CREATING TRAUMA-INFORMED SCHOOLS AND CLASSROOMS

June 24, 2019
MADSEC Directors’ Academy

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Tweet: @E_Rossen
Resources

Google drive folder

https://tinyurl.com/y29ypx
Learning Objectives

• Define and describe a trauma informed approach, including the six principles for Compassionate Schools;
• Apply a trauma-informed approach to IEP and 504 development;
• Apply practical, implementable Tier 1 and Tier 2 strategies at the district and classroom levels to support students with a history of adversity or trauma;
• Make decisions regarding trauma screening and assessment;
• Discuss relevant school or district policies that promote a trauma-informed school environment within an MTSS framework;
• Identify related case law and state statutes;
• Examine a trauma-informed approach to building design; and
• Ensure a school culture that minimizes secondary traumatic stress among staff.

Piece of cake, right?
About Eric

• Dad/Husband
• First time in Maine was 2 years ago – this is my second time here
• Hate pickles and mustard
• Nationally Certified School Psychologist
• Licensed Psychologist (Maryland)
• National Register Health Service Psychologist
• Director of Professional Development and Standards with the National Association of School Psychologists
“If you’ve seen one school, you’ve seen one school”
• Natalie Turner
Ginosaur et al., 2017
Take your pulse

• 2 minutes - What does your school do well in supporting students with trauma histories?

• 1 minute – Yes/No - Does your school staff have a shared understanding of issues around student stress and trauma?
What is Trauma?

• Exposure to conditions that:
  • Cause harm to well-being
  • Overwhelm the ability to cope
  • Interfere with daily life or ability to function

• Trauma is subjective
Trauma

• The Three Es
  • Event
  • Experience
  • Effects
Common misunderstandings

- Adversity during childhood causes negative outcomes
- Exposure to adversity invariably leads to negative outcomes
- Childhood adversity and trauma are synonymous
Trauma

Crisis

Mother-in-law

ACEs

Traumatic Event
What makes an experience traumatic?

Subjective

• Individual factors
  • Previous experiences
  • Biology
  • Developmental level
  • Other risk factors
  • Perception
What makes an experience traumatic (cont.)?

Event/Experience factors

- Proximity
- Severity
- Availability of social support/validation
- Availability of intervention services/response
- Whether stressor is chronic or single-event (acute)
- Interpersonal or non-interpersonal
What do the data say?
Trend: Adverse Childhood Experiences, Maine, United States

0-17 years with 2 or more ACEs

Source:
- Child and Adolescent Health Measurement Initiative, National Survey of Children's Health, Data Resource Center for Child and Adolescent Health
Frequency and Types of Adversity

What do you think are the most identified ACEs in Maine in 2014?

WHAT IMPACT DO ACEs HAVE?

As the number of ACEs increases, so does the risk for negative health outcomes.

0 ACEs  1 ACE  2 ACEs  3 ACEs  4+ ACEs
Effects of Trauma

- **Neurology**
  - Impacts brain structure and function
  - Production of adrenaline and cortisol
  - Shorter telomeres
  - Reading emotions
3 Year Old Children

Normal

Extreme Neglect
What Does Trauma Look Like In School?

• Learning and Cognition
  • Difficulty processing instructions
  • Decreased attention, memory, and focus
  • Reduced executive functioning
  • Difficulty solving problems
  • Difficulty understanding consequences of actions
  • De-emphasis on skills/tasks that are not directly relevant to survival

• Looks like?
What Does Trauma Look Like In School?

- Heightened vigilance; Inaccurate perception of danger
- Rapid response to perceived threats
- Self-protective behaviors
  - Aggression
  - Withdrawal
### Exhibit 1.3-1: Immediate and Delayed Reactions to Trauma

#### Immediate Emotional Reactions
- Numbness and detachment
- Anxiety or severe fear
- Guilt (including survivor guilt)
- Exhilaration as a result of surviving
- Anger
- Sadness
- Helplessness
- Feeling unreal, depersonalization (e.g., feeling as if you are watching yourself)
- Disorientation
- Feeling out of control
- Derealization
- Constriction of feelings
- Feeling overwhelmed

#### Delayed Emotional Reactions
- Irritability and/or hostility
- Depression
- Mood swings, instability
- Anxiety (e.g., phobia, generalized anxiety)
- Fear of trauma recurrence
- Grief reactions
- Shame
- Feelings of fragility and/or vulnerability
- Emotional detachment from anything that requires emotional reactions (e.g., significant and/or family relationships, conversations about self, discussion of traumatic events or reactions to them)

#### Immediate Physical Reactions
- Nausea and/or gastrointestinal distress
- Sweating or shivering
- Faintness
- Muscle tremors or uncontrollable shaking
- Elevated heartbeat, respiration, and blood pressure
- Extreme fatigue or exhaustion
- Greater startle responses
- Depersonalization

#### Delayed Physical Reactions
- Sleep disturbances, nightmares
- Somatization (e.g., increased focus on and worry about body aches and pains)
- Appetite and digestive changes
- Lowered resistance to colds and infection
- Persistent fatigue
- Elevated cortisol levels
- Hyperarousal
- Long-term health effects including heart, liver, autoimmune, and chronic obstructive pulmonary disease

#### Immediate Cognitive Reactions
- Difficulty concentrating
- Ruminating or racing thoughts (e.g., replaying the traumatic event over and over again)
- Distortion of time and space (e.g., traumatic event may be perceived as if it was happening in slow motion, or a few seconds can be perceived as minutes)
- Memory problems (e.g., not being able to recall important aspects of the trauma)
- Strong identification with victims

#### Delayed Cognitive Reactions
- Intrusive memories or flashbacks
- Reactivation of previous traumatic events
- Self-blame
- Persuasion of event: Difficulty making decisions
- Magical thinking: belief that certain behaviors, including avoidant behavior, will protect against future trauma
- Belief that feelings or memories are dangerous
- Generalization of triggers (e.g., a person who experiences a home invasion during the daytime may avoid being alone during the day)
- Suicidal thinking

#### Immediate Behavioral Reactions
- Startled reaction
- Restlessness
- Sleep and appetite disturbances
- Difficulty expressing oneself
- Argumentative behavior
- Increased use of alcohol, drugs, and tobacco
- Withdrawal and apathy
- Avoidant behaviors

#### Delayed Behavioral Reactions
- Avoidance of event reminders
- Social relationship disturbances
- Decreased activity level
- Engagement in high-risk behaviors
- Increased use of alcohol and drugs
- Withdrawal

(Continued on the next page.)
“Focusing on academics while struggling with trauma is like trying to play chess in a hurricane.”

---Dr. Kenneth Fox, high school teacher
Typical Processing of Events
A Child’s Trauma Response
Chronic Trauma and Stress…

With repeated stress, the Alarm System “Express Route” becomes the main road.
HOWEVER…

- We should avoid the false dichotomy of resilient vs. non-resilient
- Various trajectories of post-traumatic adjustment
Positive Adjustment Trajectories
(Layne & Hobfoll, in press)

<table>
<thead>
<tr>
<th>Trajectory</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Stress Resistance</td>
<td>The capacity to “stand firm against” the effects of stress exposure.</td>
</tr>
<tr>
<td>2. Resilient Recovery</td>
<td>The capacity to quickly “spring back” and return to adaptive functioning after stress exposure.</td>
</tr>
<tr>
<td>3. Prolonged Recovery</td>
<td>A lengthy decrease in functioning that may drop to the clinically-impaired range, followed by gradual yet full recovery.</td>
</tr>
<tr>
<td>4. Growth</td>
<td>An accumulation of resources that eventually exceed the level that existed prior to the stressor.</td>
</tr>
</tbody>
</table>
Difference between resistance and resilience

Layne et al., 2004
### Negative Adjustment Trajectories
(Layne & Hobfoll, in press)

<table>
<thead>
<tr>
<th>Trajectory</th>
<th>Trajectory Definition</th>
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<tr>
<td>5. Decline</td>
<td>Maintaining adaptive functioning for a limited period after stress exposure, followed by significant deterioration.</td>
</tr>
<tr>
<td>6. Delayed Decline</td>
<td>Maintaining adaptive functioning for a prolonged period after stress exposure, followed by significant deterioration.</td>
</tr>
<tr>
<td>7. Distress Tolerance</td>
<td>Descent into the Moderate to Low-Moderate range of adjustment without subsequent recovery.</td>
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<tr>
<td>8. Phasic Adjustment</td>
<td>A fluctuating course of varying patterns and durations; low points descend to Moderate or Poor adjustment.</td>
</tr>
<tr>
<td>9. Severe Decline</td>
<td>A rapid plummet from Good/Moderate to Poor functioning in response to the stressor, with either no subsequent recovery or a slow partial recovery.</td>
</tr>
<tr>
<td>10. Chronic Maladaptive Functioning</td>
<td>Poor functioning before the stressor that persists during and afterwards.</td>
</tr>
</tbody>
</table>
Cultural Influences on Trauma

• What do you think of when you hear the word:
Compton Schools Lawsuit

• “I was coming home… and this Hispanic guy had an African-American guy on his knees and he just blew his head off.”

