Applying Trauma Informed Strategies in School Settings

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Goals & Objectives

Goal: To better understand the impact of trauma and the interrelationship of trauma and learning.

Objectives:

- Increase comfort and understanding of trauma and how it looks in children in school settings.
- Identify and implement strategies to help children experiencing traumatic stress symptoms.
- Manage personal and professional stress in their helping professions.
What is Trauma?

- Trauma is a serious physical or psychological injury that has resulted from a highly threatening, terrifying, or horrifying experience.
  
  (Echterling, Presbury, & McKee, 2005)

- Trauma arises from an inescapable stressful event that overwhelms an individuals’ coping mechanisms.

  (Van der Kolk & Fisler, 1995)
Trauma Facts for Educators

- Greater likelihood of performing below grade level
- Higher rates of office referrals, suspensions, and expulsions
- Decreased reading ability, language and verbal processing deficits, delays in expressive and receptive language
- Greater tendency to be misclassified with developmental delays or referred for special education services

NCTSN, 2014
The Invisible Backpack

- Trauma affects how children feel, behave, and think...
- What is in a student’s invisible backpack?

What you may see...

- Anxiety, fear, and worry
- Changes in behavior (anger outbursts, change in academic performance, irritability, absenteeism)
- Heightened difficulty with authority, redirection, or criticism
- Emotional numbing
- Over or under reacting to environmental stimuli (sirens, physical contact, doors slamming, bells)
- Repetitive thoughts and comments about death or dying (including writing and artwork)
Adverse Childhood Experiences (ACEs) Study

- Adverse Childhood Experiences (ACEs) Study
  Centers for Disease Control & Prevention (CDC)
- Effects of childhood adverse experiences
  - neurological
  - biological
  - psychological
  - social
### Adverse Childhood Experiences (ACEs) Study

#### Household dysfunction
- **Substance abuse**: 27%
- **Parental separation/divorce**: 23%
- **Mental illness**: 19%
- **Battered mother**: 13%
- **Incarcerated household member**: 5%

#### Abuse
- **Psychological**: 11%
- **Physical**: 28%
- **Sexual**: 21%

#### Neglect
- **Emotional**: 15%
- **Physical**: 10%

*Center for Disease Control & Prevention*
Adverse Child Experiences (ACEs) Study

Summary of Findings

• Adverse Childhood Experiences (ACEs) are:
  • very common, and
  • strong predictors of health risks & disease from adolescence to adulthood
• This combination of findings makes ACEs one of the leading, if not the leading determinant of the health & social well-being of our nation
• National study – http://www.cdc.gov/ace/index.htm
Adverse Child Experiences (ACEs) Study

- Traumatized children are:
  - 2.5x more likely to fail a grade in school
  - score lower on standardized achievement tests
  - more likely to have struggles in receptive & expressive language
  - suspended & expelled more often
  - more frequently placed in special education
Trauma Exposure v. Trauma Reaction

All children are impacted by a traumatic event; however, not all children are traumatized. Children are resilient and they just need the opportunity to strengthen that resilience through the help of people like you.
Impact on the Brain: Stress Response

- Two parts of our brain respond to danger
  - “Doing” Brain
  - “Thinking” Brain
- Responses to danger and/or fear:
  - Fight
  - Flight
  - Freeze
Impact of Trauma on the Child

- Cognitive functioning & Academic capabilities
- Physical appearance
- Emotional well-being
- Spirituality
- Developmental impairment
- Relationships
- Worldview
- Learning
- Classroom behavior
Trauma Informed Care

- The principles of Trauma-Informed Care hold great potential for helping people to recover from the effects of adverse childhood experiences. (SAMHSA, 2011)
- Applying trauma-informed or trauma-sensitive strategies can help to create supportive school environments with positive relationships that empower trauma survivors.
- Moving from “What’s wrong with you?” to “What happened to you?”
<table>
<thead>
<tr>
<th>Therapy</th>
<th>School</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Licensed clinical mental health professionals</td>
<td>• Licensed educators &amp; pupil services professionals with varied mental health training</td>
</tr>
<tr>
<td>• Intervention occurs in therapist’s office in 1:1 or small group sessions</td>
<td>• Sensitivity &amp; accommodations occur throughout the school</td>
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<tr>
<td>• Focus is on addressing trauma reactions &amp; reducing symptoms</td>
<td>• Focus is on students’ educational success through emotional &amp; physical safety, empowerment, trust, choice, &amp; collaboration</td>
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Applying Trauma Informed Strategies

