered" through what Freud called "signal anxiety" or "a paralyzing, overwhelming cascade of emotional and physiological responses commensurate *not with the anticipation of danger but with the experience of the danger itself*" (emphasis original). Lastly, Peter Levine's work notes that while the embodiment of trauma is different from person to person, common responses and symptoms include types of hyperarousal such as increased heart rate, sweating, difficulty breathing, cold sweats, tingling, muscular tension; constriction of the nervous system and digestive system; dissociation and/or dysphoria; feeling numb, spacing out, or fully blacking out. According to Levine, traumatized individuals also often experience hyper vigilance, sensitivity to light and sound, difficulty sleeping, a reduced capacity to manage stress and anxiety, amnesia and forgetfulness, chronic fatigue, immune system problems, headaches, and diminished ability to bond or connect with other individuals (Levine 14-19). This is in no way an exhausted or inclusive list, nor could any such list ever be compiled. However, my attention to trauma as an affect, rather than an experience or disorder, necessitates an understanding of the countless immeasurable, nuanced, and deeply personal ways in which trauma may manifest in the bodymind.

I offer these widely recognized descriptors for two reasons. First, I aim to situate the psychosomatic and affective shifts of trauma in relation to other kinds of

neurodiversity such as Autism, ADHD, learning disabilities, epilepsy, Down's syndrome or other mental health issues (Sibley). While I am focusing here on triggers within context of trauma, many neurodivergent people experience triggers in ways that often similarly impacts their embodied subjectivities. I am using the experience of a trigger then to call for solidarity between individuals typically understood as mentally disabled and communities who have experienced racial and post-colonial traumas. In doing so, I am purposely expanding the category of neurodivergence to include people who may never receive a medical diagnosis, or clinical recognition as such. This is an overtly political move toward an intersectional approach to trauma and disability. In fact, recent advances in neuropsychology have legitimized what critical race theorists, women of color feminisms, and post-colonial feminisms have long been arguing. Not only does trauma change the neurology of the traumatized individual, evidence suggests, "PTSD can be genetically transmitted to secondary and subsequent generations" (Sotero 99). We are fundamentally changed by trauma; and these changes bear legacies. <sup>8</sup> By approaching trauma as an affective structure that may, or may not, be recognizable as a kind of neurodivergence, I seek to broaden our understanding of disability — not to further marginalize the marginalized, but rather to draw attention to the intersecting forces of white supremacy and ableism.

Second, I reference the above descriptions not to define trauma or delineate the specifics of being triggered, but rather to say what trauma and being triggered are *not*.<sup>9</sup> As becomes clear in the descriptions above, experiences of re-traumatization or being triggered are not the same as being challenged outside of one's comfort zone, being reminded of a bad feeling, or having to sit with disturbing truths. I am attempting here to distinguish between trauma and injury. While the latter can indeed lead to the former, they are not one in the same. An injury can be healed<sup>10</sup>; redress can be given. To be triggered is to mentally and physically re-experience a past trauma in such an embodied manner that one's affective response literally takes over the ability to be present in one's bodymind. When this occurs, the triggered individuals often feel a complete loss of control and disassociation from the bodymind. This is not a state of injury, but rather a state of disability. Because others understand this lost of control and the other related affects as emotionally disproportionate, the traumatized individual is no longer seen as reliable, or as having the ability to "make sense." Margaret Price argues in *Mad at School* that individuals with mental disabilities are "rhetorically disabled" in instances where they are stripped of their "rhetoricity" or "the ability to be received as a valid human subject" (26). This is precisely what happens in instances of re-traumatization. Alongside other people with mental disabilities, when those of us who live with the affects of trauma became triggered, "we speak from positions that are assumed subhuman, even nonhuman, and therefore, when we speak, our words go unheeded" (Price 26). In these moments we may struggle to make sense of our bodyminds, but what is most disheartening is that we do this in a world that has so often already dismissed us.

The depths of this misunderstanding, and dismissal, are no more apparent than

in the August 2014 report entitled "On Trigger Warnings," by the American Association of University Professors (AAUP). In this report the AAUP argues unwaveringly against the use of trigger warnings. What is most thought provoking about this report are not its various assertions — most of which had already been debated online for months beforehand — but rather the level of unfamiliarity with the psychosomatic effects of trauma. The AAUP's misunderstandings of the concepts of "trauma" and "triggers" are far reaching. Throughout their report, the AAUP repeatedly equates trauma with being offended, made to feel uncomfortable, or responding negatively with a claim of injury. As noted above, being triggered or re-experiencing trauma entails a fully embodied shift in affect wherein any number of psychosomatic responses may occur without one's cognitive control. This is not the same thing as, for example, the discomfort that comes with confronting one's white privilege, or the feeling of personal injury that may come when someone challenges your belief system. With this fundamental misunderstanding grounding their response, it is no wonder the AAUP argues against trigger warnings.