• “I was throwing up for like three hours. My momma didn’t know why I was throwing up, I just told her I was sick.”

• ----Statement from anonymous student in the lawsuit
Culture and Response to Trauma

- Culture shapes how we:
  - Interpret experiences
  - Respond to stress
  - View and seek mental health supports
  - View normal and abnormal
Pop Quiz

• In an international 2014 study, adolescents and young women were asked if they believe that a man has justification to beat his wife under certain conditions. What was the range of responses across countries?
  • A) 7% to 93%
  • B) 18% to 81%
  • C) 24% to 64%
  • D) 5% to 23%
Staying aware of our blind spots

- Implicit bias
- Applying our own lens of “normal”
- Acknowledging how our own views may impact our own responses
If a child disclosed to you that they were sexually abused, and the parent came in and told you it was not true at all, how often do you think a teacher would believe the parent?
Cultural Considerations

- 7 years old
- Arrives at school and a fellow student notices some deep bruised marks along his back and ribs
- What would you do????

![Image of bruised marks on a child's back and ribs]
Social Culture and Time
Grieving Practices and Religion

- **Islam**
  - Death should not be questioned because it is an act of God
  - Mourners are encouraged to grieve publicly
  - Family members of the deceased are not left alone for 7 days
  - Prayers occur on the 40th and 52nd days after the death
  - The body is buried in a white cloth without a coffin

- **Judaism**
  - Viewing are uncommon
  - Funerals do not occur on Saturdays or other religious holidays
  - It is not encouraged to include music or flowers
  - A 7-day mourning period (“sitting shiva”) occurs after the burial

- **Protestant Christianity**
  - Family gatherings before the funeral are common
  - Flowers and donations are accepted as expressions of condolences
  - Church members often assist in the funeral service or with family members’ recovery process

- **Roman Catholicism**
  - The Sacraments of the Sick (confession and communion) are performed before a person dies
  - It is typical for families to have a wake for the deceased
  - Priests preside over the wake in the form of a complete religious service (mass) or by saying the rosary
  - The casket is covered with a white cloth & sprinkled with holy water

Inequities in trauma

• Exposure to adversity
• Trauma Response
• Perception of adults
• Treatment
  • Race
  • Disclosure
  • Stigma
Cultural Considerations

- Consider unique cultural narrative of the individual student
  - What are student’s goals?
  - How do they differ from the goals we (educators) set?
- Cultural humility

What cultural forces are at play among families that may discourage speaking to a school mental health professional?
Ahmed

- You receive a referral for a Muslim student, age 11 years, because he often seems frustrated and angry, and sometimes gets into fights with other students. The teacher reports that while he is often teased, he loses his temper easily and can get aggressive.

- How would you typically respond?
Intergenerational Trauma

- Transmission across generations
  - Holodomor
  - Holocaust
  - Khmer Rouge killings in Cambodia
  - Rwandan genocide
  - Displacement of American-Indians
  - Enslavement of African-Americans
Intergenerational Trauma

• Transmission across generations
  • Epigenetic
  • Communication
  • Indirect (e.g., poverty)
  • Physical

• Don’t expect to know
  • Impact of intergenerational trauma on disclosure

• Suggested interventions?
Which do you believe?

A) Trauma is an issue best dealt with at a school-wide level
B) Trauma is an issue best dealt with through targeted and intensive student-level interventions
C) I don’t know, I’m just here for the food
"When a flower doesn't bloom, you fix the environment in which it grows, not the flower"

(Alexander Denn Heijer)
Developing a Trauma Informed Approach
So…what does “trauma-informed” mean?

• “A program, organization, or system that is trauma-informed:
  • *Realizes* the widespread impact of trauma and understands potential paths for recovery;
  • *Recognizes* the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
  • *Responds* by fully integrating knowledge about trauma into policies, procedures, and practices; and
  • Seeks to actively resist *re-traumatization.*“

SAMHSA: https://www.samhsa.gov/nctic/trauma-interventions
In my view…

Trauma-informed approaches are not just something you do….

…it’s a way that you think.
How do we make students feel…

Safe?
Loved?
Capable?
Likeable?
"Home is where somebody notices when you are no longer there."

-Aleksandar Hemon
Why Is This the School’s Problem?
And Why Is This Our Problem?
“The most disruptive children dominated the schools. Teachers didn’t have control of their classrooms — in part because nothing in their training had taught them how to deal with traumatized children.”

“The traditional therapist’s response, of course, is to recommend therapy for traumatized children. But that’s an impossible solution in a big-city school of 1,000 or more students.”

Resolve, To Improve Maine's Response to Childhood Trauma
L.D. 1168

- Task force on childhood trauma response guidance
  - Focused on training and guidance for K-12 staff
  - Access to support staff at appropriate ratios
  - Access to social-emotional curriculum
  - Attendance and discipline policy with trauma-informed lens
  - Access to appropriate funds and resources
Models for Trauma-Informed Schools

- ARC Model
  - Trauma Center at the Justice Research Institute (Blaustein)
- SAMHSA’s Trauma-Informed Approach
- Trauma-Sensitive Ecology
  - Trauma Learning Policy Initiative (TLPI)
- Flexible Framework (Cole et al., 2005)
- New Haven Trauma Coalition (Perry & Daniels, 2016)
- HEARTS (Dorado et al., 2016)

WHAT DO THEY HAVE IN COMMON?
Trauma-informed schools

Safe environment

Build student capacities

School-wide focus

Build staff capacities

Trauma-informed schools
## 8 Common Elements of Trauma-Informed Schools

<table>
<thead>
<tr>
<th>Practice/Policy/Training Examples</th>
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<tbody>
<tr>
<td><strong>Whole School Safety Programming</strong></td>
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<tr>
<td>· Routine assessment of campus physical safety.</td>
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<tr>
<td>· Bullying prevention.</td>
</tr>
<tr>
<td><strong>Whole School Prevention Programming</strong></td>
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<tr>
<td>· Process for students to report concerns about peers.</td>
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<tr>
<td>· Routine assessment of school climate.</td>
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<tr>
<td><strong>Whole School Trauma Programming</strong></td>
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<tr>
<td>· Discipline policies are trauma-informed.</td>
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<tr>
<td>· All school staff are educated about the prevalence and impact of trauma</td>
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<tr>
<td><strong>Classroom-based Strategies</strong></td>
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<tr>
<td>· Focus on safe and supportive classroom environments.</td>
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<tr>
<td>· Behavioral supports are provided to students in the classroom.</td>
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<tr>
<td>· Use of social-emotional learning programs.</td>
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<tr>
<td><strong>Early Intervention Trauma Programming</strong></td>
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<tr>
<td>· Student support teams examine trauma exposure as it relates to student performance.</td>
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<tr>
<td>· School- and evidence-based treatments available for traumatized students.</td>
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<tr>
<td><strong>Targeted Trauma Programming</strong></td>
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<td>· Multidisciplinary teams examine trauma’s impact on student performance.</td>
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<tr>
<td>· Partnerships with community based, trauma-informed mental health providers.</td>
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<tr>
<td><strong>Staff Self-Care</strong></td>
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<tr>
<td>· All school staff are educated about secondary traumatic stress and self-care.</td>
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<tr>
<td>· Supports are available for staff working with traumatized students.</td>
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<tr>
<td><strong>Community Context</strong></td>
</tr>
<tr>
<td>· All school staff are trained to be culturally aware and responsive.</td>
</tr>
<tr>
<td>· Opportunities exist to engage families.</td>
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</table>

Trauma Responsive Schools Implementation Assessment Tool (TRS-IA) – FREE [https://theshapesystem.com](https://theshapesystem.com)
Fits well into Tiered Approach

- Universal
- Selected
- Tertiary


Using Positive Behavioral Interventions & Supports (PBIS) to Help Schools Become More Trauma-Sensitive
Wisconsin Department of Public Instruction
Why would a trauma-informed approach not work?

