7 Essential Ingredients of Trauma Sensitive Schools

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TASN ATBS School Mental Health Initiative Webinar Series

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SMHI 2017 Webinar Series
Learning Targets

• Participants will understand the high prevalence of trauma in our classrooms.

• Participants will have access to resources and strategies to create trauma sensitive practice in their school.

• Participants will learn strategies to combat compassion fatigue and burnout in educators.

Trauma-Sensitive Schools

A Perspective that…

• acknowledge the prevalence of traumatic exposures in students’ lives
• provides universal supports and informs our framework for intervention
• is sensitive to unique needs of students and is mindful of re-traumatization
The Wisconsin TSS Project

- Developed by Sara Daniel and Pamela Black
- School based cross disciplinary teams
- Internal/external coaching
Wisconsin School Mental Health Initiative

Trauma-Sensitive Schools
Module 3: Neuroscience

Sara Daniel, SaintA
Pam Black, Trauma Sensitive Education

Module #3: Learning Target

Learners will understand:

- Child development through a neurodevelopmental lens
- Building healthy and resilient brains
- Fight, flight or freeze response to threat
- Impact of trauma on the developing brain
Module #3: Classroom Sensory Strategies

All of us have sensory needs, things that we seek out to help us regulate or things we avoid, because they make it harder for us to tolerate stress. This tool is designed to help teachers examine their classrooms using a sensory lens by prompting two questions:

1. What sensory behaviors am I seeing in my classroom?
2. What sensory options can I have available in my classroom to help my students be more available to learn?

Note: Students who do not respond to a variety of sensory options in the classroom may benefit from a student-specific sensory profile completed by a qualified occupational therapist to determine student-specific needs and strategies.

<table>
<thead>
<tr>
<th>Sensory Area</th>
<th>General Observations</th>
<th>Specific Observed Behavior</th>
<th>Sensory Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Movement</td>
<td>Students need gross motor movement to maintain regulations or become dysregulated when they do not have gross motor movement.</td>
<td>Rocking/waving</td>
<td>Rocking chair seat</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Jumping</td>
<td>Wiggle seat</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Running/walking around</td>
<td>Stand up and down desk</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Chaotic or flaccid movement</td>
<td>Stand up and down desk</td>
</tr>
<tr>
<td></td>
<td>Students become dysregulated by too much movement or activity.</td>
<td>Doodling, scribbling</td>
<td>Yoga, stretching</td>
</tr>
<tr>
<td></td>
<td>Students need fine motor movement to maintain regulations or become dysregulated when they do not have fine motor movement.</td>
<td></td>
<td>Nitro-butter, deep breathing</td>
</tr>
<tr>
<td>Temperature</td>
<td>Students report being too hot or too cold.</td>
<td>Too hot</td>
<td>Coloring book, free drawing, listening</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Too cold</td>
<td>Blankets</td>
</tr>
<tr>
<td>Auditory/Listening</td>
<td>Students become dysregulated when the room is loud, students seek quiet.</td>
<td>Too loud</td>
<td>Noise-cancelling headphones</td>
</tr>
<tr>
<td></td>
<td>Students become dysregulated when room is quiet, students create noise when it is quiet.</td>
<td>Too quiet</td>
<td>Quiet corner</td>
</tr>
</tbody>
</table>

Using the PBIS Framework to Better Support Students Affected by Trauma

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

Roger D. Fallot, Ph.D. and Maxine Harris, Ph.D., 2009

http://dpi.wi.gov/sspw/mental-health/trauma
Trauma Definition

1) Exposure to an event that threatens/harms physical or emotional integrity of the individual or someone close to them

2) Overwhelms the person’s ability to respond

3) Creates significant difficulty in functioning

Types of Trauma

- Acute trauma: The response to a one-time event

- Complex trauma: Exposure to multiple traumatic events, often of an invasive, interpersonal nature, and the wide-ranging, long-term impact of this exposure (*National Child Traumatic Stress Network*)

Polling Questions

A trauma sensitive schools is one that:

a. Provides universal supports through a trauma sensitive framework and is mindful of re-traumatization

b. Screens for trauma to be able to make referrals for special education services

c. Encourages parents to seek treatment for their child to help control negative behaviors