Similarly, in their original petition, Oberlin students suggested trigger warnings when "issues of privilege and oppression" arise in the classroom (AAUP). Such suggestions also conflate potential discomfort, or personal injury, with the disabling affects of trauma and being triggered. However, an opportunity arises when students make these connotations. As educators, rather than dismissing trigger warnings outright, we could engage students about how systems of oppression work and explain the difference between pedagogically productive discomfort and trigger-induced re-traumatization. As educators, we could use this conversation as an opportunity to discuss the use of trigger warnings before the Internet. Historically, trigger warnings, Andrea Smith reminds us, began as "a part of a complex of practices" within the anti-violence movement working to recognize "that we are not unaffected by the political and intellectual work that we do" and that "the labor of healing has to be shared by all" (Smith). Indeed, this conversation could have been one about the intersections of ability with race, class, gender, sexuality and citizenship. Instead, the mainstream rendering of this "debate" has accomplished very little outside of perpetuating the conflation of trauma with that of discomfort and the ableist logics of oppression that tell the marginalized to "get over it."

The extent to which both sides of the debate operate with a limited perception of trauma is telling, though not unsurprising, given the extent to which we live in an ableist and trauma-centered culture. Following Anne Rothe, I argue that it is precisely because we live in a culture oversaturated with "mass media employments of the pain of others" that our understanding of trauma is so diluted (5). The narrative structures of these traumatic experiences are quite familiar, especially to disabled people, as they rearticulate the quintessential American anecdote of "pulling yourself up by your bootstraps" (Rothe 8). Just as other "supercrip" stories focus on disabled people "overcoming" their disabilities, popular trauma discourse reinforces "the superiority of the nondisabled body and mind" by focusing on overcoming traumatization (Clare 2). People who have experienced trauma are culturally expected to turn their pain into a narrative of

inspiration for others.<sup>11</sup> These trauma-and-recovery narratives position the individual as one who "eventually overcomes victimization and undergoes a metamorphosis from the pariah figure of weak and helpless victim into a heroic survivor," with little to no contextualization of the historical and socio-political forces that underpin their experience (Rothe 2). As with other disabilities, dominant understandings of trauma are framed by an individual or medical model of disability. Like other neurodivergent people, those who have experienced trauma are considered "deviant, pathological and defective" until they have undergone the "proper" treatments needed to adhere as closely as possible to the norms of able-bodymindedness (Kafer 5).

I, in no way, wish to dismiss the intense physical and emotional pain that comes with traumatic experiences. Nor do I want to downplay the very real need to address this pain in order to make life more livable. However, I am aiming here to follow Margaret Price in thinking through trauma outside of the medical model of disability, in order to emphasize the normalizing and oppressive forces at play when we discuss trauma and trigger warnings in the classroom. Since its inclusion in the DSM, feminist trauma theorists have critiqued approaches to trauma that reinscribe normative ways of being, through either the terms of diagnosis or the approaches to healing.<sup>12</sup> More recently, Ann Cvetkovich's work on queer and lesbian responses to trauma shows "ways of thinking about trauma that do not pathologize it, that seize control over it from the medical experts, and that forge creative responses to it that far outstrip even the most utopian therapeutic and political solutions" (3). Cvetkovich does not incorporate disability theory in her approach to trauma directly; however, her efforts clearly align with the work of many disability theorists, most notably Alison Kafer. Kafer outlines a political/relational model of disability as one that recognizes the imperative of working to eliminate "disabling barriers" while also acknowledging the ways in which pain and fatigue within the disabled bodymind constrain daily life (Kafer 7).

Taken together, Kafer and Cvetkovich present a guide toward reimaging trauma in a way that adequately responds to the far-reaching misunderstandings and ableism present in the dominant conception of trauma, such as the underlying tensions in the trigger warnings debate. Building from Cvetkovich's definitions of trauma as an "affective experience that falls outside of institutionalized or stable forms of identity or politics," I further define trauma as an embodied, affective structure that relegates an individual (or population) outside of hegemonic notions of normative subjectivity (17). As such, traumatized individuals are disabled by a society that cannot comprehend, or make room for such affective or psychosomatic responses that do not adhere to the assumed stability of able-bodymindedness. Following Kafer then, "the problem of [trauma] no longer resides in the minds or bodies of individuals but in the built environments and social patterns that exclude or stigmatize particular kinds of bodies, minds and ways of being" (6).

