



Trauma-Sensitive Student Support

Professional Development

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Thinking Question

Raise a hand if you have ever struggled to understand a student or caregiver's behavior or choices.



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Facilitator Notes: Ask the audience this question. Call on 1-3 participants to share an example. Ask for a mix of student and parent stories.
Share: Today's discussion will focus primarily on the causes behind some challenging student behaviors.

Today's Takeaways

- **Trauma defined.** Understanding trauma and its effect on behavior.
- **Trauma impacts learning.** Discussing the link between trauma and school success.
- **Trauma sensitivity.** Learning specific strategies to prevent or de-escalate trigger symptoms.



Facilitator Notes: In this session we will... (read through the takeaways) click for bullet points.

What is trauma?

Group Share:

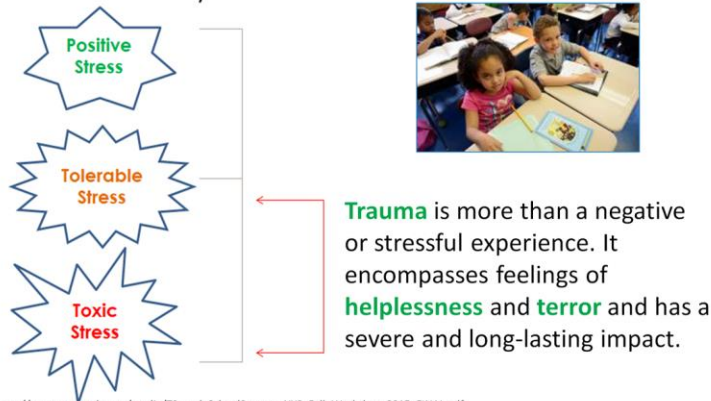
What do you **already** know about trauma?



Facilitator Note: Ask the group share question. Then allow participants 2 mins to talk about this question with the person to the left or right of them. Ask for 1-3 volunteers to share some points from their discussion.

What is trauma?

Everyone experiences **stress**. It is the level, frequency, and duration of stress that impacts a person's ability to develop and function normally.



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Facilitator Note: Let's start by identifying where trauma fits on the stress scale. Everyone experiences stress, but it is the level, frequency, and duration of stress that impacts a person's ability to develop and function normally.

Positive Stress = normal and essential part of healthy development, **characterized by brief increases in heart rate and mild elevations in hormone levels**. Some situations that might trigger a positive stress response are the first day of school or giving a presentation at work. Research has shown that **children who experience positive stress are often better able to cope with challenging situations as adults**.

Tolerable Stress = activates the **body's alert systems to a greater degree** as a result of more severe, longer-lasting difficulties, such as the loss of a loved one, a natural disaster, or involvement in an accident. What makes this kind of stress "**tolerable**" is **that the nervous system's activation time is limited and is buffered by relationships with adults who help the child adapt**. With that support, the brain and body are able to return to a normal (resting) state and any damaging effects of the stress can be avoided.

Toxic Stress = When the stressors are **severe and long-lasting and adult relationships are unresponsive or inconsistent**. Toxic stressors include physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship. This **kind of**

prolonged activation of the stress response systems can disrupt the development of the brain resulting in cognitive and non-cognitive impairment.

CLICK:

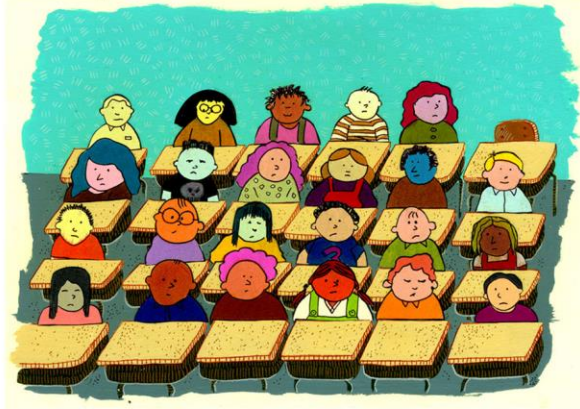
Trauma tends to be experienced in the tolerable to toxic stress range (tolerable range only when adult support is not available). This is important to acknowledge because many of the executive functioning skills associated with social emotional learning and stress management (i.e. *self-regulation, coping skills, relationship skills, etc*), are more difficult to learn/develop when a person has moved into the arena of trauma.