• Seems like another “program” or “thing” we have to pay attention to.
• Are we just coddling disobedient adolescents that need structure?
• Does this conflict with how we might otherwise raise our children?
• It doesn’t necessarily help prevent problems from occurring.
• Can the staff coalesce around these issues?
Let’s Talk Tier 1 stuff

Tier 2 and Tier 3 coming later
6 Principles of Compassionate, Trauma-Informed Schools

http://www.k12.wa.us/CompassionateSchools/pubs/docs/TheHeartofLearningandTeaching.pdf
Empower

• Improve students sense of control and autonomy
  • The need for control and autonomy increases as life becomes more unpredictable
  • Increase predictability by instituting routines and rituals
Unconditional Positive Regard

- Improve students sense of worthiness
  - Trauma, is often interpersonal and has a betrayal and abandonment component
- Welcome Back Cards
Maintain High Expectations

- Children with a trauma history sometimes are viewed as less capable than peers
  - Keeping the same routine after an event provides predictability
  - Compassion does not translate to lower expectations
Check assumptions, observe, and listen

- Assumptions often made about
  - Who will be affected by adversity/stress
  - How much people will be affected
  - What their response should look like
  - Functions of behavior

- Replace assumptions with observations and questions
Almost Final Question: For about how long does each person speak for many times, if any, does one person speak for so long that they repeat themselves?

Final Question: What did you learn from this analysis? Do you notice that this podcast was off-task? I'd given instructions, reminded & repeat & repeat & repeat & repeat & repeat. Normally, it would have been alllllllllllllllllllllllllll spice from me in reaction. For whatever reason, instead, I asked him to write down three things that were on his mind from the weekend. Keeping him from working. He wrote these three things.

I wrote back.

My reaction to the crazy has been totally different all day because I have a little more perspective. I miss the mark and get it wrong and react in a spicy way too often, but I'm trying extra hard to get it right today.

I love you.
I'm grateful & lucky to be your teacher.

You are amazing & so smart & a great dude.
Mike, a tenth grader, walked into Ms. Wilson’s class wearing his hat. She politely asked him to take his hat off. He refused. She asked with more firmness. The hat remained. She demanded he take his hat off with thoughts racing through her head, “I’m going to show this disrespectful kid he isn’t messing with me in my class”.

What happens next???
Little boy: "Where does poo come from?"

Father: "Well, son, food passes down the esophagus by peristalsis. It enters the stomach, where digestive enzymes induce a probiotic reaction in the alimentary canal. This contracts the protein before waste enters the colon. Water is absorbed, whereupon it enters the rectum finally to emerge as poo."

Little boy: "Wow. So where does Tigger come from?"
Ain’t Got No Pencil by Joshua T. Dickerson

I woke myself up
Because we ain’t got an alarm clock
Dug in the dirty clothes basket,
Cause ain’t nobody washed my uniform
Brushed my hair and teeth in the dark,
Cause the lights ain’t on
Even got my baby sister ready,
Cause my mama wasn’t home.
Got us both to school on time,
To eat us a good breakfast.
Then when I got to class the teacher fussed
Cause I ain’t got no pencil
Relationship Coaching

- Skills that can be explicitly taught
- Model how to interact with others
- Everyone needs some help in managing relationships sometimes

Lesson plan template (WI Dept. of Public Instruction)
What are some things most kids can use relationship coaching on?
"Resilience requires relationships, not rugged individualism"

---Harvard Center on the Developing Child
Staff-Student Relationship Activity

• Gather school staff
• List each student by grade
• Each staff member goes through each name and puts a mark if they have a good relationship with the students
• Identify the students that have no check marks, and make sure that some staff get to know those students
“Pain shared is halved; joy shared is doubled.”

---Edith Nissen [1924-2011] (my grandma)
Provide Opportunity to Assist

• Allow opportunities to help others
  • Improves feelings of self worth
  • Improves engagement, connectedness and recovery
• Examples; reading to students in lower grades, tree planting, safety patrol, running errands.
• Freerice.com
Change in Worldview
• Take student’s perspective
  • Transition to school
  • Arrival at school
  • Time in the classroom
  • Lunch
  • End of the day

• Wisconsin School Mental Health Project: Trauma-Sensitive Schools Professional Development
Learned Helplessness

- Global vs. specific attribution
  - all contexts or just situational
- Stable vs. unstable attribution
  - Cause consistent over time or just time limited
- External vs. internal attribution
  - Something to do with me, or some external factor
Worldview

- Take parent’s perspective
  - Prior to meeting
  - Arrival at school
  - Meeting itself
  - End of meeting

- Wisconsin School Mental Health Project: Trauma-Sensitive Schools Professional Development
Try a walkthrough

• Have staff participate in some student walks or commutes in groups of 2 to 4 staff and report back on their experiences

• Ask families to complete an evaluation of their experience when visiting the school for feedback
Trauma-Informed Building and School Board Policies
## Balancing Physical & Psychological Safety

<table>
<thead>
<tr>
<th>Physical Safety</th>
<th>Psychological Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secure doors</td>
<td>Trusting and Respectful Relationships</td>
</tr>
<tr>
<td>Check in/out system</td>
<td>Access to school employed mental health professionals</td>
</tr>
<tr>
<td>Lighted hallways</td>
<td>Continuum of support services</td>
</tr>
<tr>
<td>Monitoring of School Grounds</td>
<td>Mental Health First Aid</td>
</tr>
<tr>
<td>Properly designed playgrounds and sports fields</td>
<td>Positive Discipline</td>
</tr>
<tr>
<td>Adult supervision in high traffic areas</td>
<td>Anti-bullying initiatives</td>
</tr>
<tr>
<td>School Resource Officer**</td>
<td>Confidential Reporting System</td>
</tr>
<tr>
<td>Threat Assessment Procedures</td>
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</tr>
</tbody>
</table>
Family engagement

• How do you currently engage families?
• What are some barriers for some families to stay engaged?
  • How do you overcome those barriers?
• Is there one thing you can do as a school to improve engagement?
Family-School Collaboration

- Can build in better communication rituals among school and home
  - Upcoming dates to know about
  - Upcoming projects
How about our reports?

- Parents, as consumers of psychoeducational reports, do not understand the information presented (Harvey, 1997, 2006; Miller & Watkins, 2010; Weiner & Kohler, 1986).

  - Use of psychometric jargon
  - High readability levels
  - Lack of clear conceptualization of the child’s needs
  - Recommendations that aren’t useful
What happens when parents don’t understand information in reports?

- Barriers participating in decision-making (Mandic et al., 2012).
- Less likely to engage in making important choices (Teagle, 2002).
- Silencing effects and reduced ability to advocate (Harry, 1995).
Consumer Oriented Reports

- Language, content, organization
- Focuses on child, not the test
- Empowering to families

- Parents (and teachers) report significant differences in usefulness of consumer oriented reports (Hite, unpublished research)
Social-Emotional Test Results

Ruth’s mother and teacher each completed Conners Comprehensive Behavior Rating Scales to evaluate Ruth’s behaviors and emotional state. Ruth has good social skills, behaves and thinks in typical ways compared to other children her age. The only area of concern Ruth’s mother and teacher have are language difficulties that make schoolwork hard.
Ideas on how to systematically improve reports in your district?

How do you think this might embed trauma-informed principles and improve outcomes?
Discipline Approaches
Consider Discipline Approach

• Effective discipline
  • Stops misbehavior and encourages compliance (short-term)
  • Teaches or develops self-discipline (long-term goal)

• Do not try to identify the consequence; identify the right response
But They Are Just Seeking Attention, Right?

Behavior is communication
Blanket the Table

What makes for an effective discipline plan?