Those in opposition to trigger warnings in classroom reinforce the individual model of disability, suggesting that the traumatized or triggered individual seek

help on their own from the proper medical establishments. It is the responsibility of the traumatized to deal with their excessive bodymind, not the society that produces and then pathologizes it as such. Those in support of trigger warnings attempt to locate the problem within the climate of higher education and its ableist infrastructure. However, while recognizing the numerous social barriers for traumatized individual is certainly important, the experiences and embodiments of trauma must also be reconceptualized culturally as both relational and political. Just as all disability is constituted through the (false and oversimplified) binary of disabled or abled, embodiments of trauma are also constituted through the unmarked binary of traumatized or un-traumatized. We know whose affects and responses are "inappropriate" or "disregulated" because we have socially determined what a proper and regulated affective response looks like. Thus, individuals who live with the affect of trauma are socially constructed as an Other, and like other disabilities, trauma is "experienced in and through relationships" with the un-traumatized norm (Kafer 8).

Furthermore, trauma must also be understood as unequivocally political. As with all disabilities, living with trauma means negotiating life in a world established by and for bodyminds that do not experience the affect of trauma. The sociopolitical inequalities surrounding race, class, gender, and citizenship undoubtedly shape the unequal access to healthcare and other resources needed to live with and/or through trauma. In fact, the ability to be recognized as a person living with trauma is in many ways a political privilege.<sup>13</sup> Furthermore, while traumatic experiences can certainly be accidental, the vast majority of potentially traumatizing experiences are rooted in systems of power and oppression. The forces of racism/white supremacy, colonization, and global capitalism continuously instigate enumerable violences worldwide. As legal scholar Dean Spade argues, it is often the administrative systems themselves that traumatize and disable us the most by "distributing life chances and promoting certain ways of life at the expense of others, all while operating under legal regimes that declare universal equality" (103). Indeed, it is not by accident that the organizing that originated trigger warnings arose alongside a feminism proclaiming, "the personal is political" (Smith). By depathologizing trauma, and approaching it through Kafer's political/relational model, trauma stands along with other disabilities "as a potential site for a collective reimagining" (9). In this debate on trigger warnings in the classroom, situating trauma within this framework of disability allows educators and students to collectively reimagine what education can look like.

### **"Safety" for Whom? Accommodations for What?**

The second misconception fueling this debate is the relationship between "safety" and disability accommodation. Those in opposition to trigger warnings argue that the classroom cannot, and should not, be a "safe space" where comfort and protection are "a higher priority than intellectual engagement" (AAUP). Indeed, feminist scholars have long argued that the concept of "safety" is always already fraught. Those in favor of trigger warnings argue that a student's ability to learn is highly compromised if they are re-traumatized, and therefore this

is simply a matter of accommodation (Johnson). However, many of these same supporters also list issues of power and oppression as possible triggers, replicating the conflation of accommodation with comfort. When both opponents and supporters of trigger warnings routinely conflate access with safety, they illustrate a prevailing and fundamental lack of awareness about disability, access, and accommodation in higher education.

Feminist educators have written extensively about safety in the classroom and the necessity of discomfort as part of learning. Most notably, in *Teaching to Transgress* bell hooks describes how "safety" was used by people with privilege to silence the voices of "those of us on the margins" who spoke about social justice and changing the academy:

Indeed, exposing certain truths and biases in the classroom often created chaos and confusion. The idea that the classroom should always be a "safe," harmonious place was challenged. It was hard for individuals to fully grasp the idea that recognition of difference might also require of us a willingness to see the classroom change, to allow for shifts in relations between students (30).

Following hooks, Berenice Malka Fisher describes how attempts to ensure safety in a feminist classroom also risk denying difference and suppressing pedagogically valuable conflict (139). For both hooks and Fisher, calls for "safety" in the classroom must be critically evaluated and resisted as a means of maintaining the status quo and further marginalizing and silencing students who are presenting knowledges that challenge the norm. Fisher's work provides further specific ways to address the multiple and intertwining notions of safety in the classroom that also recognize "the *asymmetries of privilege* and the *differential vulnerabilities* that flow from them" (emphasis original, 150). In other words, one's social privilege determines the kind of relative safety that might be felt at any given place and time, as well as the kinds of risks and vulnerabilities one might feel "safe" enough to endure.