Trauma Sensitive Schools

7 Essential Ingredients

1. Prevalence
2. Impact
3. Perspective Shift
4. Regulation
5. Relationship
6. Reason To Be
7. Caregiver Capacity
#1: Prevalence
Adverse Childhood Experiences (ACE) Study
Center for Disease Control and Prevention

<table>
<thead>
<tr>
<th>Household dysfunction</th>
<th>Kaiser’ %</th>
<th>WI** %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance abuse</td>
<td>27%</td>
<td>27%</td>
</tr>
<tr>
<td>Parental separation/divorce</td>
<td>23%</td>
<td>21%</td>
</tr>
<tr>
<td>Mental illness</td>
<td>19%</td>
<td>16%</td>
</tr>
<tr>
<td>Violence between adults</td>
<td>13%</td>
<td>16%</td>
</tr>
<tr>
<td>Incarcerated household member</td>
<td>5%</td>
<td>6%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Abuse</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychological /Emotional</td>
<td></td>
<td>11%</td>
</tr>
<tr>
<td>Physical</td>
<td></td>
<td>28%</td>
</tr>
<tr>
<td>Sexual</td>
<td></td>
<td>21%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Neglect</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional</td>
<td></td>
<td>15%</td>
</tr>
<tr>
<td>Physical</td>
<td></td>
<td>10%</td>
</tr>
</tbody>
</table>

* Center for Disease Control and Prevention 1995-97
** Wisconsin Child Abuse and Neglect Prevention Board
https://preventionboard.wi.gov/Pages/OurWork/ACE.aspx

65%
Have at least one ACE

ACE Score = 0 1 2 3 4+

Center for Disease Control and Prevention, 2017
Prevalence of Trauma: Other ACEs

- Urban ACE Indicators
  - Witnessed violence 40.5%
  - Felt discrimination 34.5%
  - Unsafe neighborhood 27.3%
  - Experienced Bullying 7.9%
  - Lived in foster care 2.5%

The Health Federation of Philadelphia, 2016
http://www.instituteforsafefamilies.org/philadelphia-urban-ace-study
#2: Impact

Impact: ACE Related Health Outcomes

![Image showing impact of ACE score on response to serious health issues]

Impact: ACE Related Health Outcomes

Response (serious health issues) vs. ACE Score (trauma dose)

- 0
- 1
- 2
- 3
- 4+

ACE Score (trauma dose)
**ACE Related Health Outcomes**

- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease (IHD)
- Liver disease
- Risk for intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking

Center for Disease Control and Prevention, 2016

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**ACE and School Performance**

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

*The Heart of Learning and Teaching Compassion, Resiliency and Academic Success*  Wolpaw, Ray; Johnson, Mona M.; Hertel, Ron; Kincaid, Susan O. 2009
[http://k12.wa.us/CompassionateSchools/HeartofLearning.aspx](http://k12.wa.us/CompassionateSchools/HeartofLearning.aspx)
# Impact on Worldview

<table>
<thead>
<tr>
<th>Optimal Development</th>
<th>Developmental Trauma</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Nurturing and stable attachments with adults</td>
<td>• Basic mistrust of adults/inability to depend on others</td>
</tr>
<tr>
<td>• Belief in a predictable and benevolent world/generally good things will happen to me</td>
<td>• Belief that the world is an unsafe place/bad things will happen and they are usually my fault</td>
</tr>
<tr>
<td>• Feeling of positive self-worth/others will see my strengths</td>
<td>• Assumption that others will not like me</td>
</tr>
<tr>
<td>• Optimism about the future</td>
<td>• Fear and pessimism about future</td>
</tr>
<tr>
<td>• Feeling that I can have a positive impact on the world</td>
<td>• Feelings of hopelessness and lack of control</td>
</tr>
</tbody>
</table>

# Impact on Learning and Behavior

## Impact on Learning
- Organization
- Cause and effect
- Memory
- Executive functioning
- Attention
- Academic engagement
- Intrusive thoughts
- Receptive and expressive language
- Fine motor skills
- Frustration tolerance/perseverance

## Impact on Behavior
- Reactivity
- Impulsivity
- Attention (vigilance/dissociation)
- Relational engagement
- Emotional regulation
- Social and emotional development
- Aggression
- Withdrawal
- Perfectionism
Polling Question #2

Trauma sensitive schools is most effective at the universal level because the ACEs study tells us that ______% of people will be exposed to an adversity prior to age 18.

a. 10%
b. 65%
c. 98%

#3: Perspective Shift
Assumptions

1. Behavior is communication

2. “Kids do well, if they can.”
   Greene, R. PhD, Lost at School (2008)

   Student challenges are most often an expression of:
   - Unsolved problems
   - Lack of skills
   - Unmet needs

3. We are seeking an effective intervention, not an appropriate consequence

Perception: How do we view children?