Coping skills are necessary for everyone to learn (and continue to develop), but for those experiencing toxic stress, a trauma-sensitive approach is needed.

Information from: Harvard University's Center on the Developing Child.

Thinking Question

In a classroom of 30 kids, **how many** students do you think have been exposed to an ACE in the United States?



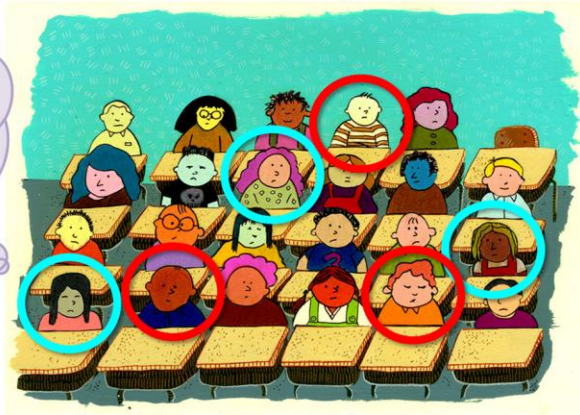
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Facilitator Notes: Ask the audience this question. Allow participants 1 min to give answers to the question. Feel free to let the participants shout out their answers or if this is a quiet group call on 1-3 to share their ideas.

Thinking Question

In a classroom of 30 kids, **6 students** on average have experienced an ACE in the United States.

25% of children experience at least 1 traumatic event by age 4.



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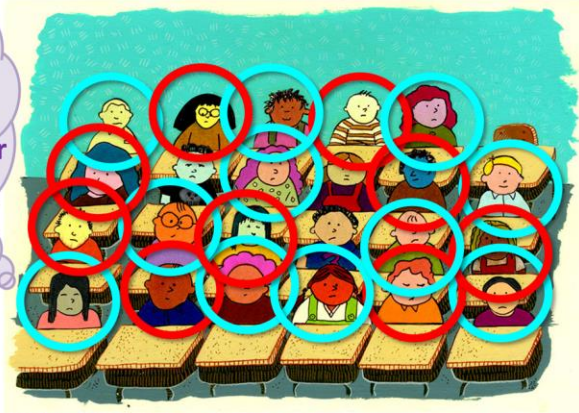
Source: http://www.nysteachs.org/media/TS_and_SchoolSuccess_NYS_Fall_Words_All_Rights_Reserved

Facilitator Notes: Another outcome of the [ACE] study was the higher than expected prevalence of ACEs. For example, the **ACEs Study found that 25% of children have experienced at least 1 traumatic event by age 4.**

Thinking Question

In a classroom of 30 kids, in **this neighborhood**, **25 students** on average have experienced an ACE in the United States.

83% of inner city youth report experiencing one or more traumatic events.



Source: http://www.nctsn.org/sites/default/files/assets/pdfs/understanding_the_impact_of_trauma.pdf

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Adverse Childhood Experiences (ACEs)

Chronically stressful or traumatic experiences including abuse, neglect, and/or family dysfunction. These can include:

- Emotional Abuse
- Physical Abuse
- Sexual Abuse
- Neglect
- Exposure to Substance Abuse
- Exposure to Mental Illness
- Exposure to Domestic Violence
- Incarcerated Parent
- Divorce or Parental Abandonment
- Death of a Relative

Source: <http://www.ashaweb.org/wp-content/uploads/2015/10/ASHA-Workshop.pdf>

Source: http://www.nysteachs.org/media/TS_and_SchoolSuccess_NYS_Fall_Workshops2015_FINAL.pdf

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Facilitators Note: How often do children experience toxic stress (trauma)? One study that you are likely to hear about in any discussion of trauma's impact is the ACEs Study (Adverse Childhood Experiences).

The original ACE study began in 1995 and was conducted by CDC and Kaiser Permanente. During routine health exams, 17,000 Kaiser patients agreed to also complete a survey survey **containing questions about childhood maltreatment and family dysfunction.**

The results of the survey together with the physical health exam demonstrated that **traumatic experiences in childhood have a negative effect on adult health and well-being**, such as high stress levels, heart disease, substance use, mental health issues, smoking, anger-management difficulties, family problems, financial problems etc.



This study is important for many reasons, but a major reason is that it clearly links early childhood experiences to negative or unhealthy adult behaviors. With that in mind, it is equally important to take a trauma-sensitive approach with both children and their parents and trauma's impact is long ranging and cyclical.