1. Take turns writing down what makes and effective approach to discipline – one at a time – in any order
2. Whichever table has the most wins
3. You have 3 minutes
Effective discipline policies AND practices

- Developed collaboratively
- Clear expectations
- Success is acknowledged
- Focus on effective intervention rather than identifying a “good punishment”
- Implemented fairly and consistently
- Proactively teach skills or replacement behaviors (rather than wait for problems)
- Empower teachers to avoid sending kids to office
- Prevent re-traumatization
- View behavior problems as a potential skill deficit
- Evaluated regularly using data
Restorative Practices

• Following absence from expulsion, suspension, etc.
  • Reentry circles
  • Makes plan to repair damage and make things right
  • Focused less on punishment – more on repairing harm done
Review your own policies

- Who makes decisions related to discipline?
- Who wrote the handbook?
  - Who had input on it?
  - How often is it reviewed?
- How many students are aware of the student code of conduct?
  - Parents?
- How often does team discuss whether behavior is a skill-deficit vs. a performance-deficit?
- How is context considered?
- Is discipline applied consistently?
- Are some offenses more likely to lead to disciplinary action for certain groups than others?
Challenge your own views

• Remind yourselves

• It affects me, but it’s not about me
• It affects me, but it’s not about me
• It affects me, but it’s not about me
• It affects me, but it’s not about me
• It affects me, but it’s not about me
• It affects me, but it’s not about me
School wide behavior plan through a trauma-informed lens

- Wisconsin Department of Public Instruction

- Examines how behavioral expectations are
  - Defined
  - Taught
  - Rewarded
  - Reinforced
  - Monitored
Let’s Look at Regional School Unit 21

- Arundel
- Kennebunk
- Kennebunkport

PERCENTAGE OF STUDENTS REPORTING FEELING SAFE IN THE KHS SCHOOL ENVIRONMENT

2017-2018: 61.78%
<table>
<thead>
<tr>
<th>MISBEHAVIOR</th>
<th>FIRST TIME</th>
<th>SECOND TIME</th>
<th>THIRD TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DISRESPECTFUL WORDS:</strong></td>
<td>• Handled by staff present.</td>
<td>• Handled by staff present.</td>
<td>• Staff Report to HR teacher</td>
</tr>
<tr>
<td></td>
<td>• Report to (homeroom) HR teacher</td>
<td>• Report to HR teacher</td>
<td>• HR teacher reports to principal and tracks.</td>
</tr>
<tr>
<td></td>
<td>• HR teacher tracks incident/assigns consequence.</td>
<td>• HR teacher reports to principal and tracks.</td>
<td>• Consequence assigned.</td>
</tr>
<tr>
<td></td>
<td>• Optional: notify parents.</td>
<td>• Student calls home with teacher, counselor or principal.</td>
<td>• Student calls home with principal.</td>
</tr>
<tr>
<td><strong>DISRESPECTFUL ACTIONS (nonphysical)</strong></td>
<td>• Handled by staff present.</td>
<td>• Handled by staff present.</td>
<td>• Parent meeting held.</td>
</tr>
<tr>
<td></td>
<td>• Report to HR teacher</td>
<td>• Report to HR teacher</td>
<td>• RTI referral.</td>
</tr>
<tr>
<td></td>
<td>• HR teacher tracks incident/assigns consequence.</td>
<td>• Student calls home with teacher, counselor or principal.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Optional: notify parents.</td>
<td>• Principal or HR teacher assign consequence.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• HR teacher tracks incident.</td>
<td></td>
</tr>
<tr>
<td><strong>DISRESPECTFUL ACTIONS (physical)</strong></td>
<td>• Handled by staff present.</td>
<td>• Handled by staff present.</td>
<td>• Principal assigns consequence.</td>
</tr>
<tr>
<td></td>
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<td>• Report to HR teacher</td>
<td>• Parent meeting held.</td>
</tr>
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<td>• RTI referral.</td>
</tr>
<tr>
<td></td>
<td>• Optional: notify parents.</td>
<td>• Principal assigns consequence.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Parent meeting held.</td>
<td></td>
</tr>
<tr>
<td><strong>SEVERE PHYSICAL AGGRESSION</strong></td>
<td>• Step one: CONTACT PRINCIPAL ASAP.</td>
<td>• IMMEDIATELY IMPLEMENT DISTRICT Threat/Act of Violence POLICY:</td>
<td>• IMMEDIATELY IMPLEMENT DISTRICT Threat/Act of Violence POLICY:</td>
</tr>
<tr>
<td></td>
<td>• Consider IMPLEMENTING DISTRICT Threat/Act of Violence POLICY</td>
<td>• Step one: CONTACT PRINCIPAL ASAP.</td>
<td>• Step one: CONTACT PRINCIPAL ASAP.</td>
</tr>
<tr>
<td></td>
<td>• RTI referral mandatory (if not in special education.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>THREATS OF VIOLENCE/HARASSMENT</strong></td>
<td>• IMMEDIATELY IMPLEMENT DISTRICT Threat/Act of Violence POLICY:</td>
<td>• IMMEDIATELY IMPLEMENT DISTRICT Threat/Act of Violence POLICY:</td>
<td>• IMMEDIATELY IMPLEMENT DISTRICT Threat/Act of Violence POLICY:</td>
</tr>
<tr>
<td></td>
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<td>• Step one: CONTACT PRINCIPAL ASAP.</td>
<td>• Step one: CONTACT PRINCIPAL ASAP.</td>
</tr>
<tr>
<td><strong>TECHNOLOGY MISUSE</strong></td>
<td>• HR Teacher tracks</td>
<td>• HR Teacher tracks</td>
<td>• HR Teacher tracks</td>
</tr>
<tr>
<td></td>
<td>• Teacher assigns consequence.</td>
<td>• Principal assigns consequence.</td>
<td>• Principal assigns consequence.</td>
</tr>
<tr>
<td></td>
<td>• Optional: notify parents.</td>
<td>• Optional: notify home with staff.</td>
<td>• Student calls home with principal.</td>
</tr>
</tbody>
</table>

Consequences may include, but not limited to: restorative classroom circle, apology of action, loss of recess, think plan, loss of computer use, exclusion from event or classroom. Any additional actions that require specific responses per District Policy and/or Maine State or Federal Law will be handled according to protocol. Consequences may be more stringent depending on severity of actual behavior. (Revised 7/17)
FOCUS AREA 3: HEALTHY LEARNING ENVIRONMENTS

2016 Community Project Student Survey Results (grades 4-12)

Student Requests

- Later Start Time: 70%
- Longer Lunch: 67%
- End Summer Homework: 62%

Student Rating on Classroom Environment

- Safe: 86%
- Healthy: 68%
- Accepting: 71%
- Friendly: 80%

2014-15 School Quality Survey (K-12)

- Encouragement: 78%
- Feel Safe at School: 75%
- Accepting: 78%
- Parent Satisfied: 78%

Student Rating on Adequate Safety

- Yes: 78%
- No: 22%

https://static1.squarespace.com/static/524a1808e4b025e8f32f551e/t/5ab3bcdb562fa79e4d67d2d7/1521728732067/RSU+21+Strategic+Plan+2016-2021.pdf
Percentage of students reporting KHS has enough safety drills on what to do in case of an emergency.
How is trauma embedded in school safety or crisis plan?

- How will certain drills (e.g. lockdowns) trigger traumatized students?
- How will a crisis response impact some students with a history of trauma?
- How do we promote school safety, including ensuring access to school-employed mental health professionals?
- How will this differentially impact students with disabilities?
Armed Intruder or Assailants?

# Mapping Triggers

<table>
<thead>
<tr>
<th>Student Triggers</th>
<th>Parent Triggers</th>
</tr>
</thead>
<tbody>
<tr>
<td>S1. Loud, chaotic environments</td>
<td>P1. Being called into school to discuss a problem</td>
</tr>
<tr>
<td>S2. Physical touch</td>
<td>P2. Being treated disrespectfully when you arrive at the school</td>
</tr>
<tr>
<td>S3. Uncertainty about expectations</td>
<td>P3. Participating in large meetings with a lot of school staff</td>
</tr>
<tr>
<td>S4. Changes in routine</td>
<td>P4. Not being part of decision making for your child</td>
</tr>
<tr>
<td>S5. Witnessing violence between peers, such as fighting</td>
<td>P5. Lack of privacy in where school staff members are talking to you about a private matter</td>
</tr>
<tr>
<td>S6. Meeting with an adult to address behavior</td>
<td>P6. Participating in an assessment process related to your child</td>
</tr>
<tr>
<td>S7. Emergency vehicles, police or fire personnel</td>
<td>P7. Confusion and lack of clarity about your child's education</td>
</tr>
<tr>
<td>S8. Being called out on your behaviors in front of others</td>
<td></td>
</tr>
<tr>
<td>S9. Being harassed or intimidated by others</td>
<td></td>
</tr>
<tr>
<td>S10. Being asked to discuss difficult topics</td>
<td></td>
</tr>
<tr>
<td>S11. Feeling embarrassed or ashamed</td>
<td></td>
</tr>
</tbody>
</table>
Mapping triggers

Take a few minutes to map out or identify the triggers in your school
   Perhaps identify the top 3

Trigger: “a stimulus that sets off a memory of a trauma or a specific portion of a traumatic experience”
   (SAMSHA, 2014 p.68)
Looking at the Built Environment

- Wall color
- Lighting (natural light vs. fluorescent light)
- Temperature – 20 to 23 C [68 to 74 F] ideal
- Greenery
- Overuse of concrete and asphalt
- Noise reduction
- Room layout
- Structure of classrooms and seating
- Door-knob placement
- Symbols in the school that convey belonging
- Opportunities for movement and exertion
- Enclosed calm spaces
  - Squared vs. round/circular designs
Starting a Movement
Full system implementation of trauma-informed approaches

According to National Implementation Research Network (NIRN), ___% of the systems that effectively use implementation science can reach full implementation within 3 years.