<table>
<thead>
<tr>
<th>Traditional View</th>
<th>Trauma Informed View</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acting out child</td>
<td>Emotionally dysregulated child</td>
</tr>
<tr>
<td>Anger management problems</td>
<td>Scared / fight, flight, freeze response</td>
</tr>
<tr>
<td>Willful and naughty</td>
<td>Adaptive patterns of behavior</td>
</tr>
<tr>
<td>Manipulative</td>
<td>Seeking to get needs met</td>
</tr>
<tr>
<td>Uncontrollable</td>
<td>In need of skills to self-regulate</td>
</tr>
<tr>
<td>Off task/ not paying attention</td>
<td>Hypervigilant or dissociative adaptations</td>
</tr>
<tr>
<td>Pushing buttons</td>
<td>Negative template or worldview</td>
</tr>
<tr>
<td>In need of consequences to motivate</td>
<td>In need of effective intervention to heal</td>
</tr>
</tbody>
</table>
Perception: How do we view parents?

<table>
<thead>
<tr>
<th>Traditional View</th>
<th>Trauma Informed View</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-compliant, disrespectful</td>
<td>Scared, seeking control</td>
</tr>
<tr>
<td>Lazy</td>
<td>Feels helpless</td>
</tr>
<tr>
<td>Uncaring, disengaged</td>
<td>Overwhelmed, disenfranchised</td>
</tr>
<tr>
<td>Manipulative</td>
<td>Seeking to get needs met</td>
</tr>
<tr>
<td>Angry</td>
<td>Survival adaptation</td>
</tr>
<tr>
<td>Delayed/ “slow”</td>
<td>Dissociative</td>
</tr>
<tr>
<td>System distrust</td>
<td>Historical trauma</td>
</tr>
</tbody>
</table>

Shifting Perspective: Getting Started

Aligning initiatives
- Framework, Practice, Program?
- Common Objectives – Academics, Behavioral or student wellbeing?

Evaluating current practice
- Stop, start, continue, change (See Module #6)
- Assessing practice through TSS lens (See Module #6)
- School-wide behavior supports (see Module #12)
- School-wide discipline (see Module #13)

Trauma Sensitive Self Assessment (evaluation/ module #5)
#4 Regulation

The Stress Responses
**Stress and our Physiology**

**Noticeable Effects**
- Pupils dilate
- Mouth goes dry
- Muscles tense
- Heart pumps faster
- Breathing rate increases
- Chest pains
- Palpitations
- Perspiration
- Hyperventilation

**Hidden Effects**
- Brain prepares body for action
- Adrenaline released
- Blood pressure rises
- Liver releases glucose to provide energy for muscles
- Digestion slows or ceases
- Cortisol released (depresses immune system)

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**Adaptive Response**

<table>
<thead>
<tr>
<th>Hyperarousal Continuum</th>
<th>Rest</th>
<th>Vigilance</th>
<th>Freeze</th>
<th>Flight</th>
<th>Fight</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Rest</td>
<td>Vigilance</td>
<td>Resistance</td>
<td>Defiance</td>
<td>Aggression</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dissociative Continuum</th>
<th>Rest</th>
<th>Avoidance</th>
<th>Compliance</th>
<th>Dissociation</th>
<th>Fainting</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Primary secondary Brain Areas</th>
<th>F-CORTEX</th>
<th>CORTEX</th>
<th>LIMBIC</th>
<th>MIDBRAIN</th>
<th>BRAINSTEM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cortex</td>
<td>Limbic</td>
<td>Midbrain</td>
<td>Brainstem</td>
<td>Autonomic</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cognition</th>
<th>Abstract</th>
<th>Concrete</th>
<th>Emotional</th>
<th>Reactive</th>
<th>Reflex</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Mental State</th>
<th>CALM</th>
<th>AROUSAL</th>
<th>ALARM</th>
<th>FEAR</th>
<th>TERROR</th>
</tr>
</thead>
</table>

Bruce D Perry © 2010

www.ChildTrauma.org
How do we intervene in the classroom?