-Information from: The ACE Study is an ongoing collaborative research between the Centers for Disease Control and Prevention in Atlanta, GA, and Kaiser Permanente in

*San Diego, CA. (The ACE study questionnaire can be found here:
[http://www.acestudy.org/yahoo_site_admin/assets/docs/ACE_Calculator-
English.127143712.pdf](http://www.acestudy.org/yahoo_site_admin/assets/docs/ACE_Calculator-English.127143712.pdf))*


*-Information for 3-4+ statistic from: Institute for Children, Poverty, and Homelessness
study based on ACEs study*

-More information about ACEs can also be found at: <http://acestoohigh.com/>

The Impact of Chronic Stress and Trauma

The symptoms are: **Physical** **Emotional**



“My world isn’t safe. I see threats everywhere.”

“I am not valuable and can’t trust anyone.”

School stability is important!

School can offer the safety, stability, and positive relationships that children need to reduce the negative impacts of chronic stress and trauma and help them become more available to learn.

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Facilitator Notes: As we learned from the ACEs study, the impact of traumatic experiences can be severe and long-lasting. It can be damaging to a person’s **physical health** as well as **emotional health**.

[CLICK] PHYSICAL - When experiencing chronic stress, the body responds as if it is under constant threat by becoming hyper-vigilant. The person’s body “**sees threats everywhere**” and **will have a nervous system that is always “on alert”** meaning a faster heart beat, higher blood pressure, and higher levels of stress hormones. This type of **hyper-vigilance can actually change the architecture of the brain**.

[CLICK] EMOTIONAL - Chronic stress and trauma also have severe emotional consequence. The person may believe that he/she is not valuable and may even believe that they are to blame. This can lead to depression, substance abuse, self-harming behaviors, unhealthy relationships, dissociates, lack of appropriate boundaries, etc.

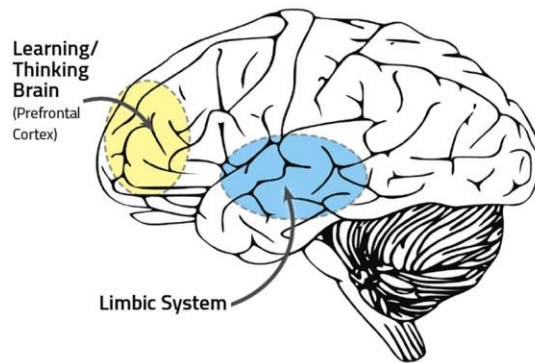
[CLICK] This brings us back to the importance of school stability that always comes up in McKinney-Vento related conversations. **School can offer the safety, stability, and positive relationships that children need to reduce the negative impacts of chronic stress and trauma and help them become more available to learn.** If a child is bouncing from school to school, he/she may not have the opportunity establish the safety, stability, and positive relationships that a school community can offer.

Information from: Harvard Medical School; “understanding-the-stress-response” and Harvard’s Center on the Developing Child.

The Impact of Chronic Stress and Trauma

Survival Mode: Flight/Fight/Freeze

Frontal lobe (Prefrontal cortex) goes offline
Limbic system / mind and lower brain functions take over



source: <http://www.practicenotes.org/v17n2/brain.htm>

image: <http://communityresiliencecookbook.org/your-body-brain/>

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Facilitator Notes: Brain development in infancy and early childhood lays the foundation for all future development. Neural pathways form at great speed and depend on the repetition of experiences. Experiences teach the brain what to expect and how to respond. When experiences are traumatic, the pathways getting the most use are those in response to the trauma; *this reduces the formation of other pathways needed for adaptive behavior*. Trauma in early childhood can result in disrupted attachment, cognitive delays, and impaired emotional regulation. Also, the overdevelopment of certain pathways and the underdevelopment of others can lead to impairment later in life (Perry, 1995). By age three, the brain is almost 80% of its adult size; by age five it is 90% (zerotothree.org). Although this creates a sense of urgency regarding intervention, it is also important to know that the brain has the most plasticity in infancy and early childhood, meaning there is the most opportunity for change. This is both the reason that prolonged trauma in early childhood can be so devastating, but also be a window of opportunity for interventions that can alter the brain in positive ways (CWIG, 2011).