- A) 35%
- B) 50%
- C) 65%
- D) 80%
- E) 100%
Full system implementation of trauma-informed approaches

According to NIRN, systems that do not have an implementation team and only passively support the process may need up to ___ years to reach full implementation

A) 7
B) 10
C) 14
D) 17
E) None of the above, they’ll get what they deserve
Implementation does not occur in a straight line
Let’s Apply Implementation Science

• 4 essential questions

1. **Why do we feel an urgency to become a trauma-informed school?**
   - Why this, and why now?
   - How will this address our priorities and concerns?

2. **Are we ready to become a trauma-informed school?**
   - Can we, and ought we?

3. **What actions will address school priorities and help us become a trauma-informed school?**

4. **How do we know whether we are becoming a trauma-informed school?**
Role of district leadership (Yup, that’s you)

• Advocacy
• Communication
• Training and PD
• Community Connections
Trauma-Informed Leadership Team

- Leverage existing teams
  - PBIS
  - MTSS
  - Leadership
- Multiple year commitment
- Which stakeholders should you include?
What’s Your Vision?

• What will our trauma-informed school community look like in 5 years?

• Back to RSU 21 – here is the existing Vision Statement:
  • We support all students as they prepare themselves to thrive as global citizens in a rapidly changing world. We develop our students’ knowledge, critical thinking, and problem-solving skills, and nurture their curiosity, creativity, and resilience, empowering every child to reach his or her fullest intellectual, social, and creative potential.
### SMART Goals at the Building or District Level

<table>
<thead>
<tr>
<th>Generic Goal</th>
<th>Rewritten SMART Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduce the use of exclusionary discipline.</td>
<td>School will decrease suspension and expulsion rates by 20% during the 2018-2019 school year.</td>
</tr>
<tr>
<td>Implement new social-emotional learning curriculum to fidelity.</td>
<td>Social and emotional learning coach will provide 20 coaching sessions on classroom emotional regulation strategies across 4 pilot classrooms throughout the school year.</td>
</tr>
<tr>
<td>Increase family engagement.</td>
<td>All teachers will utilize at least one high-leverage family engagement strategy before the end of the 2nd semester.</td>
</tr>
</tbody>
</table>
Always Think About Sustainability

- Will the initiative survive
  - Staff changes
  - Leadership changes
  - Snow days, etc.

- Coaching model *(Cook & Black, in press)*

<table>
<thead>
<tr>
<th>Consultant</th>
<th>Systems Coach</th>
<th>Instructional Coach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brings expertise of trauma, and the strategies needed to address questions or concerns.</td>
<td>Develops the capacity of a district or campus to effectively implement a trauma-informed practice or approach.</td>
<td>Focuses on the specific trauma-informed practice and might include teacher, leadership, or team coaching.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Facilitator</th>
<th>Mentor</th>
<th>Trainer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plans, guides and manages a group or team as they work towards their objective.</td>
<td>Pairs up with an individual or group of people in similar professional roles and guides others based on knowledge/skills.</td>
<td>Imparts knowledge to an individual or group, models its application, gives participants opportunity to practice.</td>
</tr>
</tbody>
</table>
Trauma-Informed IEPs
Should students who have experienced trauma receive special education services?

- If so, what would be the appropriate exceptionality?
  - What if behavior is not a primary concern?
- Benefits?
- Negative or unintended consequences?
P.P. et al., v. Compton Unified School District, 66 IDELR 121 (C.D. Cal. 2015)

- Filed as a class-action lawsuit
- Invokes 504 (not IDEA)
- Asks Compton Unified School District to implement school-wide trauma-sensitive practices.
Update

- Defendant’s motion to dismiss – DENIED
- Plaintiff’s motion for preliminary injunction – DENIED
- Plaintiff’s motion for class certification – DENIED

- Settlement likely
Impact of *Endrew F. v. Douglas County School District*

- “...a school must offer an IEP reasonably calculated to enable a child to make progress appropriate in light of the child’s circumstances.”
- IEP constructed based on
  - Levels of achievement
  - Disability
  - Potential for growth
Impact of *Endrew F. v. Douglas County School District*

- What is sufficient progress for FAPE?
  - Grades?
  - Grade advancement/promotion?
- “Appropriately ambitious in light of his circumstances”
- “Every child should have the right to meet challenging objectives.”
(iii) Emotional disturbance includes children that have faced particular trauma in their life, .... In order to properly address the needs of students that fall into this subcategory, schools may provide trauma identification checklists and trauma-sensitive training for parents and teachers.
Special education, section 504, and trauma

• Special education
  • “…there will be a referral for evaluation for early intervention services of a child who experiences a substantiated case of trauma due to exposure to family violence (as defined in section 320 of the Family Violence Prevention and Services Act).”
    • IDEA, Title I, Part C (Infants and Toddlers), Section 635

• Section 504
  • PTSD - may be eligible for accommodations under 504
    • Mental impairment that limits
    • Major life activity
    • Substantial extent
If you proceed with the IEP or 504 process…

…how do you maintain a trauma-informed approach?
What do babies and traumatized youth have in common?
Trauma informed IEP

• Focus on what drives behavior
  • “Why is this occurring?”
• Focus on building self-regulatory skills rather than the behavior itself
  • “What skills does the child need?”
  • NOT just “How do I get student to behave?”

• CFTIEP???
Words Matter

• Individual needs provide a basis for annual goals
• How those needs are phrased drives the IEP process
Modify These Actual IEP Statements

- “The student’s attention-seeking behavior results in frequently interrupting the teacher”

  can be modified to

- “Student frequently seeks regulatory assistance through maladaptive communication”
- “Student relies on direct attention from teacher to help regulate during instruction.”

Modify These Actual IEP Statements

• “Student avoids the demands of activities he finds demanding through resistance or withdrawal”

  can be modified to

• “Student becomes overwhelmed by demanding activities and seeks to regulate frustration with resistance or withdrawal from the activity.”
• “Student regulates frustration and feelings of being overwhelmed through withdrawal.”

Modify These Actual IEP Statements

• “Student’s poor anger management skills result in acting-out behaviors.”

  can be modified to

NOW YOU TRY

What do these words convey in IEPs?

• “Escape” or “Avoid”
  • Demands
  • Settings

• “Violates”
  • Rules
  • School policies

• “In response to demands”
  • No choice or empowerment
What is the Educator’s role in these IEP goals?

• “Student will verbalize and express his feelings when becoming agitated”

• “Student will respond in a calm manner when consequences are administered”

Setting Goals

• When you learn about the function of a behavior, your goal is:
  • Less about stopping it
    • Benefits educator
  • More about finding an alternative
    • Benefits student and educator
Goal setting

Don’t do it

Or

Do it differently?

Maria will decrease protesting to 0 times per day

COULD INSTEAD SAY

Maria will effectively communicate and advocate for what she needs
More Goal Setting

• John will choose one of three self-soothing activities (drawing, listening to music on headphones, talking to Mr. Thompson) when agitated

• Maria will learn to identify her own stress triggers with assistance from her teacher and school counselor
Traps

- Goals involving “seeking attention”
- Goals that disempower or remove sense of control

- Goals that…make no sense
  - “Grace will stay in the classroom 4 out of 5 times.”
  - “John will not take his clothes off at school in 7 out of 10 opportunities.”

- How would you rewrite these goals?
Trauma-Focused Goals

• Improved relationships
• Self-regulation
• Social-emotional skill building
• Routines
• Helpful adult responses
What Better Way to Build Trust ...

- Than to have everyone in your life hold a meeting about you, make decisions for you, and not ask you once what you think...?