Categories of Strategies

• Sensory
• Regulatory
• Relational
What are our current strategies?

- Increase consequences (suspension, take away recess)
- Set up reward system/incentives
- Lower expectations
- Insight oriented learning and self-reflection
- Cognitive behavioral therapy
- Behavior management programs

Sensory Needs

**Sensory categories**

- Proprioception / Movement
- Vestibular/ Balance
- Temperature/Touch
- Auditory
- Vision
- Smell
- Taste/ Chewing

- What might sensory triggers look like?
- What might sensory preferences/ seeking look like?
Self Regulation

- Art
- Music
- Yoga, stretching,
- Bouncing a basketball, playing catch
- Aerobic Exercise [https://www.youtube.com/watch?v=6Rivxc5-2CQ](https://www.youtube.com/watch?v=6Rivxc5-2CQ)
- Bal-a-vis-x [https://www.youtube.com/watch?v=_mbQv34Zsw](https://www.youtube.com/watch?v=_mbQv34Zsw)
- Comfort/ sensory rooms
- Pet assisted work
- Ritual and routine
- Deep breathing,
- Mindfulness [https://www.youtube.com/watch?v=U9hPhW1h08&feature=player_embedded](https://www.youtube.com/watch?v=U9hPhW1h08&feature=player_embedded)
# 5: Relationship

Rita Peirson– Every Child Needs a Champion
http://www.ted.com/talks/rita_pierson_every_kid_needs_a_champion

Elements of Relationship Building

**Safety**
- Predictable structure and routines
- Consistency

**Empowerment**
- Growth mindset
- Build on strengths
- Teaching skills of regulation, problem solving, social and emotional learning

**Trust**
- Meeting needs
  - Physical safety
  - Recognizing triggers
  - Seclusion and restraint
- Follow through

**Collaboration**
- Collaborate with students to get input on school rules, policies, curriculum, etc.

**Choice**
- Student driven planning and decision making
- Individualized learning

Roger D. Fallot, PhD and Maxine Harris, PhD (2009)
Boundaries

#6: Reason to Be

- Past: How did I come to be?
- Present: Who am I and what is my purpose?
- Future: Who do I hope to become?

- Family identity, culturally responsive
- Strengths and competencies; identity development
- Hope, optimism, vision & mission
Impact: Resilience

7 Factors Related to Resilience

1. Access to supportive relationships
2. Development of a desirable personal identity
3. Experiences of power and control
4. Experiences of social justice
5. Access to material resources
6. Experiences of a sense of cohesion with others
7. Adherence to cultural traditions

Michael Ungar, PHD 2007

#7 Caregiver Capacity
The Cost of Caring

- Personal Experiences/Trauma History
- Primary Stress/Ongoing Traumatic Exposure
- Systemic Stress
- Vicarious Trauma/Secondary Traumatic Stress
- Compassion Fatigue/Burnout

- Compassion Satisfaction
- Regulation
- Reason to Be
- Secondary Traumatic Stress/Vicarious Trauma
- Positive School Culture
- Self-awareness
- Relationships
- Systemic Stress
- Primary Stress/Ongoing Traumatic Exposure
Self-Awareness

Personal Awareness:
• Acknowledging personal trauma history/ ACE score.
• Recognizing its role in your way of being
• Seeking professional support as needed

Red Flags
• Changes in friends or activities
• Sleeping /eating issues
• Intrusive thoughts
• Medical Concerns
• Withdrawal/ numbing
• Others?

Self-Assessment
• Beth Hudnall Stamm - ProQOL [http://www.proqol.org](http://www.proqol.org)

Positive School Culture

• Wellness program
• Work/life balance is valued
• Open communication
• Positive problem solving
• Supportive culture (ask for help, tapping out)
• Gratitude and celebrations
Strategies for us

- Regulation
- Relationship
- Reason to be

Self Care Plan
Sara Daniel sdaniel@sainta.org

For professional development
http://www.sainta.org/trauma-informed-care/community-training/

For train the trainer
http://www.sainta.org/trauma-informed-care/

For consultation or professional development on your site
http://www.sainta.org/trauma-informed-care/inquiry-form/

Credits and References

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- Carol Dweck Mindset- The New Psychology of Success
- Dr. Robert Anda, (ACE Study); ACE Interface http://www.aceinterface.com/
Credits and References

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