A Body's Reaction to Stress: FIGHT, FLIGHT, or FREEZE

TRIGGERS (Threat-cue):

Reactions don't happen for "no reason."
Something has set off that reaction such as:

- Not being listened to or tone of voice
- Loud noises or yelling
- A certain smell
- People being too close
- Perceived invasion of privacy (e.g. desk check)
- Criticism (even constructive)
- Time of day or year
- Particular activities
- Essays about summer activities
- Painting a picture of family or home

TRIGGER WARNINGS:

There are often signs of distress that may signal the proximity of a trigger including:

- Restlessness/Agitation/Pacing
- Shortness of breath / pounding heart
- Sweating
- Clenching teeth or fists
- Hand wringing
- Bouncing legs
- Shaking/Rocking
- Crying
- Giggling at inappropriate times
- Singing or yelling
- Swearing / Aggressive language

Source: http://www.nysteachs.org/media/TS_and_SchoolSuccess_NYS_Fall_Workshops2015_FINAL.pdf

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Facilitator Notes: In very basic terms, a person's response to stress involves the a fight, flight, or freeze response. In most people, stress will cause one of those reactions to happen moving the body's nervous system from a normal resting state to an elevated state. **In an elevated state, a person will experience increase adrenaline, a faster heart beat, a hot flash, etc.** When the threat is gone, the body quickly returns to a resting state. As mentioned earlier in the training, the ability to easily vacillate between "normal" and "elevated" is often aided by having a strong support system and individual coping skills.

For people experiencing toxic stress (trauma), **the biological impact is that their "normal" resting state is actually in the "elevated" position, which means it's next step (response to stress) is flooded.** This is one explanation for why people experiencing trauma may seemingly over-react or lash-out for no reason. They are constantly in a high state of alertness, which is not healthy either physically or mentally.

Information from: Harvard Medical School; "understanding-the-stress-response"

So, what is actually triggering a fight, flight, or freeze, response. It is important to remember (especially when working with students), that no action or behavior happens "for no reason."

Sometimes, a student's reaction may seem oversized or confusing, but for a person

who has been through trauma, triggers (or “threat cues”) come in many forms and may even seem innocuous to others. For example....READ LIST

For adults working with students who are experiencing trauma, it may be helpful to also be aware of trigger warnings such as....READ LIST.

From NCHE’s webinar on Trauma:

<http://center.serve.org/nche/downloads/webinar/trauma.pdf>

SCENARIO: 1st Grade Student and Teacher



Teacher asks student to put his things in a cubby at the back of the room.

Student immediately lashes out, pounding his fists on the table and loudly refusing to give up his belongings.

Teacher does not want to disrupt other students or encourage attention-seeking behavior.

Teacher doesn't realize that student is living in a shelter where his belongings are often taken by other children.

Student is sent out of classroom to "calm down."

Student's feelings of isolation and disconnection are re-enforced. He is now alone in the hallway with a "flooded" nervous system and without adult support to cope.

Source: http://www.nysteachs.org/media/TS_and_SchoolSuccess_NYS_Fall_Workshops2015_FINAL.pdf

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Facilitator Notes: We will now go through an example of how a well-intentioned interaction may go awry because the person involved has a history of traumatic experiences.

Just a disclaimer that these examples are simplified so that they would fit on one slide (I realize that real-life may involve many steps). Hopefully they illustrate a point though.

Go through example.

High Impact Students



To enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens.

- Students who need us the most are often those who push us away
- Students who need us the most are often those who push our buttons
- Students who need us the most, raise uncomfortable feelings in us

Give kids control over their decisions.

Source: <http://www.ashaweb.org/wp-content/uploads/2015/10/ASHA-Workshop.pdf>

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Facilitator Notes: The 1st grade student in that scenario represent our high impact students. These are the **[read through bullet points]**

Remember that students that have experienced one or maybe more of these ACEs likely feels helpless. But we can create an environment for them that allows them to feel like they have control in their lives. We have to **give kids control over their decisions.**

To help kids feel less helpless or out of control, adults can help give kids control over their decisions through guided and measured choices. In this way safety, order, and respect are maintained while also helping a student feel more in control



Trauma Diffusing Behaviors:

Everyday patterns of interaction that promote a child's well-being

- Earning Trust
- Radical Calmness
- Listening
- Body Language
- Knowing Your Own Buttons
- Physical Space and Touching
- Boundaries, Boundaries, Boundaries!