- Include the student in planning, when possible
Related Services/Goals/Accommodations

- Identifying and reducing/preventing triggers
  - E.g., recess adjustments
  - Bells between classes
  - Class transitions/busy hallways
  - Long school breaks/holidays
- Increasing predictability
- Self-identifying stress response – self-regulation
- Identify a trusted adult in times of stress
- Provide opportunities to assist
Related Services/Goals/Accommodations

• Positive Praise
• Building student’s social-emotional skills and vocabulary
• Building peer supports and relationships
• Have student work collaboratively with teacher on ambitious goal setting
• Movement and sensory opportunities
• Breaks (are they purposeful?)
Calm Rooms

• What are the elements of a good calm room?
Strength-based approach

- Do any goals specifically focus on building strengths?
  - VIA Institute on Character
  - Free character strengths survey for 10-17 years (and an adult version)

http://www.viacharacter.org/www/Character-Strengths-Survey

Eric Rossen

1. Humor
   Liking to laugh and tease; bringing smiles to other people; seeing the light side; making (not necessarily telling) jokes.

2. Love
   Valuing close relations with others, in particular those in which sharing & caring are reciprocated; being close to people.

3. Honesty
   Speaking the truth but more broadly presenting oneself in a genuine way and acting in a sincere way; being without pretense; taking responsibility for one's feelings and actions.
Strengths Based Approach

- What’s wrong with you?
- What Happened to you?
- What’s right with you?
Think about student’s resources

- **Object** resources
  - shelter, car

- **Condition** resources
  - marriage, educational status, job security

- **Personal** resources
  - self-esteem, optimism, social skills

- **Energy** resources
  - knowledge, money

Let’s Talk Tier 2 & 3 Classroom Strategies
Important reminder

• Many already do the right thing
  • By instinct

• Many have already made a difference
  • Though you may not ever know it
We can’t simply ask students to:

- “be optimistic”
- “be hardy”
- “be resourceful”
- “be intelligent”
- “be likeable”
- “have a sense of mastery and self-efficacy”
- “be competent”
- “have good social support”
- or to “cope effectively with your difficulties”? 

Layne et al., 2004
How do you handle distress?
Classroom sensory strategies

- Consider
  - Movement
  - Noise level
  - Visual stimulation
  - Smells
  - Touch-fidgeting

- Classroom Sensory Strategies – WI Department of Public Instruction
Establishing Trust with Peers

• Activities that build trust with peers
• Peer interviews
• What do you see? Activity
  • Pair students groups of 2-4
  • Each student writes down positive traits about each other
  • Share
Let’s Play a Game

• Turn to a partner, and give each other a compliment.
• The compliment should not be superficial (i.e., do not compliment on clothing, hair, outfit) – try to compliment on a characteristic you’ve noticed, or some quality that makes them unique, special, interesting, fun, etc.
Promoting Perspective Taking

• Ask for multiple perspectives during classroom discussions

• Encourage students to be social detectives, not judges

• Supportive, peer feedback opportunities

Gelbach, 2017
What’s Your Perspective?
Looking At All Sides

Perspective Taking

• Actions
• What Others See
• How Others May Feel
Yep, it’s me—the Big Bad Wolf. Now, before you run away or start crying, here’s something you should know. And this is the truth. The only thing “big” or “bad” about me is . . . Well, it’s my breath.

Doctors say I have UBS (Uncontrollable Breathing Syndrome). Basically, when I breathe, I let out huge gusts of air. I can’t control it. Believe me, I wish I could. It’s gotten me into SO much trouble.
Shifting Beliefs

• In the morning, write down what you think will happen today on the left-side of your paper

• At the end of the day, write down what actually happened
Building Social Emotional Capacities

“Anything that’s human is mentionable, and anything that is mentionable can be more manageable. When we can talk about our feelings, they become less overwhelming, less upsetting, and less scary. The people we trust with that important talk can help us know that we are not alone.”

— Fred Rogers
Emotions are complicated

- Emotional self-regulation is the ability to
  - Manage emotions (especially the negative ones)
  - Modify reactions
  - Behave adaptively to a situation
  - Use cognitive self-control
Emotional dysregulation looks like...

Significant emotional responses

- Inattention
- Low tolerance
- High frustration
- Inappropriate reactions
What educators can do

- Help label emotions in real time
- Allow students to feel what they feel (the focus is regulating thoughts and behaviors)
- Listen attentively – it affects you, but it’s not about you
- Assist, don’t punish (that won’t help)
- For homework, have students teach strategies to a friend or family member
- Avoid potentially embarrassing student in front of peers (avoid public power struggles)
- Check in at the beginning of the day (e.g., OTIS time) to regulate mood before the day begins
Self-Regulation: Control Card

Example:

<table>
<thead>
<tr>
<th>Control of My Anger</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What I am going to do:</strong> <em>Take a deep breath.</em></td>
</tr>
<tr>
<td><strong>Positive thought:</strong> <em>I am in control of my actions.</em></td>
</tr>
<tr>
<td><strong>Rules:</strong> <em>I will keep my hands to myself. I will only use kind words or none at all.</em></td>
</tr>
</tbody>
</table>
Brain Break Examples

Relaxation Rolls

Round 1
1. Clench your toes, count to three, then relax your toes.
2. Close your eyes tightly, count to three, then relax your eyes and face.
3. Clench your teeth, count to three, then relax your jaw.
4. Tighten your fists, count to three, then relax your hands.
5. Tighten your calf muscles, count to three, then relax your legs.
6. Tighten your stomach, count to three, then relax your stomach.

Balloon Breathing
Other Self-Regulation Techniques

- Movement - Sensory Path Video
  - https://www.youtube.com/watch?v=P4q8dNwsR3E
- Write down or list questions, concerns, frustrations. Share them later
- Roll your neck and shoulders
- Squeeze fists...hold...then release
- Draw a picture of what you would want to eat right now
- Say to yourself, “it’s ok to make mistakes”
Building an emotional vocabulary

Feelings Jenga

Emotional charades

Predictive reading with books
Classroom Examples
Tools

- Thermometers for all occasions!
  - Anger
  - Sadness

- Asking for help!
Examples

What's My Emotional Temperature?

EXPLOSIVE
How does it feel?
How do I look?
What can other people do?
Angry
cross my arms
red/pink
Few minutes to calm

AGITATED
How does it feel?
How do I look?
What can other people do?
Chatty
quiet
still
Not got what you want

EXCITED
How does it feel?
What do I do?
How do I look?
What can other people do?
Funny
singing
moving around
tical manners

CALM
How does it feel?
What do I do?
How do I look?
What can other people do?
Good
read a book
relaxed
be nice to my mom
Creating a feelings log

Create three columns on a paper

○ Pain/Stressor (feeling) - e.g., anxious about my exam
○ What happened - e.g., showed up to school late because I missed the bus
○ What I thought - e.g., things started off bad and there’s no way I can recover
Recognizing Emotional Limits

OUTRAGED
1. A school bully
2. When a teacher doesn’t get what I am explaining

ANGRY
1. When somebody cheats
2. When I do group work and have to do all the work

FRUSTRATED
1. Social studies
2. When people smacked my lunchbox out of my hand

ANNOYED
1. People stealing my pencils
2. Noise when you’re trying to think

CALM
1. Lunch
2. Silent reading
### Setting the Stage

<table>
<thead>
<tr>
<th>Where am I? What am I doing?</th>
<th>It is expected…</th>
<th>It would be surprising if…</th>
<th>If I did this people would feel…</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Responses</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


More specific supports and recommendations

• Incarcerated Parents
  • Help meet basic needs
  • Reassure
  • Create opportunities to connect with parent
  • Increase school connectedness
  • Stay informed
  • Change stigma around incarceration
  • Reach out to the existing caregiver
  • Do not blame or criticize incarcerated parent

• Caregiver’s Guide on How to Explain Jails and Prisons to Children:
  • http://www.starsmp.org/PDFs/explaining_prison_final.pdf
More specific supports

- Immigrant Refugee Students
  - Focus on strengths
  - Incorporate country of origin in lessons
  - Engage immigrant family as part of the school community
  - Support maintenance of home culture
  - Recruit mentors
More specific supports

- Military families
  - Record audio and video of parent with child
  - Know deployment cycles
  - Identify military families
  - Deployment countdown
    - Jar of M&Ms or paperclips
  - Encourage and support letter writing, journaling, or story writing
Kimberly is 13 years old and experiencing her father’s first deployment. She has a wonderful relationship with her father and had a difficult time when he left home. She cried each night for about a week because she was missing him. The mother provided her reassurances and support which helped her manage her emotions. Upon hearing that he was coming home for R and R, she decided it would be best for her NOT to see him at all …because it would be too hard to say goodbye to him again. She lived with friends on the other side of town while her father was home for 10 days and never saw him.
More specific supports

• Exposure to Community Violence
  • Help students get involved in community
  • Increase parental involvement and trust
  • Help develop before- and after-school opportunities
  • Reinforce safety as school
  • Be flexible
  • Brainstorm what to do in different situations
  • Predictable routines

• Music instead of bells at transition
How would you help address these stressors for students experiencing homelessness?