• Acknowledge the prevalence of traumatic occurrence in students’ lives & create a flexible framework that provides universal supports
• Sensitive to unique needs of students
• Mindful of avoiding re-traumatization.
Applying Trauma Informed Strategies

- Do you have children who have been impacted by trauma in your school/district?
- What initiatives or practices are already occurring in your school/district?

https://youtu.be/49GzqPP7YYk
Applying Trauma Informed Strategies

- Engage your leadership, administrative direction & commitment
- Priority for school improvement
- Allocate Resources
- Tie into existing, related initiatives (e.g., RtI/PBIS)
- Assess strengths/needs
  - Current programs & strategies
  - Gaps in services
- Review policy & procedures
- Provide Staff Training
Applying Trauma Informed Strategies:
Using PBIS Framework to Support Learning for Children Impacted by Trauma

**Tier 1** – Universal strategies & instruction for all students
**Tier 2** – Additional supports for students with milder symptoms of trauma or in high-risk groups
**Tier 3** – Intensive & ongoing interventions for students deeply impacted by trauma

* TIC Values & Key Areas apply across all 3 tiers of the PBIS Framework.

*TIC Values are from Fallot & Harris, Community Connections, [www.ccdc1.org](http://www.ccdc1.org)
Applying Trauma Informed Strategies

- **Establish Safety**
  - Individual accommodations
  - Predictability-Structure-Consistency
  - Reduce seclusion & restraint

- **Empowerment**
  - Mental health in curriculums
  - Building

- **Collaboration**
  - Consultation Teams – FBA, fellow staff
  - Student & Family Centered

- **Choice**
  - Gives Choices & Alternatives
  - Safe places to cope

- **Trust**
  - Positive regard
  - Rationally detach
  - Role model
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Self Care

We can’t teach what we don’t know. We can’t lead where we won’t go.” ~Malcolm X

Compassion
↓
Empathy
↓
Vicarious/Secondary Trauma
↓
Compassion Fatigue
↓
Burnout

Compassion Satisfaction

Compassion
Empathy

Self-Care
Self-Care

- Exercise and eating healthy
- Engaging in a hobby or activity
- Creating a health consistent structure and pattern in your personal life.
- Knowing your limits.
- Improving your understanding of trauma and secondary trauma.
- Taking a time out.
- Seeking support from co-workers, family, friends
- Professional counseling
- Vacations
Next Steps: Applying Strategies in Schools

Why do we feel an urgency to become trauma-sensitive?

How do we know we are becoming a trauma-sensitive school?

How do we know we are ready?

What actions will address priorities and help transition?
Resources & Acknowledgments

- Child Trauma Academy (Dr. Bruce Perry) [http://childtrauma.org](http://childtrauma.org)
- National Center for Trauma Informed Care [http://mentalhealth.samhsa.gov/nctic/](http://mentalhealth.samhsa.gov/nctic/)
- *The Emotional Brain*, J LeDoux
- Bessel van der Kolk, [http://www.traumacenter.org](http://www.traumacenter.org)
- Dr. Robert Anda, CDC (ACE Study)
- *Helping Traumatized Children Learn*, Massachusetts Advocates for Children 2005
- Understanding Traumatic Stress in Children Bassuk M.D., Ellen L.; Konnath LICSW, Kristina; Volk MA., Katherine T.
- *The Heart of Learning and Teaching Compassion, Resiliency & Academic Success* Wolpow, Ray; Johnson, Mona M.; Hertel, Ron; Kincaid, Susan O. 2009
- Wisconsin Department of Public Health [www.dpi.wi.gov](http://www.dpi.wi.gov)
Contact

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