Facilitator's Notes: So let's shift our focus towards solutions for these students. Here are some general steps to take towards reducing behaviors symptomatic of ACEs
[Read through bullet points]

Addressing the Impact of Trauma through Sensitivity

<h3>Trauma Therapy</h3> <ul style="list-style-type: none"> - Licensed clinical mental health professional - Intervention occurs in a therapist/counselor's office, usually in 1:1 or small group sessions - Focus is on treating the symptoms of trauma (<i>e.g. depression, anxiety disorders, PTSD, etc.</i>) 	vs.	<h3>Trauma Sensitivity</h3> <ul style="list-style-type: none"> - Educators, district staff, and other individuals with varied mental health training (<i>or none at all!</i>) - Focus is THINKING AND RESPONDING DIFFERENTLY to a student/family's reactions and behaviors - Trauma-sensitive practices occur in the classroom enrollment office, bus, cafeteria, etc.
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Facilitator's Notes: One response that we often hear in conversation about trauma is "I'm not a trained mental health professional." That is why it's important to take a moment and point out the difference between trauma therapy and trauma sensitivity.

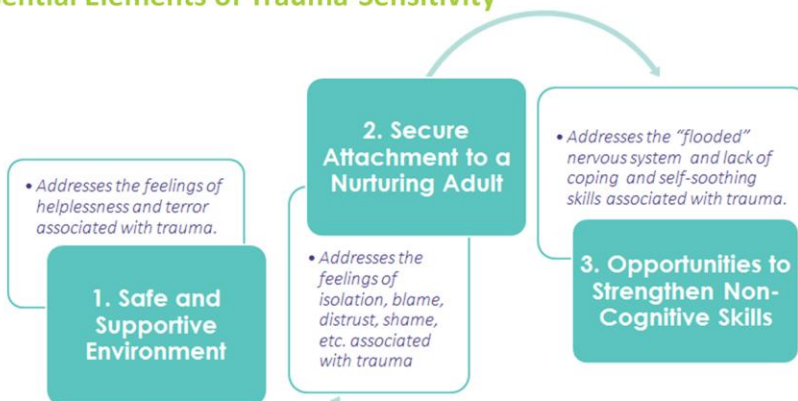
CLICK – some aspects of trauma-therapy include...

CLICK - For trauma sensitivity however,

CLICK FOR ORANGE BOX: So, what does trauma sensitivity look like in practice?

Trauma-Sensitive Supports

3 Essential Elements of Trauma-Sensitivity



Source: http://www.nysteachs.org/media/TS_and_SchoolSuccess_NYS_Fall_Workshops2015_FINAL.pdf

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Facilitator's Note: Why are these 3 categories of support essential to a trauma-sensitive approach? Each one addresses a specific negative impact from trauma. GO THROUGH EACH BLUE BOX.

Strategies and Actions

The matrix offers suggestions for becoming more trauma-sensitive as an individual and as a community.

Next Up:
Applying the strategies

Matrix of School Success Framework Strategies

Essential Element	Strategy	Related Action
CREATING A SAFE AND SUPPORTIVE SCHOOL ENVIRONMENT	Empathy	<ul style="list-style-type: none"> Actively Listen Normalize the experience Minimize self-blame Avoid giving advice
	Strengths-based approach	<ul style="list-style-type: none"> Deliberately point out actions and characteristics that are positive, unique, or valuable Guide a student towards recognizing and using his or her strengths. Redirect a challenging behavior by focusing on what you know the student can do well
	Predictability	<ul style="list-style-type: none"> Be clear about expectations Follow through Keep a consistent routine Talk through changes
	Prevention rather than punishment	<ul style="list-style-type: none"> Help the student identify triggers and create appropriate coping plans Teach or demonstrate what "should" be done

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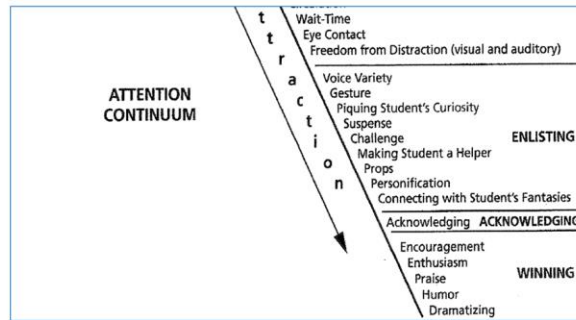
Facilitator's Note: We just went through some actions that you can take to implement trauma-sensitivity, but there are many more. I want to draw your attention to the handout called "Matrix of School Success Framework Strategies." It is a one page "cheat sheet" that includes several suggested strategies and related actions for each of the 3 essential elements. [Distribute handout]

This resource as well as many others are online and we would be happy to share them with you afterward.