Opponents of trigger warnings are quick to employ this feminist reasoning and argue that such warnings censor difficult topics and even create an atmosphere where dissidence will be silenced from fear of institutional reprimand (AAUP). However, the swift retreat to this argument illustrates inattentiveness to disability as a vector of oppression and the ways in which ableism, power, and privilege are being denied. In her reflection above, hooks notes that it was the individuals with privilege and social capital who clung to a sense of safety as a way to resist change when voices from the margins began speaking their truths in the classroom. In this instance, those with power turned to "safety" as an attempt to uphold the status quo. Now, with trigger warnings, those with power are again turning to "safety" as an attempt to uphold the status quo. However, rather than turning to "safety" as a means to their own comfort, those with power and the social privilege of an able-bodymind are using a *critique* of safety as a means of upholding the status quo and resisting the change being called for by marginalized voices. Put another way, this time it is the students from the



margins — those living with the affects of trauma or mental disabilities, rather than those with social privilege — that are accused of clinging to safety as a means of avoiding the rigors of an intellectually challenging education (AAUP).

While great strides have been made in regard to inclusion and accommodation in higher education, students with mental disabilities continue to face serious barriers. Margaret Price argues there is a "popular conception that unsound minds have no place in the classroom" and that the academy is driven "to protect academic discourse as a 'rational' realm, a place where emotion does not intrude (except within carefully proscribed boundaries), where 'crazy' students are quickly referred out of the classroom to the school counseling center" (33). Unfortunately, once pushed out of the classroom, students with mental disabilities rarely find their way back. The National Center for Education Statistics reports that students with mental disabilities are more likely to drop out of college than any of their peers, with dropout rates at 56.1% for those with "mental illness" and at 23.6% for those with "serious emotional disturbance" (NCES). In their study on higher education and psychiatric disabilities, Collins and Mowbray report an even more disheartening number, noting 86% of students with psychiatric disabilities leave before they complete their degree. They show that the leading issue facing students with mental disabilities is the struggle to receive the institutional accommodation and support. Respondents reported a number of barriers keeping them from accessing disability services, including fear of disclosing (24%), lack of knowledge about the services available (19%), fear of stigmatization (19%), and that the accommodations/support they need were not available (16%) (Collins and Mowbray 308).

Given these findings, it is imperative that the debate on trigger warnings focus on the inherent questions of access. However, because of the misuse of "triggered" to reference anything that makes someone uncomfortable, disagreements about the classroom as a "safe space" often divert the conversation away from any real discussion of pedagogy and access in higher education. In his 2012 research, Mark Salzer found that students with mental illness were more likely to withdraw because of the impact of "perceived stigma and discrimination" than because of personal struggles with the symptoms or stresses related to their disability (Salzer 1). Because such students are "often viewed as disruptive, lacking academic skill, prone to violence" they are often socially isolated and left alone to question "how welcome they are on campus" (2). These findings suggest that simply providing information about mental illness and "chiding the audience to treat individuals with mental illness" by noting the available resources, is not an effective approach to decreasing the rate of withdraw for disabled students (6). The false conflation of access with "safety" allow accommodations to be dismissed, and only serve to further marginalize mentally disabled students by telling them they are in fact not welcome because *their* needs disrupt the processes of learning their peers deserve.

In the most basic sense, accommodations are not about "safety," but about access to opportunity for a more livable life. When disability is denied because it is not understood or seen, or when access is denied because it is inconvenient

or complicated, humanity is denied. While it is certainly possible to recognize trauma as a mental disability and still be hesitant toward trigger warnings as an accommodation practice,<sup>14</sup> the content and tenor of that conversation would be far removed from the outright hostility and rejection that has reverberated most widely. When presented as an access measure, it becomes evident that trigger warnings do not provide a way to "opt out" of anything, nor do they offer protection from the realities of the world. Trigger warnings provide a way to "opt in" by lessening the power of the shock and the unexpectedness, and granting the traumatized individual agency to attend to the affect and effects of their trauma. Traumatized individuals know that trigger warnings will not save us. Such warnings simply allow us to do the work we need to do so that we can participate in the conversation or activity. They allow us to enter the conversation, just like automatic doors allow people who use wheelchairs to more easily enter a building.

### A Feminist Disability Studies Praxis

While the recent consideration of trauma in higher education has remained practically fixated on trigger warnings, it is important to note that such precautions are certainly not the only tool available for addressing trauma in the classroom.<sup>15</sup> Along with the aforementioned misconceptions structuring the debate, this preoccupation on trigger warnings works more to highlight the ablest structures of the academy than to address the needs of students. A college classroom, or campus, that adequately accounts for the material realities of diverse bodyminds is almost inconceivable within an institution built on awarding individual merit over acknowledging structural privileges and inequalities.<sup>16</sup> Thus, the engagement in this "debate" has remained on a literal level, often overlooking the deeper needs and desires behind the appeals. If educators acknowledge that students are doing the best they can, with what they have been taught, to ask for what they need, then the focus of this debate would shift beyond the literal request for trigger warnings, toward understanding the underlying experiences producing those requests. When this is done, it becomes apparent that these students are essentially asking for three reasonable things (discussed below), and that the issues at hand are bigger than the specifics of this debate. I argue that what this debate calls for is not another institutionalized measure of disability management, but rather a collaborative, integrated approach to teaching about disability and ableism all together: a feminist disability studies pedagogy.