- High mobility
- Basic needs (clean clothes, safe housing)
- Lack of reliable transportation
- Poor health
- Separation from family, exposure to violence

- Know McKinney-Vento Act
  - legal requirements schools must fulfill to serve students experiencing homelessness
  - State coordinator and local liaison
Tier III, Intensive evidence-based interventions

- Cognitive Behavioral Intervention for Trauma in Schools (CBITS; Jaycox, Kataoka, Stein, Langley, & Wong, 2012)
- Trauma-focused cognitive behavioral therapy (TF-CBT; Child Welfare Information Gateway, 2012)
- Head Start Trauma Start (Holmes et al., 2014)
- Grief and Trauma Intervention for Children (http://www.childrens-bureau.com/gti)
- Bounce Back (https://bouncebackprogram.org/)
Maine Children’s Trauma Response Initiative

- Three primary goals
  - Develop community coalitions
  - Community awareness and education
  - “Train master’s-level mental health clinicians throughout Maine in the evidence-based model Trauma-Focused Cognitive Behavioral Therapy (TF-CBT).”
Marcus

- Marcus, 13, is often disruptive in class. He often doesn’t show a lot of interest in school and doesn’t follow rules consistently. His attendance is sporadic and seems distrustful of the adults in the building. As he walks into class one day, the teacher pats him on the back and says, “hello.” Before realizing it’s friendly he quickly turns around with his fists up saying “Don’t touch me mother f*%&%er!”
Considerations for Trauma Screening and Assessment
Assessment and Screening

- Trauma evaluations vs. trauma-informed assessment
- Trauma-informed assessments consider
  - Triggers
  - Settings/environments
  - Family background and functioning
  - History of stressors (self and family)
  - Strengths
  - Our own perceptions at point of referral
  - The way we build rapport
  - What questions we ask
  - Impact of experiences on performance
  - Predictable life events when planning assessments
  - How we involve and engage family
  - How we interpret the assessment
  - How we share information about the assessment
Considerations for Trauma Screening

• Should we do it????
  • Cons
    • Can create stigma
    • Label of being “traumatized” as student’s identity
    • Takes attention away from creating safe whole-school environments for all children (Cole et al., 2013)
    • Very little data available on how best to screen for trauma
  • Pros
    • Established association of trauma with negative outcomes
    • Can help identify resource allocation & scope of issue
Research has found some evidence suggesting that asking questions regarding trauma exposure and symptoms increases a child’s level of distress.
Canadian Collaboration for Immigrant and Refugee Health (CCIRH)

• “Routine administration of brief screening tools for PTSD has yet to demonstrate clear benefits and could be harmful.”

• “Do not conduct routine screening for exposure to traumatic events because pushing for disclosure of traumatic events in well-functioning individuals may result in more harm than good.”

• “Brief screening instruments overestimate the rate of disease because they focus on symptoms and do not measure functional impairment”
Meanwhile

- National Child Traumatic Stress Network’s 7 Key Elements of Trauma-Informed Systems
  - “#1: Screen routinely for trauma exposure and symptoms. “

- “An annual screening that assesses either directly or indirectly for trauma would be a helpful primary way of obtaining information and moving towards being trauma-informed. If the screen uncovers an experience of trauma, further assessment and referral to specialized services should take place.”
  - - Education Law Center
Why would we even assess for trauma?

Which is worse…?

1) False positives (identifying someone as experiencing trauma when they are not)

2) False negatives (identifying someone as not experiencing trauma when, in fact, they are)
Considerations for Trauma Screening

• What should we screen for?
  • ACEs?
  • Individual reactions that may indicate
  • Academic failure?
  • Risk factors?

Three Es (Event, Experience, Effect)
1. Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? or Act in a way that made you afraid that you might be physically hurt?

2. Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? or Ever hit you so hard that you had marks or were injured?

3. Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you?

4. Did you often or very often feel that ... No one in your family loved you or thought you were important or special? or Your family didn’t look out for each other, feel close to each other, or support each other?

5. Did you often or very often feel that ... You didn’t have enough to eat, had to wear dirty clothes, and had no one to protect you? or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
6. Were your parents ever separated or divorced?

7. Was your mother or stepmother often or very often pushed, grabbed, slapped, or had something thrown at her? or Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? or Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?

8. Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?

9. Was a household member depressed or mentally ill, or attempt suicide?

10. Did a household member go to prison?
What’s Your Number?

![Diagram] A Dimensional Approach to Childhood Adversity

**Fig. 1.** A dimensional model of childhood adversity involving two central dimensions of threat and deprivation. Examples of commonly studied forms of adversity are placed along these dimensions based on the degree to which each experience typically involves threat and deprivation. Larger circles indicate greater variance in the degree to which the experience reflects the underlying dimension.
The Pair of ACEs

Adverse Childhood Experiences

- Maternal Depression
- Physical & Emotional Neglect
- Emotional & Sexual Abuse
- Divorce
- Substance Abuse
- Mental Illness
- Domestic Violence
- Incarceration
- Homelessness

Adverse Community Environments

- Poverty
- Violence
- Discrimination
- Community Disruption
- Lack of Opportunity, Economic Mobility & Social Capital
- Poor Housing Quality & Affordability

Benevolent Childhood Experiences

When you were growing up, during your first 18 years of life...

1. Did you have at least one caregiver with whom you felt safe?
2. Did you have at least one good friend?
3. Did you have beliefs that gave you comfort?
4. Did you like school?
5. Did you have at least one teacher who cared about you?
6. Did you have good neighbors?
7. Was there an adult (not a parent/caregiver or the person from #1) who could provide you with support or advice?
8. Did you have opportunities to have a good time?
9. Did you like yourself or feel comfortable with yourself?
10. Did you have a predictable home routine, like regular meals and a regular bedtime?

Narayan, Rivera, Bernstein, Harris, & Lieberman, 2018
Promotive vs. Protective Factors

• Promotive
  • favorable outcomes for both low- and high-risk contexts

• Protective
  • Moderate or buffer against harm as risk rises

We should survey for both negative and positive factors simultaneously
Considerations for Trauma Screening

- Why are we screening?
  - Identify school- or district-level concerns
  - Identify students in need of targeted or intensive interventions
  - School-level considerations about where to focus resources

In other words, what will you do with the data?!?!
Considerations for Trauma Screening

- Parent consent
  - Active vs. passive
  - Self-selection bias

- Improving consent rates (Blodgett, 2012)
  - Ensure caregivers know rationale
  - Describe potential benefit
  - Increase trust
Consent – A Legal or Ethical Issue?

- May not be legally necessary if applying universal screening of **all students** for the purpose of:
  - planning behavioral strategies
  - Curriculum implementation

- Some school boards may have policies around informed consent for screenings
How might you explain why you are doing this screening to parents?

“We know that childhood histories of stress/trauma are much more common than once thought. In order for us to better understand the needs of our students and our community, we are asking to learn more about the various experiences that may cause stress for students and their families.”

“Information will be anonymous, and will be collected only to better understand the needs of the students in our school.”

“If you have any questions, contact us anytime at ______.”
Do you keep it anonymous?

- **Benefits**
  - Higher response?
  - More accurate response?