[CLICK] We will now briefly revisit the scenario from the beginning of the presentation, but this time we'll add trauma-sensitive strategies and see how the outcome may be different.

Positive Framing & the Attention Continuum

People are motivated by the positive far more than the negative. Seeking enjoyment and happiness will spur stronger action than seeking to avoid punishment.

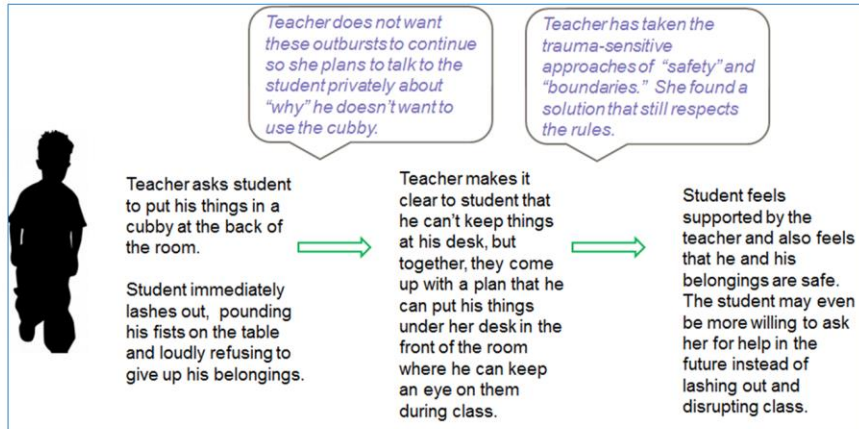


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Facilitator's Note: In addition to the strategies outlined in the Matrix, you can also consider using positive framing and the continuum of attention to foster a safe and supportive environment.

Fear-based feedback does not result in long-lasting change or growth, nor does it teach adaptive problem solving.

SCENARIO: 1st Grade Student and Teacher



Source: http://www.nysteachs.org/media/TS_and_SchoolSuccess_NYS_Fall_Workshops2015_FINAL.pdf

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Facilitator's Note: Now, let's re-visit the same scenarios as before. This time though, we'll use a trauma-sensitive approach and demonstrate how it can lead to a different (and likely better) outcome.

Go through example.

Resilience

- Is about learning to cope, in a positive way with life's inevitable stressors.
- We might do our greatest good by raising students with a wide repertoire of positive coping strategies.



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Facilitator's Note: To close, we can't undo the things that many of our students experience. But we can create an environment that allows them to flourish despite those challenges.

Children are very resilient, naturally. Your efforts to promote best practices are not in vain!

Questions?



(old pic) Source:

<http://www.fda.gov/BiologicsBloodVaccines/ResourcesforYou/Consumers/ucm345587.htm#vaccines>

Thank you!



If you would like to see other trauma resources or find information on additional **Health Barriers to Learning**, please visit the **Healthy and Ready to Learn Resource and Training Center** at www.hrl.nyc

Worksheet: Matrix of School Success Framework Strategies

Adapted from NYS TEACHS: http://nysteachs.org/media/Matrix.of.School.Success.Strategies_8.24.16.pdf

Please take a moment to look through the strategies and related actions to help foster a trauma-informed classroom. **Circle** what you have done and **underline** what you would like to start implementing.

LOW and SLOW
 When implementing strategies in the classroom, be mindful of:
 tone body language volume space