First, students are asking to be recognized as whole persons. They are asking that educators recognize their full humanity in the classroom, including recognition of emotions, struggles, and lived experiences. Students are reminding educators that the material being taught has real affects and effects on bodyminds. Second, they are asking for a language that recognizes their full humanity and helps attend to the very real embodied affect of pain and suffering. Moreover, by petitioning institutions, students are attempting to enact systemic change. They are asking that educators model and instruct how to critically engage with difficult, and potentially harmful, conversation without enacting harm on another. If instructors are not able to do this, students are simply asking that

the instructor acknowledge their own limitations and not put the bodyminds of the vulnerable among them at risk. In her book *Aftermath: Violence and the Remaking of a Self*, Susan Brison notes that our society lacks a vocabulary and the interpersonal skills necessary to truly comprehend and respond to trauma: "It is a symptom of our society's widespread emotional illiteracy that prevents most people from conveying any feeling that can't be expressed in a Hallmark card" (12). Appeals for trigger warnings are, in essence, appeals to include instruction and language on emotional literacy within the curriculum.

Finally, in these petitions for trigger warning students are telling educators that a key component of their educational experience is being ignored. Following bell hooks and other feminist pedagogues, I see the call for trigger warnings as students demanding what hooks terms an "Engaged Pedagogy," one "that does not offer them information without addressing the connection between what they are learning and their overall life experience" (hooks 19). While the stance that educators are not therapists is certainly valid, Price reminds us that it is the ethical responsibility of educators to respond to the emotional experiences that happen in the classroom (52). Instructors are not trained in counseling or crisis management; to pretend otherwise would be to do a disservice to students in need. However, it takes very little to acknowledge that learning is not isolated to cognitive processing, but also includes the often-unconscious assessment of new information through emotional, sociocultural, and psychosomatic ways of knowing. Indeed, teaching too is not isolated in cognitive processing, and routinely includes ways of knowledge that extend beyond the intellectual.

Pedagogically speaking, this recognition can manifest in any number of ways. It asks that instructors teach with the embodiment of affect, rather than against it. For example, if during a classroom activity or discussion it becomes apparent that students are struggling with feelings of anger or frustration, the instructor could pause the conversation and ask students to write for five minutes about the emotions they are feeling in that moment. Then, when the discussion resumes, the instructor can guide students through analyzing how emotions influence the ability to consider new ideas, and engage with one another in informative and/or mindful ways. If in another instance, students seem sluggish and unresponsive, the instructor could pause the class discussion or lecture and instruct the students to get up and stretch, shake, dance, or move around the room for a set amount of time. Through relatively simple pedagogical practices such as these, educators not only acknowledge the full humanity of the students in class, but also help students come to recognize learning as a process that involves all aspects of the bodymind. To this end, I seek a pedagogical paradigm shift — an interweaving of feminist and disability praxis located in what Knoll terms a "feminist disability studies pedagogy" (FDSP) (131) and what Rosemarie Garland-Thomson described in her call to integrate disability and feminist theory:

One way to think about feminist theory is to say that it investigates how culture saturates the particularities of bodies with meanings and probes the consequences of those meanings. Feminist theory is a collaborative, interdisciplinary inquiry and self-conscious cultural

critique that interrogates how subjects are multiply interpellated: in other words, how the representational systems of gender, race, ethnicity, ability, sexuality, and class mutually produce, inflect, and contradict one another. These systems intersect to produce and sustain ascribed, achieved, and acquired identities, both those that claim us and those that we claim for ourselves. *A feminist disability theory introduces the ability/disability system as a category of analysis into this diverse and diffuse enterprise. It aims to extend current notions of cultural diversity and to more fully integrate the academy and the larger world it helps shape.* (3, emphasis added)