- **Cons**
  - Can’t respond to individual need
  - Only so much can be done with the information
  - Liability issues???
Multiple Choice

• When asking youth and parents about the youth’s stress or exposure to stress or trauma

A) They are usually in agreement
B) They are usually not in agreement, with parents rating higher levels of stress
C) They are usually not in agreement, with youth rating higher levels of stress
D) Are they still serving coffee?
Considerations for Trauma Screening

- Who completes the screening?
  - Teacher
  - Parent
  - Student
    - Developmentally appropriate
Some screening and assessment measures
(Wevodau, 2016:
http://www.nysap.us/Review%20of%20Trauma%20Screening%20Tools%20for%20Children%20&%20Adolescents.pdf

- **Exposure Measures:**
  - Juvenile Victimization Questionnaire (JVQ)
  - Survey of Children’s Exposure to Community Violence (SCECV)
  - Traumatic Events Screening Inventory (TESI)
  - Massachusetts Youth Screening Instrument-Version 2 (MAYSI-2), Traumatic Experiences subscale

- **PTSD Symptom Measures:**
  - Child PTSD Symptom Scale (CPSS)
  - Los Angeles Symptoms Checklist (LASC)
  - Structured Trauma-Related Experiences and Symptoms Screener (STRESS)
  - University of California at Los Angeles Posttraumatic Stress Disorder Reaction Index (UCLA PTSD-RI)

- **Trauma-Related Symptom Measures:**
  - Adolescent Dissociative Experiences Scale (A-DES)
  - Child and Adolescent Psychiatric Assessment (CAPA)
  - Trauma Symptom Checklist for Children (TSCC)
What do the data say about current screening and assessment measures?

- Existing measures limited in evidence of effectiveness and efficacy
- “Build your own” approaches may be logistically defensible though may lead to inconsistency and validity issues
- Exercise caution

8 steps for trauma screening

1. Identify the mission or goal of the trauma screening in very specific terms.
2. Identify and engage appropriate staff and stakeholders.
3. Identify what information is needed to achieve the mission or the goal, and whether that information already exists elsewhere.
4. Determine logistics of the screening (e.g., timing, who completes screening, communication with students and families, consent process, community partnerships).
5. Ensure the school or district has a plan and the resources available to respond to positive screens.
6. Conduct the screening and analyze the data at appropriate level (e.g., district, school, grade) based on goal of the screening.
7. Develop an action plan for implementation.
8. Communicate findings to relevant stakeholders.

Lazarus, Overstreet, & Rossen, in press
Trauma-Informed Schools
Environmental Scan Checklist

The purpose of this checklist is to identify areas of effectiveness and growth in creating a trauma-informed school environment. The checklist assesses the application of the six key principles of trauma-informed schools: Safety; Trustworthiness and Transparency; Peer Support; Collaboration and Mutuality; Empowerment, Voice and Choice; and Cultural, Historical, and Gender Issues. The checklist is designed to reflect the degree of application of the six key principles across a range of settings in the school (e.g., classroom, hallways, common outdoor spaces, etc.) and ratings should be completed by the observation team based on observations across settings.

School: ___________________ Date of Walk-Through: ___________________

Observer(s): ____________________________

Settings Observed:

_____ Office    _____ Building Interior   _____ Building Exterior   _____ Classroom

_____ Cafeteria  _____ Playground   _____ Gym   _____ Bus lines
<table>
<thead>
<tr>
<th>KEY PRINCIPLES AND INDICATORS</th>
<th>1 Principle is not at all in place</th>
<th>2 Principle is partially in place</th>
<th>3 Principle is mostly in place</th>
<th>4 Principle is fully in place</th>
<th>No opportunity to observe</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAFETY</td>
<td></td>
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<tr>
<td>Classrooms are arranged to minimize crowding and distraction.</td>
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<td>Classrooms are actively supervised during instruction.</td>
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<td>Activities are structured in predictable ways (e.g., explicit classroom routines, specific directions, etc.).</td>
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<tr>
<td>Changes, including new people and activities, are foreshadowed so students can predict what will happen next.</td>
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<tr>
<td>Positive supports for behavior are employed.</td>
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<tr>
<td>Positive adult attention is provided.</td>
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<tr>
<td>Adults refrain from interactions that could be shaming to children (i.e. insisting child do things that unduly stretches child’s capability, isolating child, scolding in front of peers).</td>
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<tr>
<td>Adults refrain from power struggles with children (i.e. verbal sparring, argumentative talk, “he said, she said”, proving child wrong, etc.)</td>
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<tr>
<td>Adults refer to children in descriptive ways and refrain from negative labels such as (i.e. manipulative, borderline, bad, untrustworthy).</td>
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<tr>
<td>Adults maintain a calm demeanor when interacting with students.</td>
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<tr>
<td>Adults model emotional control for students.</td>
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<tr>
<td>Student self-regulation skill building is implemented at a classroom level (e.g., breathing activities, movement, relaxation, calming).</td>
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</tbody>
</table>

**Notes:**

**Total Safety Score**: 1 2 3

*Based on general observations in this area, not necessarily the sum of the item scores.*
Review trauma-sensitive schools checklist with your team

- © 2012 Lesley University and Massachusetts Advocates for Children.
Have staff take social-emotional competencies checklist

https://safesupportivelearning.ed.gov/sites/default/files/TSS_Building_Handout_7_social_and_emotional_competencies.pdf
The value of data

“If we have data, let’s look at data. If all we have are opinions, let’s go with mine.”
– Jim Barksdale, former Netscape CEO
Data can help avoid bad decisions

Being Buried to the Neck in Sand Isn't Fun & It's Deadly
But remember…

Data inform decisions

Data *don’t* make decisions
Secondary Traumatic Stress

Yes, it’s real
Among a sample of 2,149 teachers in Maine that completed the survey, how many reported at least 4 out of 10 ACEs on the ACE screener?

A. 6%
B. 8.5%
C. 11%
D. 14.5%
Secondary Traumatic Stress

- Trauma-informed schools also support the adults
  - Pinch hitters
  - “Buddy” classrooms
  - Reducing stigma around mental health
  - Recognizing and awarding each other
  - Knowing each other
  - Environment of collaboration and shared mission
  - Adequate “substitute” pool
This is Hard Work

• Allow yourself:
  • Time to recoup
  • The ability to rest
  • The right to make mistakes (and lots of them)
  • The right to get angry/annoyed/frustrated/tired

• Just maintain an underlying foundation of caring for kids, especially those that need it most
The Payoff Matrix, Peter Senge (1999)

<table>
<thead>
<tr>
<th></th>
<th>EASY to Accomplish</th>
<th>HARD to Accomplish</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Impact</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low Impact</td>
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</tbody>
</table>
Self-care in the background

Altering one’s environment such that enjoyable objects or experiences (e.g., preferred music, desirable fragrances) are consistently present.
But....

- I don’t have time...
- I don’t have support from administrators...
- I did 150 initials & re-evals last year...
- My elbow hurts...

- **Try one thing**
  - Offer one brown-bag lunch at your school on the topic
  - Focus on learning strengths and interests of one really challenging student
  - Ask to put together a committee to review discipline policy within the next year
  - Review one recent IEP and review the goals to see if they are trauma-informed
  - Share NASP infographic on trauma with other staff
  - Other ideas?
As a school team, ask yourselves:

• How will our school be conscious of signs of trauma?
• What will we do when we suspect trauma?
• What is our procedure for making referrals?
• How do we handle abuse and neglect referrals?
• How do we reach out to families that need help?
• How do we maintain the dignity and confidentiality of a child’s family?
• How do we interface with the community in a way that communicates that we are a safe and respectful place?
• How will we be conscious of this in the academic, disciplinary and social arenas of our school culture?
• What is our shared vision for creating a trauma-informed school?
• How will we evaluate our effectiveness?

From Wisconsin Department of Public Instruction:
http://dpi.wi.gov/sspw/mental-health/trauma
"there is nothing more difficult to carry out … than to initiate a new order of things. For the reformer has enemies in those who profit by the old order, and only lukewarm defenders in all those who would profit by the new order."

--Macchiavelli.
Resources

- Trauma Sensitive Schools Training Package (USDE and AIR)
- RAND: How You Can Help Students Recover from Traumatic Experiences
- Creating Trauma Sensitive Schools to Improve Learning: WI Dept. of Public Instruction
- Helping Traumatized Children Learn [Trauma and Learning Policy Initiative]
- Child Trauma Toolkit for Educators: NCTSN
- Compassionate Schools: The Heart of Teaching and Learning
- Massachusetts Trauma Sensitive Schools
- Trauma Stewardship Institute
- Mind Yeti by Committee for Children
- Illinois Childhood Trauma Coalition
- CASEL (SEL curriculum/activities by grade levels)
- Trauma Responsive Schools Implementation Assessment
- Supporting and Educating Traumatized Students: A Guide for School-based Professionals (DISCLAIMER)
  - 30% OFF Code ASPROMP8 by going to oup.com/us
Resources - Disclaimer

Supporting and Educating Traumatized Students: A Guide for School-based Professionals
30% OFF Code ASPROMP8 by going to oup.com/us

2nd Edition coming soon!
Questions? Comments? Insults?

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Contact me anytime😊