Essential Element	Strategy	Related Action
CREATING A SAFE AND SUPPORTIVE SCHOOL ENVIRONMENT	Empathy	<ul style="list-style-type: none"> Actively listen Normalize the experience Minimize self-blame Avoid giving advice
	Strengths-based approach	<ul style="list-style-type: none"> Deliberately point out actions and characteristics that are positive, unique, or valuable Guide a student towards recognizing and using his or her strengths Redirect a challenging behavior by focusing on what you know the students can do well
	Predictability	<ul style="list-style-type: none"> Be clear about expectations Follow through Keep a consistent routine Talk through changes
	Prevention rather than punishment	<ul style="list-style-type: none"> Help the student identify triggers and create appropriate coping plans Teach or demonstrate what “should” be done Avoid punishment and isolation Reward positive behavior to encourage and build confidence Teach mindfulness Positive framing
	Welcoming building environment	<ul style="list-style-type: none"> Make sure that classrooms and hallways are bright and clean Don’t corner someone Consider having a “safe corner” or a “peace room” Greet students at the door Make sure transition times are supervised
	Connection to school community	<ul style="list-style-type: none"> Institute a peer buddy program Institute a student/adult mentorship program Deliberately connect students to extracurricular activities Use a team approach
	Partnership, not power	<ul style="list-style-type: none"> Avoid power/control struggles Do not “corner” someone emotionally Help individual students find coping strategies for stressors

LOW and SLOW

When implementing strategies in the classroom, be mindful of:
tone **body language** **volume** **space**

FOSTERING SECURE ATTACHMENTS	Mentoring	<ul style="list-style-type: none"> ● Be available ● Be consistent ● Make sure the student knows that he can go to you in a crisis ● Encourage self-motivation ● Help students set goals and create strategies for reaching those goals
	Help children identify safe people to talk to in the school	<ul style="list-style-type: none"> ● Post the names and roles of key school staff ● Let students know <i>how</i> to contact a safe adult ● Set clear expectations and boundaries
	Be patient and consistent	<ul style="list-style-type: none"> ● Give unconditional support ● Set high expectations ● Lead by example
	Family programming	<ul style="list-style-type: none"> ● Host family nights or other events ● Make an effort to meet the caregivers where they are ● Don't engage in negative conversation about a family
	Helping a child to cope	<ul style="list-style-type: none"> ● Breathing for relaxation ● Positive distractions ● Promote leadership ● Encourage peer support ● Ensure children have a healthy diet ● Ensure children have plenty of exercise
	Use a team approach	<ul style="list-style-type: none"> ● Stress inclusiveness and shared purpose ● Share updates and successful strategies with other staff as appropriate
STRENGTHENING NON-COGNITIVE SKILLS (I.E SOCIAL- EMOTIONAL LEARNING)	Focus on "what happened to you" rather than "what is wrong with you"	<ul style="list-style-type: none"> ● Ask more questions and listen to the answers ● Watch for patterns and triggers ● Keep in mind the student's history
	Encourage resiliency	<ul style="list-style-type: none"> ● Focus on strengths, not deficit ● Praise effort, not just outcomes ● Focus on "should" rather than "should not"
	Teach coping techniques	<ul style="list-style-type: none"> ● Talk about self-soothing ● Talk about self-regulation ● Help the student identify triggers and strategies ● Show students where/how they have control
	Empower students	<ul style="list-style-type: none"> ● Encourage intrinsic motivation ● Build self-confidence ● Promote leadership

LOW and SLOW

When implementing strategies in the classroom, be mindful of:

Tone

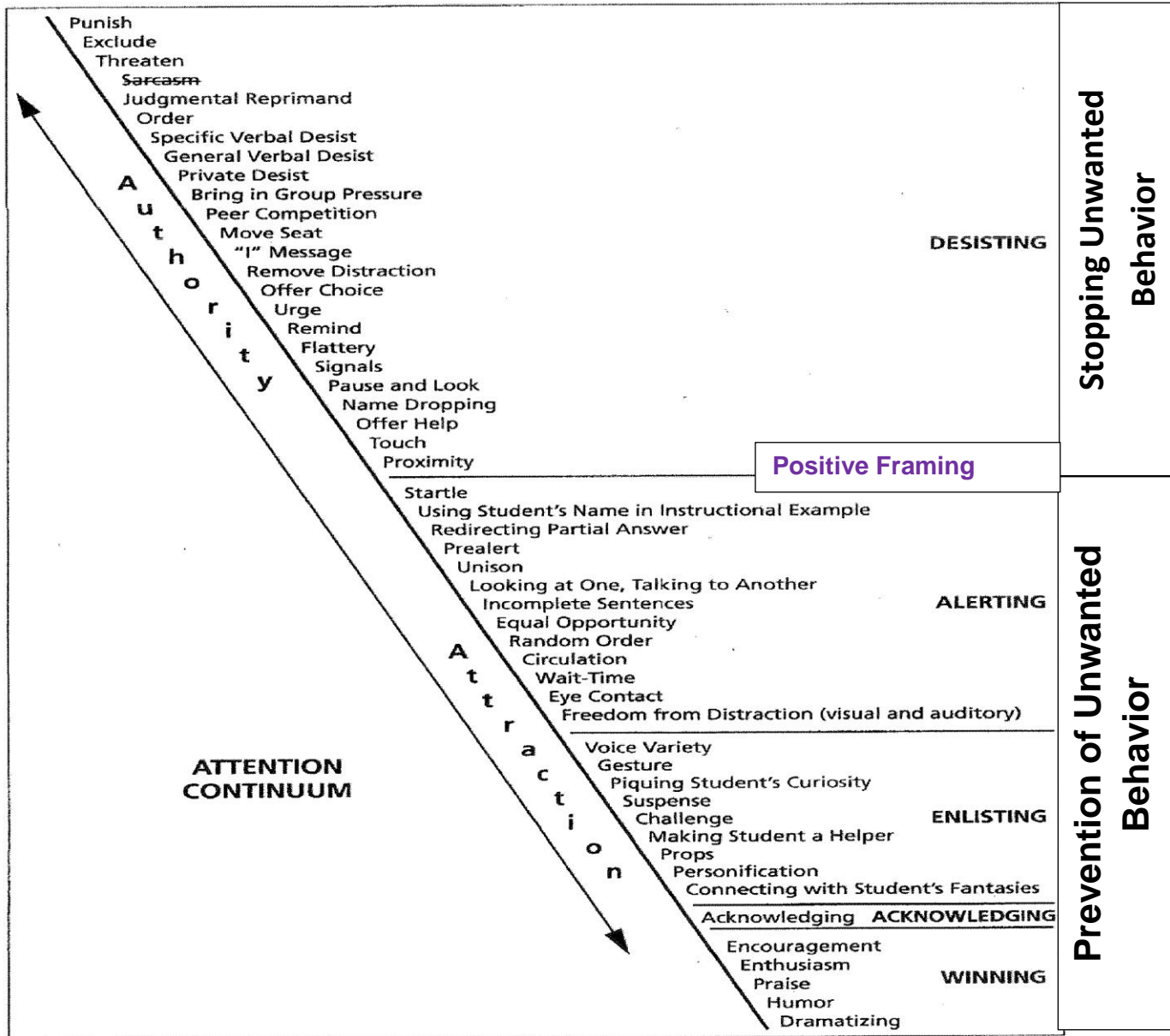
Body Language

Volume

Space

The Skillful Teacher (p.24)

Figure 3.1. A Repertoire of Attention Moves



POSITIVE FRAMING STRATEGIES

- **Live in the Now:**

Example: Show me your eyes, fifth grade.

Non-example: Fifth grade, some of us are looking out the window.

Example: Third grade, Tina is describing the setting. Our eyes should be on the speaker.

Example: Charles, Tina is describing the setting. Your eyes should be on the speaker.

Non-example: Charles I'm tired of asking you to track the speaker.

- **Assume the Best:**

Example: Just a minute, fourth grade. A couple of people were so excited to write about Roald Dahl that they went ahead before I told them to start.

Non-example: Fourth grade, none of us should be trying to sneak ahead of the rest of the class.

Example: A couple of people forgot our rules about tracking, Tina. Give them a second before you start.

Non-Example: Tina, please wait to answer until Jeffrey decides to join us.

- **Allow Plausible Anonymity:**

Example: Fourth grade, check yourself to make sure you're in your best SLANT with your notes page in front of you.

Non-example: Jason, I want to see you in SLANT with your notes page in front of you.

- **Build Momentum/Narrate the Positive:**

Example (Narrate the Positive): I see lots of hands. The left side of the room is really with it!

Example (Narrate the Positive + Build Momentum): I see five, six, seven hands. Now ten hands ready to start reading *Hatchet!*

Non-Example: (Narrating Your Weaknesses): I'm seeing the same few hands. A lot of you are not participating and it's going to show up in your participation grades.

- **Challenge!:**

Example: You've got the idea but let me hear you use the word "elusive" in your answer. Can you do it?!

Example: The sixth grade girls are *killing* it boys. Can you keep the pace?

- **Talk Aspiration:**

Example: (To a fourth grader) Good, Juan. Now let me hear you make it a fifth grade answer by using the word "product."

Example: Can you answer that in the words of a scientist? (Or historian/writer/musician)