Feminist disability studies pedagogy puts the work of Rosemarie Garland-Thomson and other feminist disability theorists [17](#) into practice by blending the ways dis/ability intersects with other vectors of power and oppression to inform how we teach and learn. Within disability pedagogy, the principles of Universal Design [18](#) provide important guidelines toward creating an accessible classroom and encouraging educators to see our students in their full bodymind. However, as Knoll rightfully asserts, working exclusively toward the implementation of Universal Design or accommodations would "leave gaping holes in access to academia and courses, by not seeing and addressing the intersecting dilemmas of privilege and oppression within the disability experience" (124). Critical disability pedagogy incorporates feminist principles that reach beyond inclusion and toward shifting the pervasive and intersecting forces of inequality. When the debate on trigger warnings is situated within FDSP, the question shifts from *should* instructors provide trigger warnings to *how* might educators provide adequate acknowledgement of trauma in the classroom. Providing trigger warnings is one way to do this, but is not the only way, or even the most effective. [19](#)

First, an instructor utilizing FDSP would situate the affective structure of trauma and the potential of being triggered within the political/relational model of disability. This means understanding that like other neurodivergent people, those affected by trauma or other triggering experiences are dis-abled by social barriers and ideologies that marginalize them. These experiences and subjectivities are not individual issues in need of cure, but rather the consequences of systemic forces of inequality and oppression. Ableism intersects here with race, class, gender, sexuality and citizenship in ways that leave the most marginal even more vulnerable to policing measures that dismiss them as "excessive," "improper" and "inappropriate" for the classroom and, though unspoken, society at-large. A FDSP would resist the ideologies of exclusion that push traumatized and/or triggered individuals out of the classroom. Instead, instructors would incorporate consideration of such bodyminds into their teaching. A FDSP would understand psychosomatic and affective responses, like the experience of being triggered, as appropriate responses to the horrors of structural inequality. Rather than attempting to relegate trauma outside of the bounds of academia, instructors would imagine what it might look like to honestly teach *with* the trauma that may be present in their student's bodyminds, and perhaps even in their own. [20](#)

While students should undoubtedly receive guidance to all available physical and mental health resources on campus,<sup>21</sup> students and teachers alike need to understand that nothing is "wrong" with person who is experiencing a moment of re-traumatization, or any other kind of disability-related affective experience. In a FDSP classroom, students know that the best learning and unlearning often comes with great discomfort, and this discomfort is not equivalent to trauma. With this, students should also be given guidelines and taught how to engage with difficult and, at times, potentially triggering material, and how to know within their own bodymind the difference between discomfort/injury and trauma/triggering. This work may be done by including general statements in the class syllabus, opening a conversation, brainstorming potential responses or self-care skills one might utilize in the event of an overwhelming affective experience, or perhaps engaging activities that model how to speak with one another when the connections between systemic injustices and deeply personal experiences are felt and known in the bodymind. For example, the instructor might initiate a discussion on the *necessity* of discomfort in learning about difficult material and guide students through thinking about the differences between personal discomfort and institutionally sanctioned, epistemic violence. Statements on the syllabus, or in other handouts, might include instructions on how to talk about difficult topics, and disagree without demeaning or disrespecting one another. While this may seem unnecessarily, or overly laborious for instructors such measures are actually methodological in nature — instructing students on *how* to learn with one another not just *what* to learn.

Similarly, various kinds of acknowledgements could be given before in-class readings, videos, discussions, or activities. These could take the form of a trigger warning, a content note, or brief descriptions. Instructors might make note of the most common kinds of triggering material (rape/sexual assault, extreme violence, suicide/murder, and self-harm). Or, at the beginning of the term, instructors may ask that students anonymously submit any potentially triggering topics they may have. As educators, there is no way to predict what may trigger one student or another, but we can provide the space needed for the bodyminds in the room to share their truths.<sup>22</sup> Rather than place the responsibility of student's affective responses on the instructor, these measures would serve to remind students of their own power, and agency over their bodyminds. Instructors would make note of potentially triggering material, not to "protect" their students, but to allow their students to prepare in whatever way is necessary for participation.

Lastly, instructors using FDSP would not require a letter of accommodation, as registration with disability services often requires reliance on the medical model of disability. This often precludes our most marginalized students from gaining the access they need, as people of color, poor people, and queer people are less likely to have the financial resources necessary to obtain the required diagnosis and documentation. Moreover, educators and students who desire a community of learners would not seek institutionalized policies that require trigger warnings. Educators invested in access would take heed from the limitations of the ADA, and know that legislation and mandates cannot force anyone, especially those in

power, into consciousness.<sup>23</sup> Instead, work would be done to increase awareness and education about disabilities and emotional literacy. Structural changes would be made in regard to the importance of pedagogy and student evaluations in faculty development, training, and retention. Rather than giving the university resources to reprimand, work would be done to give faculty and students the resources to make change together.

Faculty, students, and administrators should indeed debate the merits and limitations of trigger warnings as a pedagogical practice, and seriously consider the potential positive and negative effects of institutionalizing such a policy. This work is part of what it means to be an educator, and one-way students can take ownership of their own educational experience. With this, it is also the job of educators to teach students how to understand, respond, and engage with the full complexity of the world and our humanity. This work must include ways of attending to the affects and effects of trauma and violence, the politics of emotions, and the embodied manifestations of power and oppression. It is telling that critiques of trigger warnings accuse the supporters of enacting neoliberal ideologies of individualizing harm (e.g., Halberstam), yet when faculty position themselves against trigger warnings because of justifiable fears of increased work load, expanded emotional labor, or risks of retribution, they create a false binary between one group experiencing institutional exploitation and another. The needs of faculty and staff need not be positioned against the needs of students. Imagine if, instead of refusing student initiatives, faculty and students stood in solidarity to demand and create the kind of community it takes to truly provide education as a practice of freedom.

When approached through FDSP, the significance of the trigger warning debate shifts. An accurate understanding of trauma and triggers situates trauma in the context of disability, not discomfort, and it illustrates the persistent misconceptions surrounding disability and mental illness. Similarly, examining the seeming conflict between feminist and disability pedagogy over trigger warnings demonstrates the still present misconstruction of access and accommodation, neither of which are about "safety." Finally, these new perspectives allow educators to finally see the underlying needs students identify when they make such requests. When guided by FDSP, this debate ceases to be one. The conversation shifts from whether educators should incorporate trigger warnings into pedagogical practices, to why trauma itself must be understood as an imperative social justice issue within the classrooms.

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## Endnotes

1. Halberstam's original and inflammatory post on the topic spurred a great deal of backlash even from people who agree. So much so, Halberstam posted a subsequent piece explaining/defending the piece as "polemic", and offering an apology (of sorts) for some of its oversights. While Halberstam's polemic could certainly be credited for bringing further attention to the conversation, I argue that it could also be accredited for spreading many of the misconceptions about trauma outlined here. See Natalie Cecire's blog for a rebuttal to Halberstam.  
[Return to Text](#)
2. Following Margaret Price in *Mad at School*, I use the combined term "bodymind" in resistance to the Cartesian duality that inaccurately proposed the separation of the experiences of the body from those of the mind. For a further, more recent and expansive account of the bodymind see Price's 2015 *Hypatia* article "The Bodymind Problem and the Possibilities of Pain."  
[Return to Text](#)
3. Along the "affective turn" in the humanities, I use "affect" here in reference to Clough's definition of "affectivity as a substrate of potentially bodily responses, often automatic responses, in excess of consciousness" (2).  
[Return to Text](#)

4. For two brief pieces in support of trigger warnings see Angus Johnston's essay "Why I'll Add a Trigger Warning" posted on *Inside Higher Ed* in May of 2014, and Kat Stoeffel's work "Why I Stopped Rolling my Eyes at Trigger Warnings" posted on the NY Magazine's Blog *The Cut* on May 21, 2014.

[Return to Text](#)

5. For a general overview of arguments in opposition to trigger warnings, see the "Essay by faculty members about why they will not use trigger warnings" posted on *Inside Higher Ed* in May of 2014.

[Return to Text](#)

6. See: Yergeau, Melanie. "Disable All the Things: On Affect, Metadata, & Audience." Computers and Writing Conference. Washington State University. June 2014. Address.

[Return to Text](#)

7. Under the medical model, this affective shift is often diagnosed as "PTSD." However, because I wish to understand the affects of trauma outside of the forces of pathology, I am not using PTSD as a marker of this experience. Moreover, I wish to recognize that many people live with this kind affective structure who have not, or would not be diagnosed with PTSD - such as the large numbers of people who have inherited what is now being termed intergenerational trauma.

[Return to Text](#)

8. For more see: DeGruy, Joy. *Post Traumatic Slave Syndrome: America's Legacy of Enduring Injury and Healing*. Portland: Joy DeGruy Publications, 2005.

[Return to Text](#)

9. Although I have provided various descriptions of trauma, including my own working definition, I want to hold space for the fluidity of the experiences of trauma and being triggered. I do so in recognition of important critiques within disability scholarship on establishing "standards" of any disability, or disabling experience in ways that might then be used to further police disabled bodies. See for more detail, Zach Richter's blog on the topic cited above.

[Return to Text](#)

10. There is a broader debate among neuroscientists, clinical psychologists, therapists, and individuals who have experienced trauma as to whether or not one can heal or overcome trauma. While I think efforts can be made to attend to the affects of trauma and make life more livable, I believe that the epistemological shifts alone negate any kind of "return" to a pre or non-traumatized bodymind. Furthermore, because I understand the affect of

trauma to be non-linear, I believe that one may learn skills to help "manage" trauma in the bodymind, it is always possible for the affect trauma to reappear in the future.

[Return to Text](#)

11. In his now foundation text *The Wounded Storyteller: Body, Illness, and Ethics*, Arthur W. Frank terms these stories "quest narrative." In quest narratives "the ill person gradually realizes a sense of purpose, the idea that illness has been a journey" and through this journey three ethics emerge to guide the storytelling: recollection, solidarity, and inspiration (177, 133). While Frank argues that the quest narrative is the ideal ending point for all who experience a wounded body, an analysis of these narratives through the social model of disability would situate the quest narrative as a product of ableist ideologies (particularly the supercrip).

[Return to Text](#)

12. See Brown, Laura S. "One Feminist Perspective on Psychic Trauma." *Trauma: Explorations in Memory*. Cathy Caruth, Ed. Baltimore: The Johns Hopkins University Press, 1995. 100-112. Print.

[Return to Text](#)

13. See for instance, McRuer's discussion of Stone's *The Disabled State* in "Disabling Sex: Notes for a Crip Theory of Sexuality." *GLQ*. 17.1 (2010): 107-117.

[Return to Text](#)

14. See Duggan, Lisa. "On Trauma and Trigger Warnings, in Three Parts." *Bully Bloggers*. 23 Nov 2014. Web. 26 Nov 2014.

[Return to Text](#)

15. K-12 educators have been working to shift pedagogical understanding of trauma for quite some time. Indeed, trigger warnings pale in comparison to the pedagogical approaches of trauma-sensitive or trauma-responsive schools. As detailed in *Helping Traumatized Children Learn—Volume 2*, approaches in trauma-sensitive schools include fostering a community where adults: share and understanding of trauma and its impact on learning, support all students to feel safe, address student's needs in a holistic way, connect students to the school community, embrace teamwork, and anticipate and adapt to changing needs (TLPI 26-27).

[Return to Text](#)

16. Since in the U.S. contexts, post-secondary education is not guaranteed, or seen as a fundamental right for all, institutions of higher education are able to disregard and exclude bodyminds in ways that k-12 institutions cannot (legally). While there is certainly much work to be done around disability

education at the k-12 level, it is also not unsurprising that innovated pedagogical strategies for working with traumatized students are arising out of k-12 settings.

[Return to Text](#)

17. Most notably the work of feminist philosopher, Susan Wendell. See, Garland-Thomson's 2005, *Signs* article for a more full literature review.

[Return to Text](#)

18. See or the National Center on Universal Design for Learning. Or Burgstahler, Sheryl, "University Design of Instruction (UDI): Definition, Principles, Guidelines, and Examples." *DO-IT Disability Opportunities Internetworking, and Technology*. University of Washington.Edu. 2012. Web. 2013.

[Return to Text](#)

19. I would argue that trigger warnings have garnered so much attention within higher education precisely because of structural ableism within the academy. Until institutions of higher education are fully committed to education every bodymind, the pedagogical options for recognizing and addressing the complexity of every student will be contained to limiting measures like trigger warnings. Such warnings may be what we have available now, but they should not be implemented in exchange for more transformative institutional changes.

[Return to Text](#)

20. Very little in this debate has addressed the experience of instructors who may be triggered or experience traumatization in the classroom. This, of course, highlights the assumed able-bodyminded instructor and contributes to ableist logics within the academy. While this piece focuses on attending to students with trauma, I believe that such pedagogy allows for, and perhaps even requires, attending to the affective experience of the instructor.

[Return to Text](#)

21. It should be noted however, that the successes of these approaches is limited in that "fewer than a half of students with mental illnesses seek mental health services" (Salzer 1).

[Return to Text](#)

22. I do not mean to underestimate the difficulty in fully knowing, or speaking the truth of one's experience or bodymind - especially to power. Nor, do I mean to assert that anyone is ever fully able express their own truth given the limitations of language and culture. However, the refusal of acknowledge trauma or potential triggers because "one can never know"

works to dismiss and erase the agency of both the (assumed) able-minded responder and the episteme of the disabled bodymind who may be triggered.

[Return to Text](#)

23. See, Ben-Moshe, Liat, et al. *Building Pedagogical Curb Cuts: Incorporating Disability in the University Classroom and Curriculum*. New York: Syracuse University, 2005. Print.

[Return to Text](#)

[Return to Top of Page](#)

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